



# **EUROSPINE 2019**

## **Delegate Survey**

### **Pre-day Course II: The Intervertebral Disc: From Basic Science to High-end Surgery and other Novel Treatments across European Borders**

**16-18 October 2019  
Helsinki, Finland**

**Response rate: 60%  
(this corresponds to 69 people responding)**

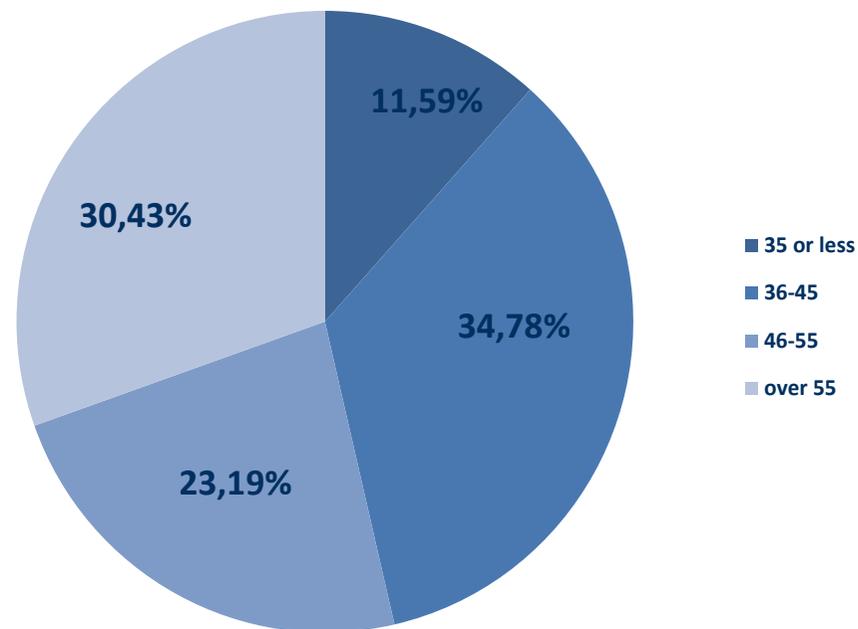
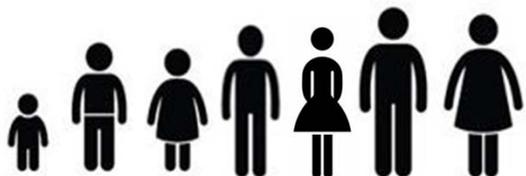
**as per 14.11.2019**



