

Expandable PEEK interbody spacer failure. Case report.

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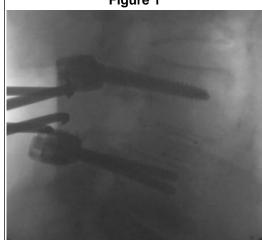
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Introduction

Expandable interbody spacers are part of a relatively new surgical devices, we present the second case reported in the literature of an expandable PEEK interbody spacer.

Figure 1



Intraoperative fluoroscopy demonstrating insertion of PEEK interbody spacer (arrow) via TLIF approach after bilateral L4 and L5 pedicle screw fixation (arrowheads).

Methods

63 year-old male with grade 1 spondylolisthesis at L4-L5 and a large herniated intervertebral disc at the same level causing severe spinal canal stenosis, who underwent decompression with bilateral non-segmental pedicle screw fixation and placement of an expandable PEEK intervertebral device through a TLIF approach

Results

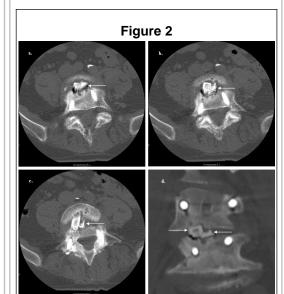
Postoperative imaging (18 months follow-up) evidenced dislodged screw caps and sheared interbody device, leading to revision surgery with removal of spinal hardware and instrumentation with new screw -rod construct and PEEK / titanium interbody device through the approach previously used. Clinical and neurological status has remained unremarkable to date.

Conclusions

Cage migration is a potential complication. This is the second case report of expandable cage failure. We believe that hardware fatigue predisposed the sheared dislodgement of the interbody spacer.

Learning Objectives

The authors present and analyze a case report of a patient with hardware failure of an expandable PEEK interbody spacer.



Computed tomography axial (a-c) and coronal (d) cuts of L4-5, demonstrating migrated, subsided, dislodged and sheared PEEK interbody spacer (arrows)

Figure 3

Intraoperative fluoroscopy demonstrating insertion of new PEEK interbody spacer (arrow) via TLIF approach after bilateral L4 and L5 pedicle screw fixation (arrowheads).