Minimally Invasive Surgery an Option For Patients With Trigeminal Neuralgia

BY NORRA McCREADY
Los Angeles Bureau

SAN FRANCISCO — For people who are too old or ill to withstand the rigors of microvascular decompression, the gamma knife is a “reasonably low risk” alternative for recalcitrant trigeminal neuralgia, Jason Sheehan, M.D., said at the annual meeting of the Congress of Neurological Surgeons.

Microvascular decompression is the procedure of choice based on the best track record for relieving pain due to trigeminal neuralgia (TN). However, the surgery risks rare but serious complications, including brain stem infarction, cerebellar edema, and failures of spinal surgery. Spine surgeons came under fire recently in an editorial of its own (Spine 2004;30 suppl 5:S129-38) and a high-profile discussion at the annual meeting.

Among clinic patients, 90% already have MRI or CT scans available and frequently use couriers, although electronic transmission is gaining ground. A neurosurgeon then reviews the patient’s history and imaging studies, if available, and determines whether the patient should undergo additional tests, receive treatment from a non-surgical spine physician, or have an in-office consultation with a surgeon. Once the neurosurgeon has noted electronically which step should be taken next, the staff makes the appropriate arrangements for the patient, whether it be tests, treatment, or surgical consultation.

Spinal Triage System Culls Candidates for Surgery

BY PATRICE WENDLING
Chicago Bureau

CHICAGO — A new triage system that puts critical information about patients with spinal symptoms on the table in the new triage system.

Under the “Priority Consult” triage system, intake specialists take scripted medical histories from new patients with spinal symptoms over the telephone and enter the information in a secure database. The patients are told to take any relevant imaging studies to the clinic in advance of any appointment.

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