# DEMOGRAPHICS



## How old are you?



## What is your gender?

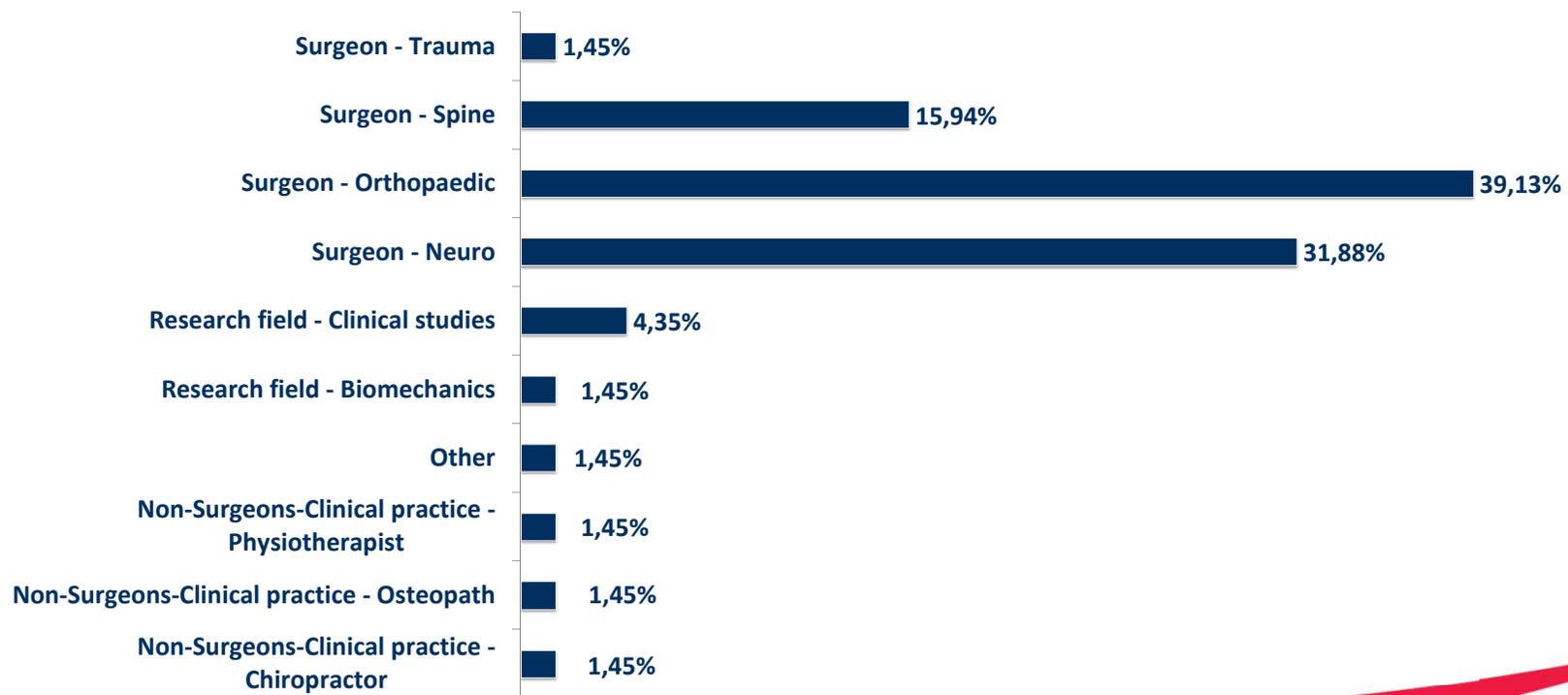


**Female**  
**13,04%**



**Male**  
**86,96%**

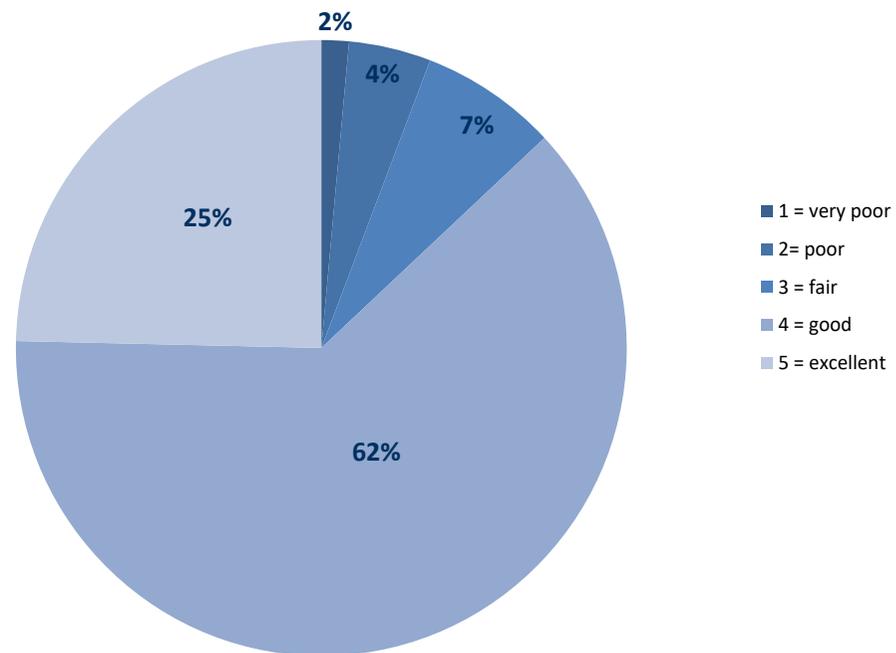
## What are your fields of work?



