Treatment of Spinal Osteoid Osteoma

Is “in-block resection” the best option?

Eurospine
Wien, 2010

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Once surgical treatment of O.O. is indicated...

- Previously assumed gold standard: *In-block resection*


- But this type of resection:
  - Can imply motion sacrifice...
  - Could be unnecessary
Osteoid osteoma of the lateral mass of C5. Should excision be combined with fusion?

Can we avoid an extensive approach and a fusion?
spinal tumors are usually treated with in-block resection

B. Christ, L. Lenke and S. Lewis

Osteoid osteoma of the lumbar spine

“A case report highlighting a novel reconstruction technique” J. Bone Joint Surg. 87: 414 - 418, 2005

Can we avoid a reconstructive effort?
Some authors advise simple intralesional resection

Technical innovations:
Some authors advise simple intralesional resection

Case Report

Osteoid Osteoma in the Lumbar and Sacral Regions: Two Cases of Difficult Diagnosis

C Villas, R. López and JL Zubieta

Osteoid osteoma affecting articular process at the cervical Spine: Infrequent localization and difficult diagnosis.

Clinical experience

- 16 patients (13 m - 3 f) from 6 to 67 y.
- **Segment:** 6 C, 1 Th, 6 L, 3 S
- **Location in the vertebra:**
  - 6 ped., 2 v. body, 3 art. proc., 2 lamina,
  - 1 sacral wing, 1 pars interart, C1 lateral mass.
- **Surgical treatment:** Intralional resection
  - Simple resection, fragmentation
- All confirmed by AP reports
Clinical experience

• No recurrences

• 1 insufficient resection (C1, Reop.)

• 1 preop. spontaneous fusion (C5C6),

• 1 postop. spontaneous fusion (C1C2),

• Satisfactory final result in all cases
Case 1

Bone graft

15 y. postop.

Case 2

postop.

Case 3

postop.
Case 4

Age 15 y., previous fusion for lysthesis, presumed cause of the pain

postop.
Case 7

Age 17 y., previous attempt of intraoperative scintigraphy-guided resection

Contrast injection for intraop. confirmation of the resected bone, including the tumour

1 y. post
Satisfactory results can be obtained with no sacrifice of any mobile segment.

Intralesional resection is today the gold standard in the surgical treatment of spinal osteoid osteoma

Next step… may be mini- invasive surgical approach