

Pictured from the left: Kyle O. Colle, DO, Scott R. Gibbs, MD, FACS, Kevin A. Vaught, MD and Paul J. Tolentino, MD, PhD.



TREATING *Spinal pain*

Growing Alternatives to Surgical Intervention for Back and Neck Pain

A patient calls his physician about nagging pain in the lower back. For primary care physicians, back pain — and to a lesser degree, neck pain — is among the most common conditions for which people seek medical care. According to a national survey, an estimated one out of every four adults in the United States has reported back pain lasting more than a day. Almost 14 percent of all adults suffer from episodic neck pain.

“No two people are exactly the same in the diagnosis or treatment of their back pain,” says Scott R. Gibbs, MD, FACS, a Board Certified neurosurgeon on the Medical Staff of Southeast Missouri Hospital. “But even when it’s severe, we’ve found that with proper medications, therapy, manipulative interventions, or advanced minimally invasive procedures, six out of 10 patients we see don’t have to undergo traditional surgery to alleviate their pain.”

Dr. Gibbs and his associates at the Brain and NeuroSpine Clinic of Missouri have an extensive “toolbox” of therapeutic options to treat spinal pain, including simple back pain, pinched nerves, arthritic conditions, degenerative disc disease and complex spinal deformities or injuries. The first step is to have each patient undergo a comprehensive examination.

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Comprehensive examination of patient includes:

A Thorough Medical History

- How long has the pain been present?
- Exact location of pain
- Characterization of pain (episodic, chronic, severe, radiating.)
- What activities worsen the pain?
- What diagnostic images have been taken?
- What treatments (over-the-counter or prescribed) have been attempted, including medications or physical therapy?

A Thorough Neurological Exam

A complete "nose-to-toes" neurological exam as well as a general physical exam.

A Full Discussion of Diagnostic Tools Available

In addition to traditional x-rays to identify any skeletal deformities/injuries, discussion includes advanced imaging recommendations such as MRI, CT and PET.

The Brain and NeuroSpine Clinic is the only neurosurgical practice in Cape Girardeau participating in clinical evaluations of the PEEK Prevail® cervical interbody implant and the Intrepid® lumbar interbody spacer.

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Pain Treatment

Treatment options run the gamut from bed rest, oral pain medications and injections for episodic pain to major reconstructive surgery for spinal deformities or injuries. Careful, multidisciplinary approaches to treatment enable patients to review and understand a variety of options for care. With extensive expertise in the treatment of spinal conditions, Dr. Gibbs and his associates often see new patients who self-refer as well as those seeking a second opinion for chronic pain treatment.

"Some patients are told that if they don't have surgery, they could become debilitated or, to the extreme, paralyzed," says Dr. Gibbs. "The surgeons in our group have long-standing expertise in treating spinal conditions, and we have committed to learning the newest procedures and obtaining the latest technologies to ensure the best care for every patient."

With a trend toward treating spinal pain in ways that maximize movement and functionality, Dr. Gibbs says treatment options are constantly changing.

"The old way, for more than 20 years, was to fuse anything that was degenerating in the spine," he explains. "But that dramatically affected a patient's quality of life because fusion restricts the natural mobility of the spine. Now, we are able to use endoscopes and microscopes to view through smaller incisions, insert artificial discs and shore up collapsed vertebrae through incisions smaller than the diameter of a pencil. Patients often go home the same day of their procedure and with less pain and discomfort."

Latest Procedures

Among the latest procedures in use by Drs. Gibbs, Kevin A. Vaught, MD, Paul J. Tolentino, MD, PhD, and Kyle Colle, DO, at the Brain and NeuroSpine Clinic are Kyphoplasty, which involves the use of a special balloon catheter and bone cement to stabilize a vertebral compression fracture; and implantation of the Prestige® Cervical Disc, the first artificial disc approved by the federal Food and Drug Administration for treatment of degenerative cervical disc disease.

The Brain and NeuroSpine Clinic also is the only neurosurgical practice in Cape Girardeau participating in clinical evaluations of the PEEK Prevail® cervical interbody implant and the Intrepid® lumbar interbody spacer being developed by Medtronic, Inc. The devices use a combination of bone morphogenic proteins and supportive disc spacers that already are proving to be successful alternatives to traditional spinal fusion surgery for degenerative disc disease in the neck and lower back.

"Instead of having to obtain bone grafts from a patient's hip to fill a supportive vertebral device, we use a special bone growth protein to fill the disc spacer," says Dr. Gibbs. "The procedure eliminates the need for a patient to suffer the discomfort of another surgical site to obtain bone material. It also is an alternative to cadaver bone grafts that may raise concern regarding the transmission of infectious diseases. These truly are the latest devices being evaluated for patients suffering from severe cervical and lumbar disc disease."

"We are, first and foremost, a conservative surgical group," says Dr. Gibbs. "Complex surgery is the last option we discuss with our patients because of the wide variety of minimally invasive options available that we have the expertise to offer. Couple that with the effectiveness of rehabilitative therapies, chiropractic interventions, targeted physical therapy, and pain management with conservative use of pharmaceuticals, and we have the full spectrum of treatment options available to patients suffering from neck or back pain."

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