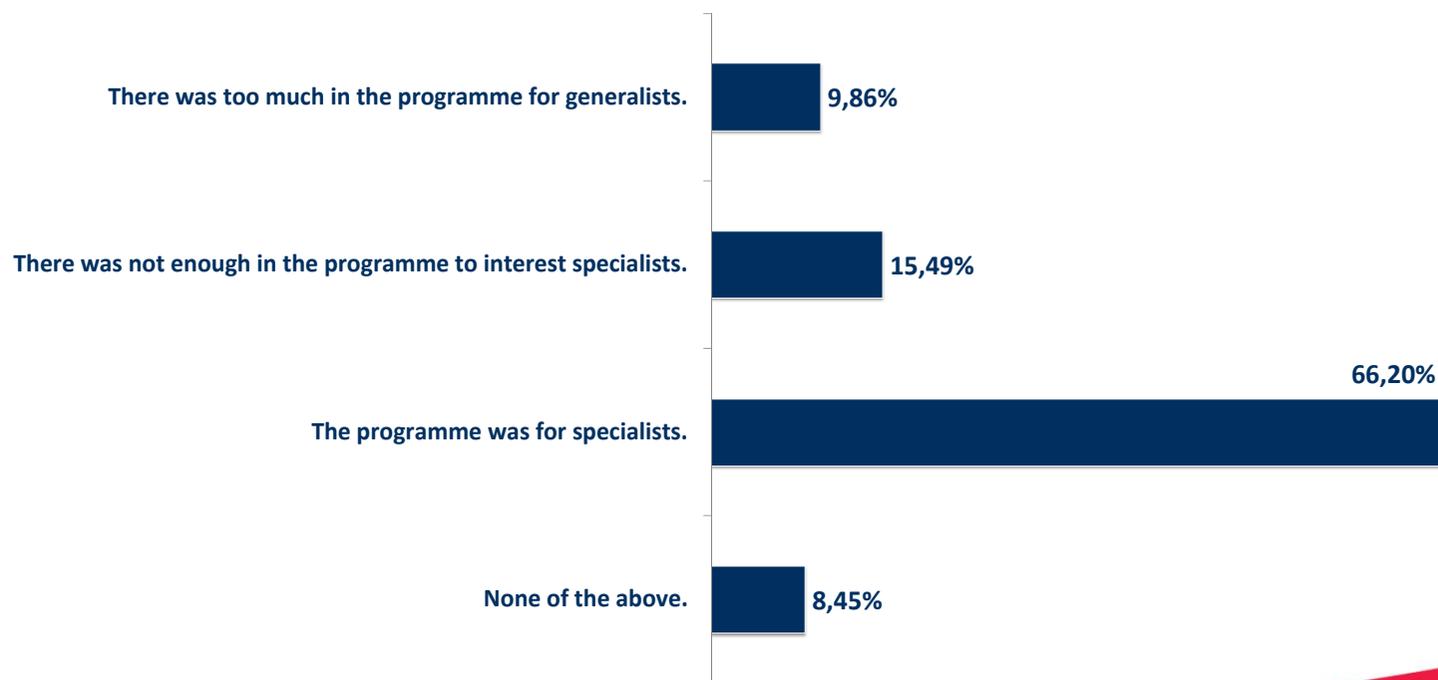


# SCIENTIFIC CONTENT

## How do you rate the overall quality of the pre-day course?

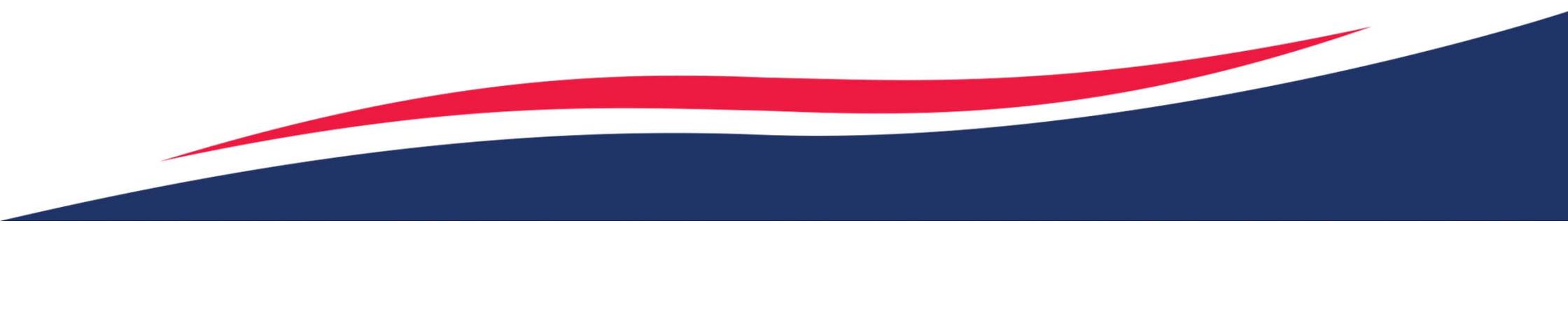


