CERVICAL SPINE FUSION RATES RELATED TO BONE GRAFT TYPE AND SPINAL LEVELS

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Background

- ACDF is a proven treatment for degenerative conditions with significantly improved long-term outcomes.
- Pseudarthrosis is related to suboptimal postoperative HRQoL.
- Fusion success depends, in part, on type of material used for bone graft.

Purpose

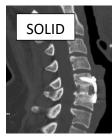
 Assess the fusion rate and improvement in clinical outcomes for ACDF comparing 4 types of bone graft: Autograft (IBG), Allograft (DBM, Progenix), Modified ceramic (I-Factor), Bone morphogenetic protein (0.3 mg/level BMP – off label)

Methods

- Comparative, non-randomized 4 cohort study, 2 year FU.
- Consecutive ACDF patients, Jan 2018 Dec 2021 (4 years), from private practice & "care" system.
- Trauma, tumor, infection excluded.
- Technique: All had PEEK interbody and anterior plate.
- BMP used for patients with non-union risk factors:
 - Secondary surgeries (pseudo repair, adjacent levels)
 - History of pseudo elsewhere
 - 3 or more levels.

Clinical evaluation: prospective pre- & postop neck & arm VAS, NDI.

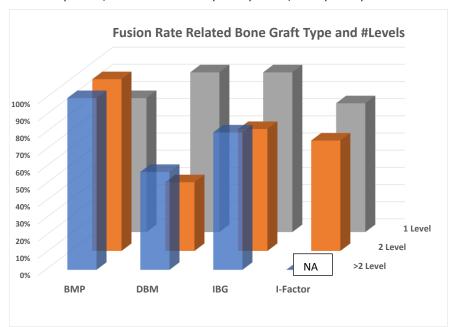
- Radiographic, pre- & postop:
 - Flexion/extension xrays, <2mm spinous process change
 - 1 year high resolution CT, cancellous bone throughout the interbody space without interruption
- If either of these criteria were not attained at any surgical level, then the patient was considered to have a nonunion:





Results

- 110 patients of which 94 (85%) had complete data (outcomes and radiographic)
- Mean age 59 y/o, 58% female
- Overall, non-union rate 24%, using strict criteria
- No differences in age between solid vs non-union groups
- Analysis by bone graft type, non-union rate: IBG (n = 35) = 21%, DBM, n = 18) = 56%, Enhanced ceramic (n = 17) = 21%, BMP (n = 22) = 9%.



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Results continued

ACDF Outcomes

ACDF Outcomes				
	Fusi	S		
	<u>Solid</u>	<u>Non</u>	-union	
Pre-op Neck Pain	6.9	-	7.3	
1st yr Neck Pain	2.9	į	5.1	
2nd yr Neck Pain	2.5	4	4.7	
Pre-op Arm Pain	4.9		5.1	
1st yr Arm Pain	1.8	3	3.3	
2nd yr Arm Pain	1.2	2	2.6	
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Pre-op NDI	53	57		
1st yr NDI	27		41	
2nd yr NDI	24		35	
	Bone-Graft Type			
	<u>IBG</u>	<u>DBM</u>	<u>I-factor</u>	<u>BMP</u>
Pre-op Neck Pain	7.5	6.9	6.1	6.9
1st yr Neck Pain	3.9	4.4	1.8	3
2nd yr Neck Pain	2.8	4.8	1.8	1.8
Pre-op Arm Pain	5	6.4	3.6	5.3
1st yr Arm Pain	2.7	2.5	1	2.2
2nd yr Arm Pain	1.5	3	0.8	0.9
Pre-op NDI	54	60	52	53
1st yr NDI	32	41	20	32
2nd yr NDI	27	46	18	28

Midwest

Spine & Brain

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Conclusion

- Greater outcomes improvement with solid fusion.
- Highest fusion rate was in the BMP group (particularly for revision cases).
- Progenix DBM is the least expensive but has a high nonunion rate (>1 level ACDF) and only a modest improvement in outcomes.
- IBG and modified ceramic similar fusion rate for 1 & 2 level ACDF.