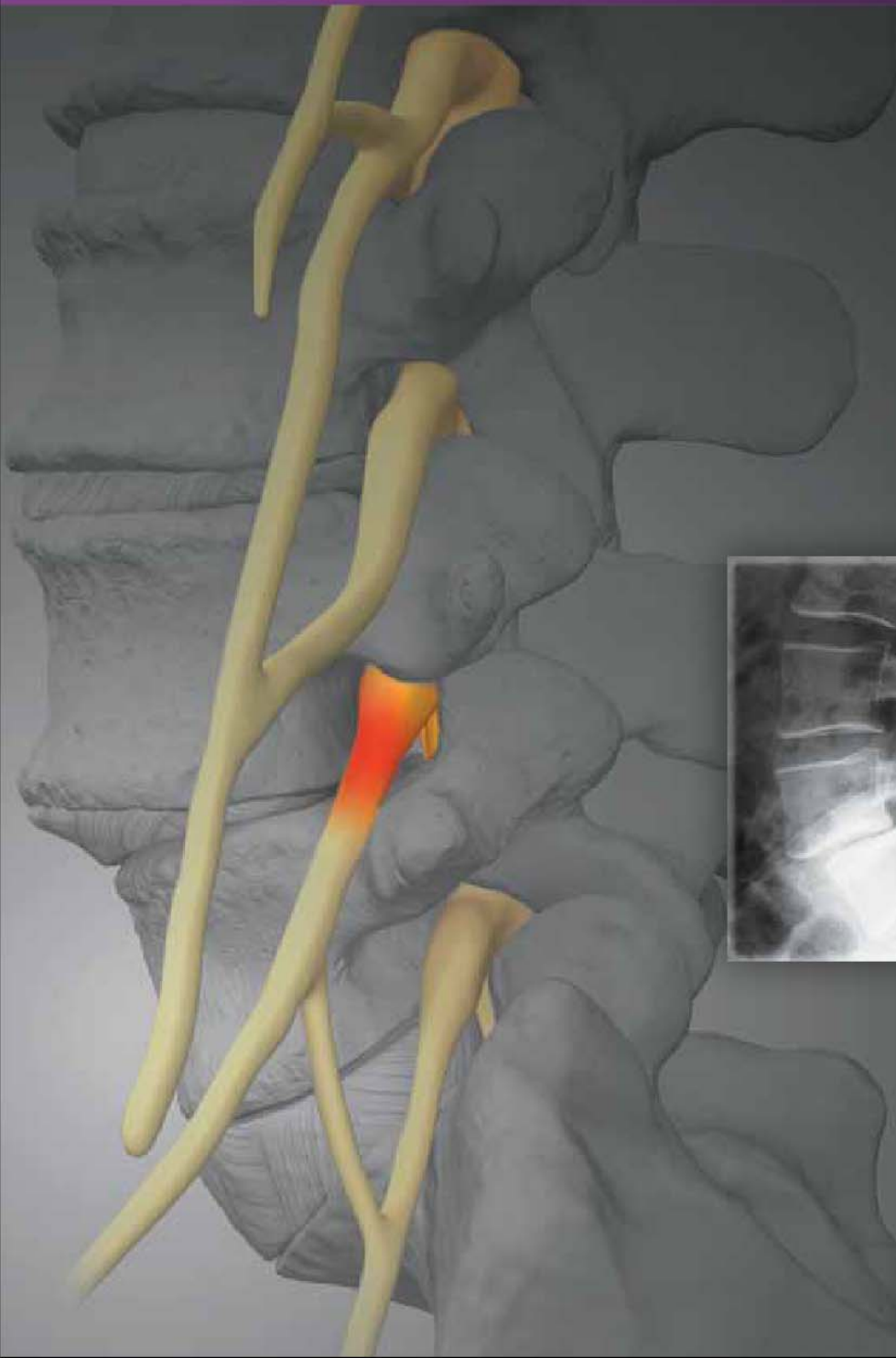




XLIF® for Degenerative Spondylolisthesis



DEGENERATIVE SPONDYLOLISTHESIS

Vertebral body displacement associated with degenerative spondylolisthesis can lead to central, sub-articular, and foraminal stenosis. Traditionally when treating degenerative spondylolisthesis, the surgical goals are to decompress the nerves, stabilize the spine, stop painful motion, and obtain a fusion across the unstable level. Some potential issues when treating degenerative spondylolisthesis from the traditional posterior approach include:

- Abnormal sagittal alignment following laminectomy with in situ posterior fusion
- Limited reduction ability
- Small interbody implant options may lead to subsidence
- Disruption of posterior musculature and facets



VALUE OF XLIF® FOR DEGENERATIVE SPONDYLOLISTHESIS

XLIF is a safe and reproducible, minimally disruptive procedure that utilizes conventional surgical techniques with a seamlessly integrated MAS® platform.