## Scientific programme - level:

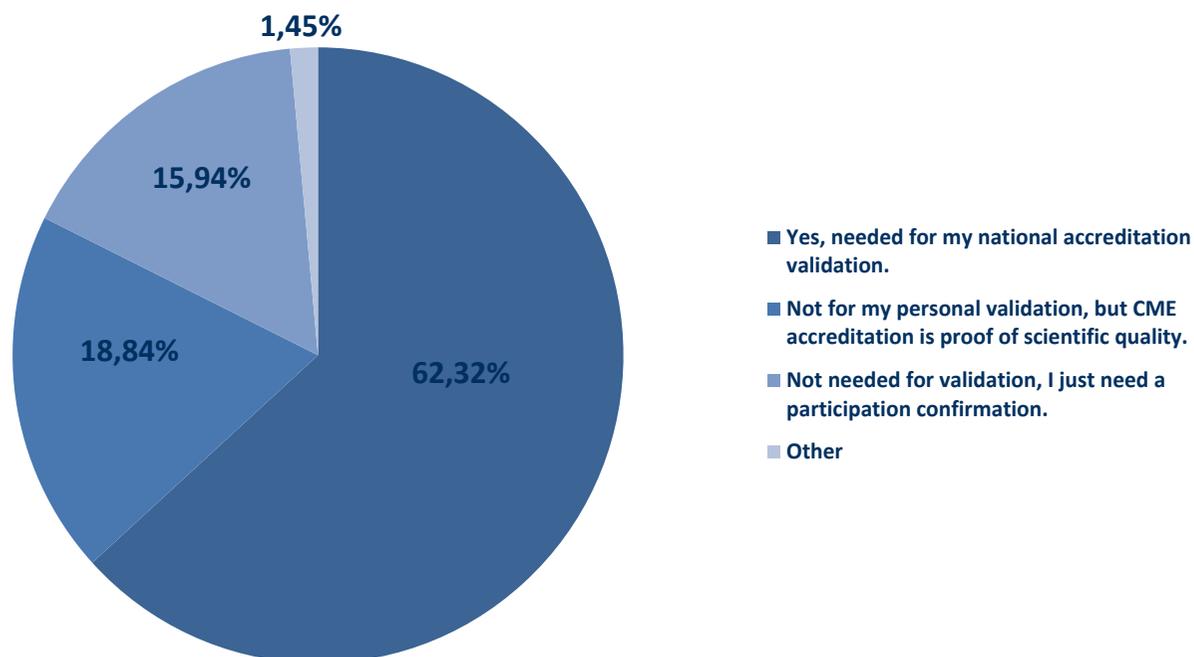




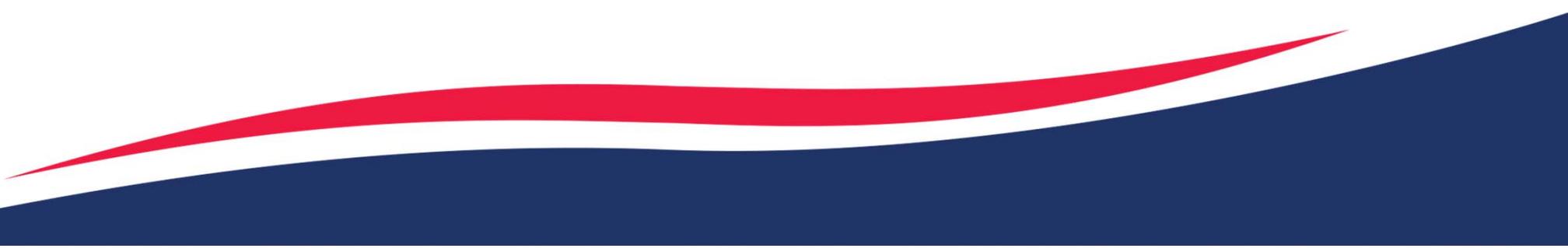
# ATTENDANCE



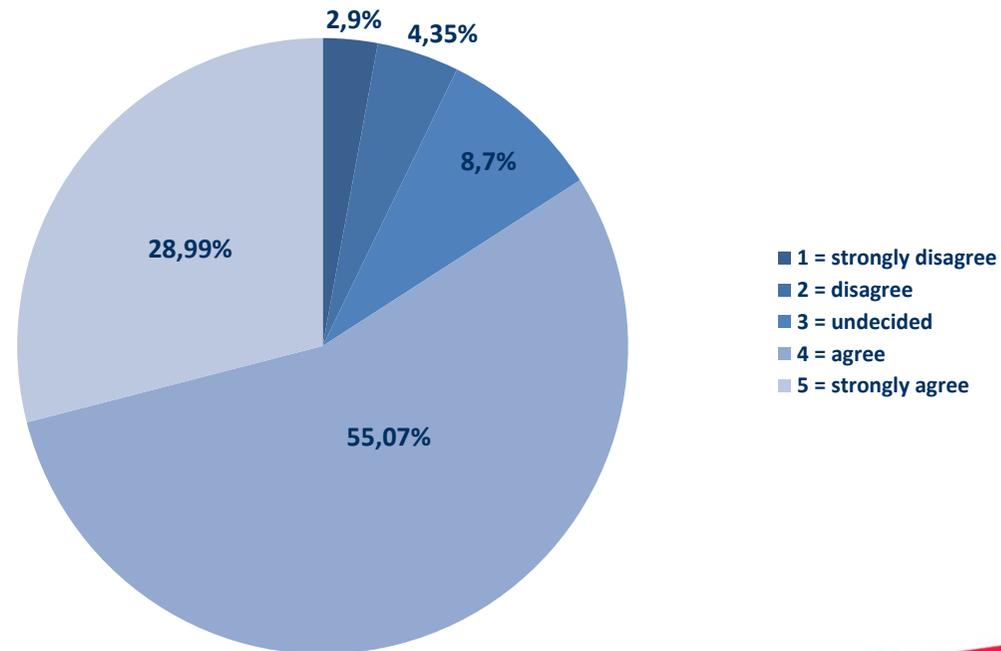
## Is CME-CPD (or equivalent) important for you?



