

High-Grade Adult Isthmic L5-S1 Spondylolisthesis: A Report of Intraoperative Slip Progression Treated with Surgical Reduction and Posterior Instrumented Fusion

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Abstract

Adult isthmic spondylolisthesis most commonly occurs at the L5-S1 level of the lumbar spine. Slip progression is relatively rare in adults with this condition and slippage is typically associated with advanced degeneration of the disk below the pars defect. When symptomatic, radiculopathy is the typical complaint in adults with isthmic spondylolisthesis. When considering options for surgical treatment of adult isthmic spondylolisthesis, the surgeon must consider several different options, such as decompression, fusion, instrumentation, reduction, and type of bone graft to be used. All of these decisions must be individualized as deemed appropriate for each particular patient. This report presents a case of intraoperative slip progression of a L5-S1 adult isthmic spondylolisthesis to a high-grade slip, which was treated with complete surgical reduction and posterior instrumented fusion. This case demonstrates the potential instability of this condition in adults and has not been previously reported. The case details and images are reviewed and the intraoperative decisions, treatment options, and patient outcome are discussed.

Keywords

adult isthmic spondylolisthesis - high-grade spondylolisthesis - slip progression - surgical reduction - posterior instrumented fusion

高度的成人峽部 L5-S1 脊椎滑脫症: 以手術復位和後路內固定融合手術中持續性滑脫報告

成人峽部脊椎滑脫症最常發生在腰椎 L5-S1 水平。在這種情況下，成人出現持續性滑脫是比較罕見的。滑脫是典型地與關節間部以下的椎間盤退化有關。當症徵出現，神經根病變是成人峽部脊椎滑脫症患者的典型投訴。當考慮以手術治療成人峽部脊椎滑脫症患者，醫生必須考慮幾個不同的選項，如減壓，融合，內固定，復位和植骨所使用的類型。以上所有決定都必須根據每個病人的情況而個人化。這報告是關於一個 L5-S1 成人峽部脊椎滑脫症患者於手術中出現持續性滑脫至高度滑脫，這情況以完全手術復位和後路內固定融合手術處理。這病例顯示了在成人患者中有潛在的不穩定因素，而這是過去一直沒有被發表的。有關這病例的詳細資料和影像會被檢閱，手術中的決定，治療方案和患者治療成效也會作出討論。