

Department of Neurological Surgery Suny Upstate Medical University, Syracuse NY
Department of Neurological Surgery Boston University Medical School Boston MA

From our study results that the hardware failure is 3% in CDSP group compared to no failure in the SSP group, as well the complete clinical resolution of the symptoms was respectively 53% and 64 % for CDSP and SSP group. Based on those results there is no statistically significant difference that shows any superiority in outcome of using Conventional Double Screw plate with allograft over Single Screw Plate with artificial graft in one and two level ACDF.