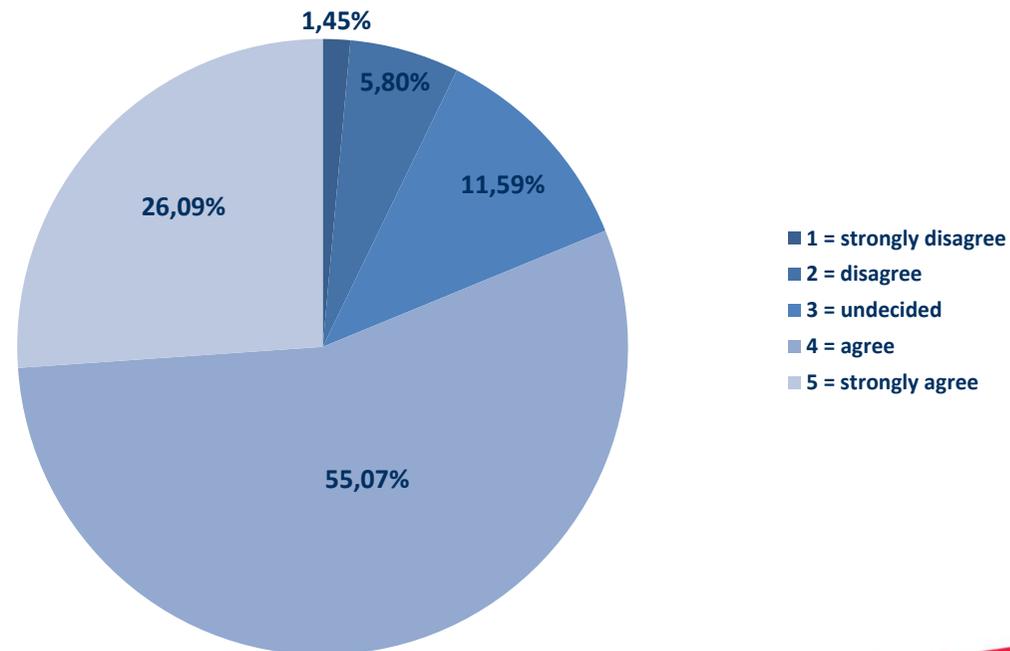
**How would you rate the  
following statements?**

Decorative wavy lines in red and dark blue at the bottom of the slide.

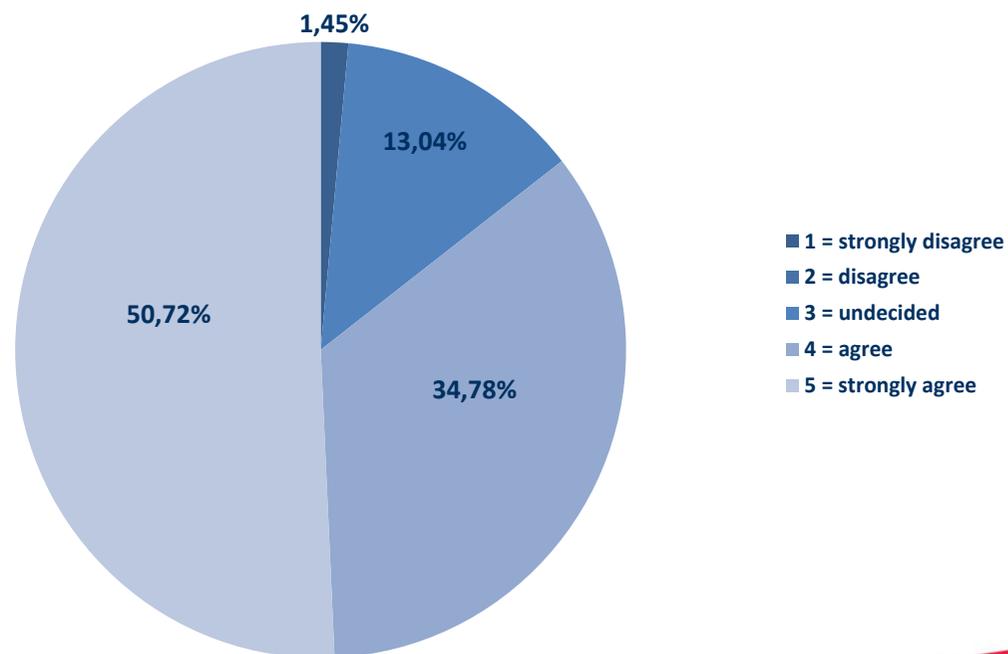
**This event has fulfilled my educational goals and my expected learning outcomes.**



