MINIMALLY INVASIVE PROCEDURE EASES PAIN OF SPINE FRACTURES

LOS ANGELES (November 7, 2007) – Each year an estimated 750,000 people develop compression fractures of the spine, often associated with osteoporosis. According to the American Academy of Physicians, the condition is especially prevalent in postmenopausal women, affecting approximately 25 percent of all postmenopausal women in the United States. Left untreated, the condition can cause chronic, very debilitating back pain, yet many people do not realize that minimally invasive surgery can often provide fast relief.

Bernice Diamant, 84, of Marina del Rey, Calif., a former ballerina and long-time popular volunteer at the Skirball Cultural Center and Museum in Los Angeles, recently underwent leading-edge minimally invasive surgery at Cedars-Sinai Medical Center for this condition. The problem started when she heard a loud “snap” in her back as she bent down to assist her husband up off the floor after he had fallen in their bathroom. The “snap” was followed by pain that throbbed in her back and coursed down her legs.

During an office visit to a local orthopedic surgeon, X-rays of her thoracic and lumbar spine and an MRI were ordered. The tests confirmed her worst fear: She was diagnosed with an acute endplate compression fracture at T12 in her spine.

The orthopedist suggested treatment with bed rest, a back brace, pain medications and some physical therapy sessions. Pain and prolonged bed rest, however, can both lead to multiple secondary medical complications, especially in an elderly person.

After suffering for two weeks with little or no relief, Diamant began to think that she might have to spend the remainder of her life in a wheelchair, unable to care for her husband or play with her great-grandchildren.

But then her internist suggested that she visit interventional neuroradiologist Marcel Maya M.D. at Cedars-Sinai Medical Center’s S. Mark Taper Foundation Imaging Center. Maya is an expert in minimally invasive spinal procedures, including vertebral compression fracture treatment (vertebroplasty and kyphoplasty) and spine tumor ablation. She readily agreed to see Maya.

After viewing her MRI results, Maya discussed different treatment options with Diamant and recommended vertebroplasty, a minimally invasive treatment option that has shown good
success at reducing and often eliminating pain related to spinal compression fractures.

“Despite the fact that we have been doing these procedures since the mid-'90s, many doctors and patients are still not aware that these minimally invasive treatments exist and can potentially help patients,” said Maya.

During vertebroplasty for spinal compression fractures, Maya injects high-tech calcium phosphate medical cement directly into a fracture which stabilizes the bone, reducing pain and increasing mobility.

Three days after the 45-minute outpatient procedure, Diamant was sent home with a new lease on a pain-free life. “In just one week, I was back to working around the yard, taking care of my honey and the house,” she said.

Five months later, she is continuing her healthy lifestyle that includes frequent walks and exercise and a diet with plenty of fruits and vegetables that are good for the bones. She is back to playing with her great-grandchildren and tending to her husband, who has Parkinson’s disease.

“This is a rewarding procedure to perform, says Maya. “I am always amazed at how the patients' mood and face brightens during follow-up visits, when they no longer have constant debilitating pain.”

According to the American Academy of Physicians, vertebral compression fractures affect approximately 25 percent of all postmenopausal women in the United States. The prevalence of this condition steadily increases with advancing age, reaching 40 percent in women 80 years of age. Women diagnosed with a compression fracture of the vertebra have a 15 percent higher mortality rate than those who do not experience fractures. Although less common in older men, compression fractures also are a major health concern in this group.

Symptoms of a compression fracture include:

*History of an injury
*Severe onset of back or neck pain
*Possible loss of movement in arms or legs
*Pain increases with sitting or standing and is somewhat less intense with bed rest
*Pain increases when coughing, sneezing or trying to move bowels
*Pain may or may not go away as the fracture heals
*Multiple fractures may cause a curvature of the back and development of a “hump”
*Height loss

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