Minimally Disruptive

Minimal blood loss, shorter O.R. time, and reduced hospital stay when compared with traditional fusion surgeries¹

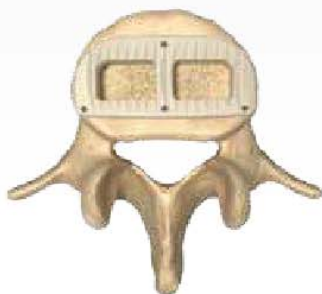
Anterior Column and Listhesis Correction

CoRoent® XL interbody implant is designed to span the ring apophysis, provide maximum vertebral body support, and reduce anterior listhesis.

Stability

CoRoent XL interbody implants are designed to span the ring apophysis for maximum stability.

- Solid foundation for fusion with the largest interbody implant available
- Preserves the ALL and PLL

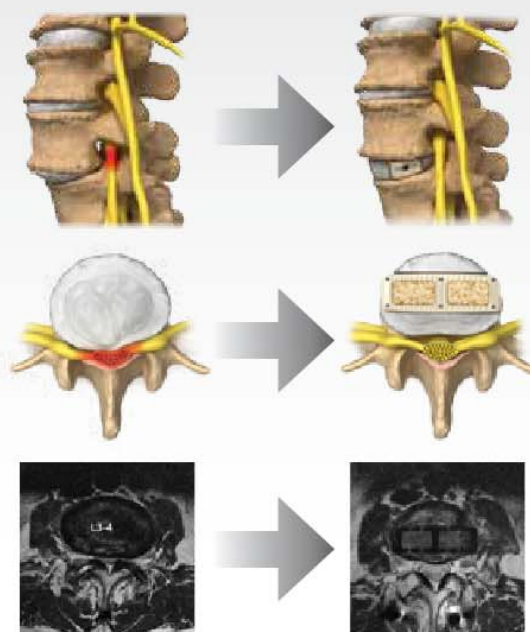


Indirect Decompression

Ligamentotaxis is accomplished with the placement of a large interbody implant, resulting in restoration of disc height, correction of alignment, and indirect decompression. XLIF has been shown to provide indirect decompression of central, sub-articular, and foraminal stenosis.³

Sagittal Alignment

Lordotic implants enable restoration of sagittal alignment.



¹Sengupta DK, Harkowitz HN. Degenerative spondylolisthesis. Review of current trends and controversies. SPINE. 2005;30(65):571-581.

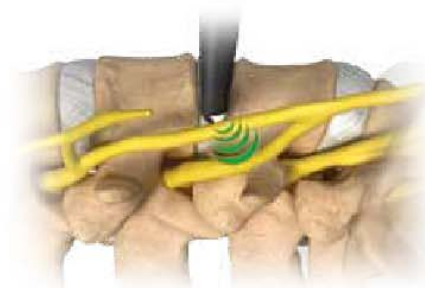
²Youssef JA, McAfee PC, Patty CA, Raley E, DeBauche S, Shucosky E, Chotikul L. Minimally invasive surgery: Lateral approach interbody fusion: Results and Review. SPINE. 2010;35(265):S302-S311.

³Oliveira L, Marchi L, Continho E, Pimenta L. A radiographic assessment of the ability of the extreme lateral interbody fusion procedure to indirectly decompress the neural elements. SPINE. 2010;35(265):S331-S337.

XLIF® PROCEDURAL SOLUTION – DEGENERATIVE SPONDYLOLISTHESIS

SAFE AND REPRODUCIBLE NEUROMONITORING

- NVJJB™/M5° is the only clinically validated neuromonitoring system for a safe and reproducible lateral approach to the spine⁴
- Automated system with discrete threshold feedback provides the fastest response to determine direction and relative proximity of the nerves
- Result – Most efficient nerve avoidance solution, delivering less trauma to the psoas muscle
- Critical to safely traverse the psoas in patients with less predictable neuroanatomy due to listhesis



16
mm

9
mm

4.5
mm

1 MaXcess®

Provides safe and reproducible customizable access with integrated neuromonitoring.