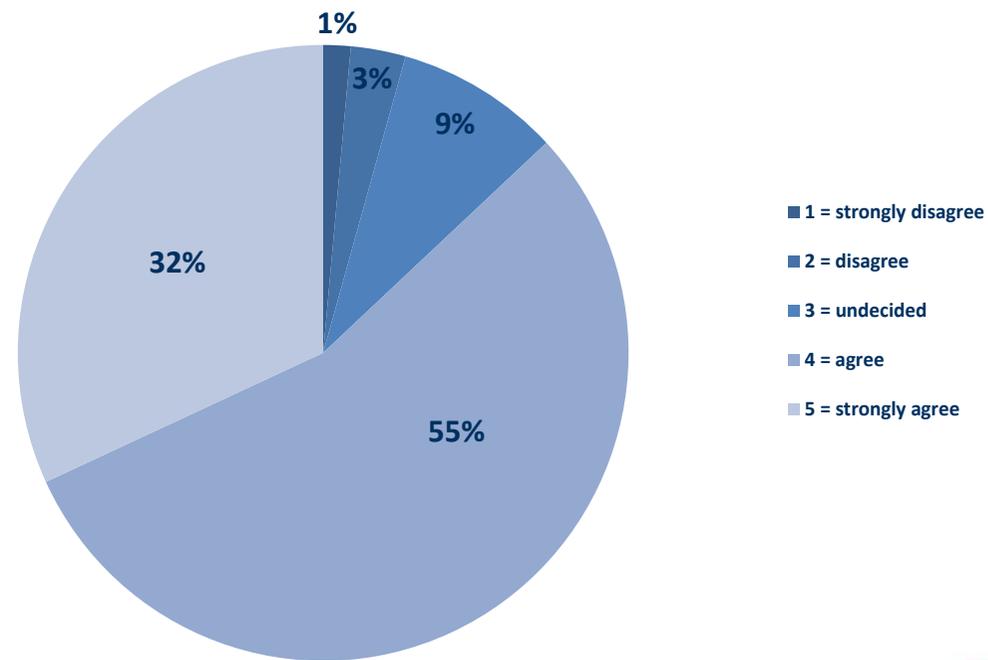
I have learned information at this event that will help me to improve my practice.



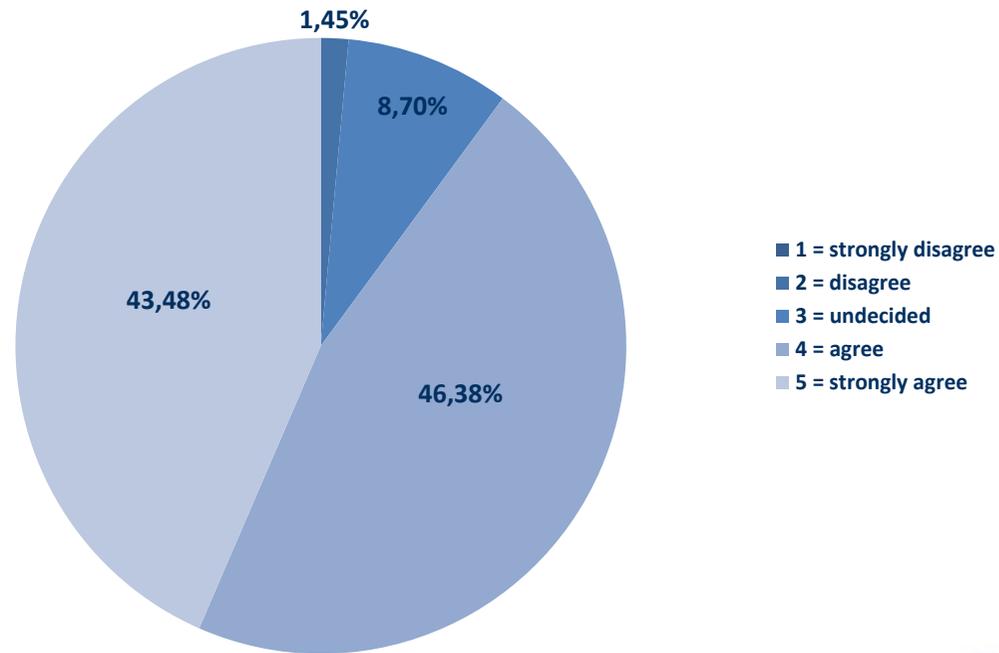
## The event was excellently organised.



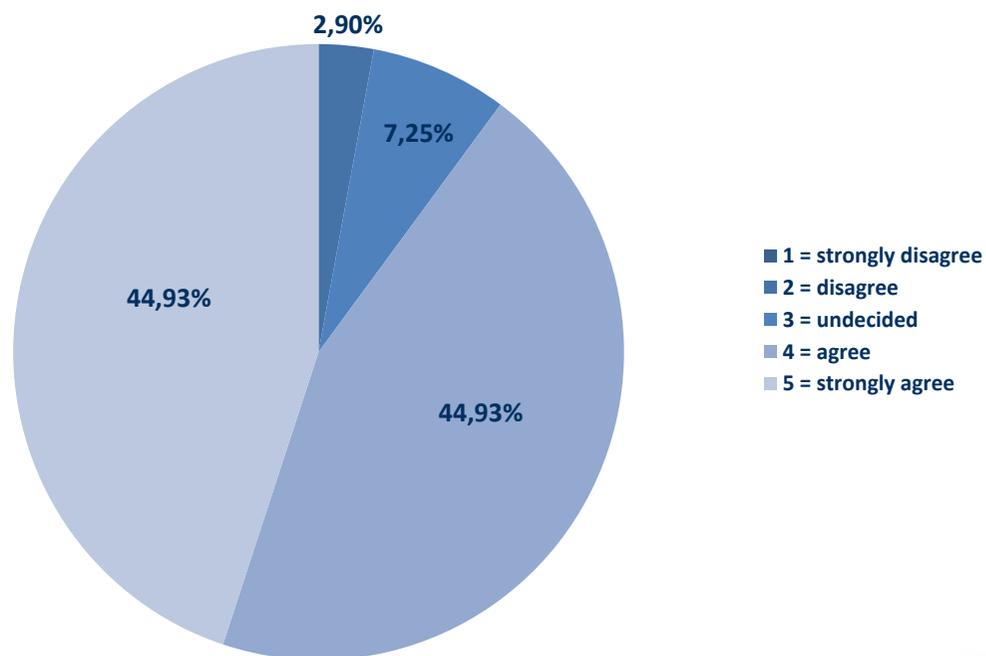
The education provided at this event consistently was very good or excellent.



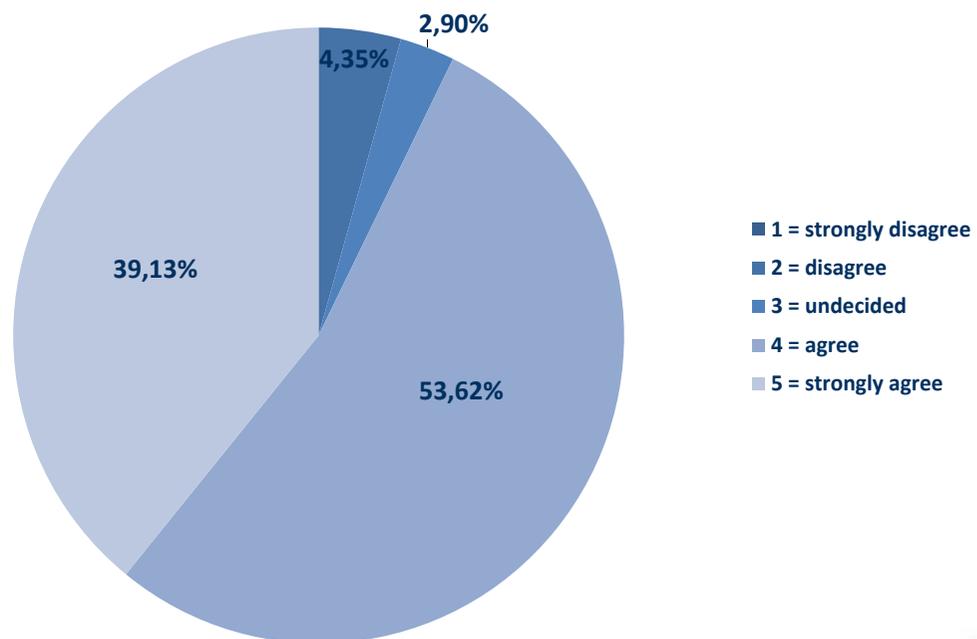
**There was sufficient time for discussion, questions/answers and learner engagement.**