2 CoRoent® XL and XL-Wide

Span the ring apophysis to provide maximum anterior column correction and support. Lordotic options enable restoration of sagittal alignment.

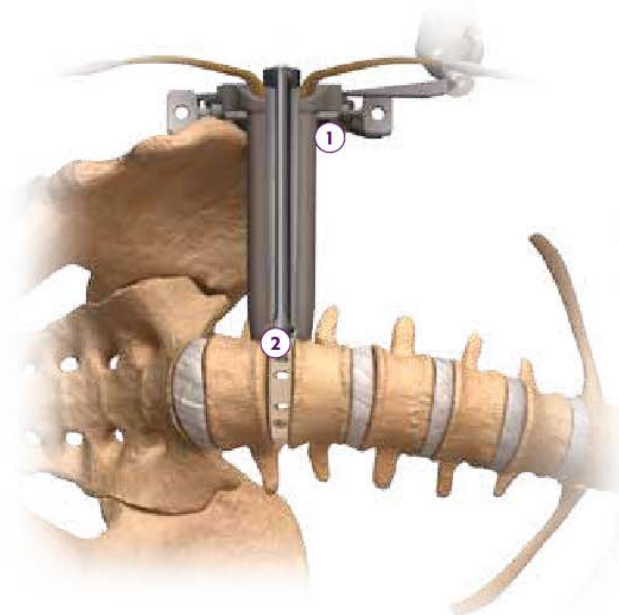


Osteocel® Plus

Advanced allograft cellular bone matrix for complete fusion solution with, osteoinductive, osteoconductive, and osteogenic properties.



CoRoent VBR applications only.



Effectively reduce degenerative spondylolisthesis via disc height restoration and ligamentotaxis.

MINIMALLY DISRUPTIVE FIXATION: SPHERX® DBR® II

- Minimally disruptive posterior fixation with instrument-free compression
- “Zero Profile” rod overhang
- Seamless NVJJB/M5 integration
- Fully constrained rod insertion technique



CASE STUDY

DEGENERATIVE SPONDYLOLISTHESIS

Age: 54

Gender: Female

Stenosis: Central, lateral recess, and foraminal

Procedure: (L3-L5) XLIF® with SpheRx® DBR® II

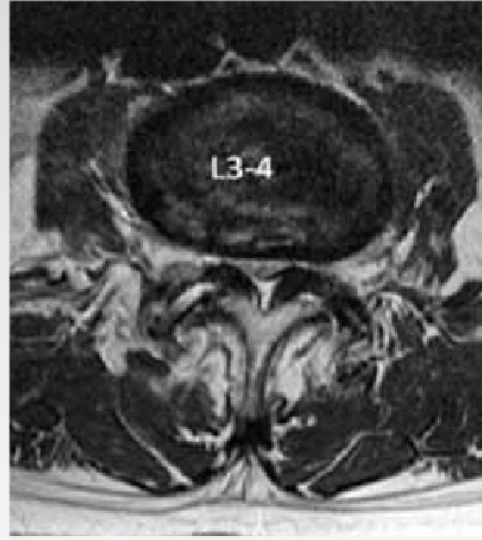
XLIF resulted in reducing spondylolisthesis, restoring sagittal alignment, and achieving indirect decompression.



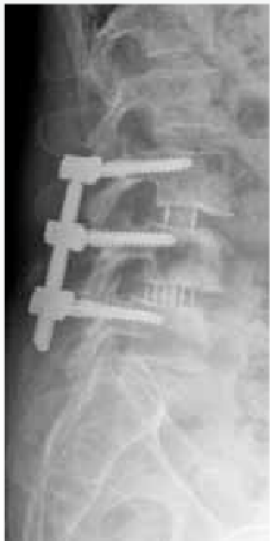
Pre-op – Lateral



Sagittal



Pre-op – Axial



Post-op – Lateral



Sagittal



Post-op – Axial



To order, please contact your NuVasive® Sales Consultant or Customer Service Representative today at:

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