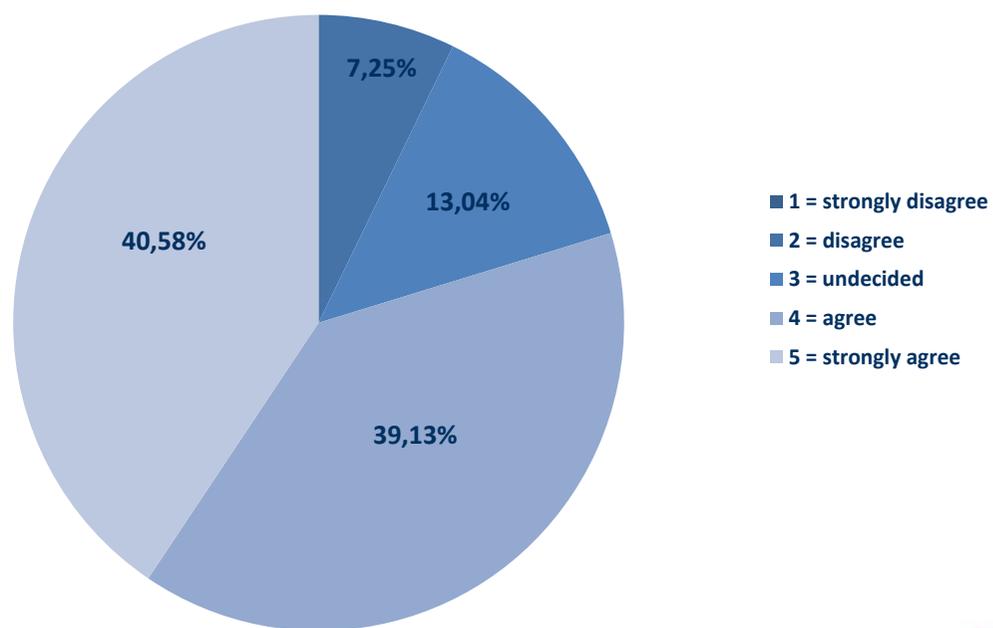
The information presented consistently was supported by valid scientific evidence base.



The speakers consistently were very good or excellent.



**There was no bias in any of the presentations I attended.**



Lumbar and Radicular pain  
Interactive Pathway.  
Physiotherapy.  
The evidence on disc.

Fusion or not-full  
endoscopic-data register

Fusión corta en escoliosis  
Utilidad radiografía  
bending para elegir donde  
terminar  
Fusión corta mejor calidad  
vida menos  
complicaciones  
Las estética es importante

Shoulder balance, uiv liv, stf

Endoscopic  
spine surgery,  
future medical  
approaches on  
disc  
degeneration,  
conservative  
approaches

Stem cell therapy in  
Disc repair

Infiammazione / Infiltration  
/ Modic

Inflammation in the disc -  
new therapies  
Modic changes - relevance  
New Belgian guidelines

Good selection of patients  
is a key to succes  
Registry is important for  
benchmarking  
DDD remains a  
controversial pathology

## Please list your top three learning points from the Pre-day Course 2019.

Lumbar disk prothesis  
lumbar discectomy , a Gold  
standart?  
MIS discectomy

The benefit of conservative  
treatment.

1. Natural history of disc  
degenerative.  
2. Treatment options  
3.Surgical technique options.

1. Pain intervention  
2. Pain generators in back  
pain (basic sciences)  
3. Endoscopic spinal  
procedures

future non  
surgical  
strategies  
long way to go

1.non operative method  
evidence especially therapy  
.2. Role of mediators in low  
back pain 3. That there is  
lots more we need to study  
in the field of low back pain  
and many unsolved  
mysteries not answered yet

Modic changes,  
still not clear  
correlate  
Importance of  
clinical exam  
Look more at  
disc for cause of  
pathologies

1.Importance of inflammation  
of the disc  
2. Re-definition of gold  
standard in disc herniation  
management  
3. Use of endoscopic  
procedures in disc herniation  
management

The inspiring endoscopic  
interlaminar. Spine  
injection as filling gap.  
Conservative treatment  
and symptomatic  
treatment.

Total disc  
replacement  
Infiltrations  
spine  
Microdiscecto  
my

Alternative  
treatment bridges,  
comparing results,  
validation of my  
own practice

Non Validity of  
modic sign for  
outcome

Endoscopic  
discectomy  
ALIF and ADR  
Bridge unfiltration  
terapy

Disc disease, evolution of the  
treatment. Spine pain treatment.  
Spine tango

Disc anatomy understanding,  
clinical impact, options for  
treatment

Conservative treatment for LBP  
microdiscectomy  
Emphasis on clinical examination

Clinical evidence is important  
Mri findings are not conclusive  
Every country should have a  
national registry

Steps to Fusion and Non Fusion Strategy  
Tips on Total Disc Replacement Standards in Micro-Discectomy and Endoscopic Micro-Discectomy

Pre-day Course should continue, but we can switch to a trauma issue, for example cervical trauma-spinal cord injury.

The possibilities for disc regeneration are improving  
Discectomy remains a good operation  
The role of Lumbar Disc Replacement is supported by longterm follow up

1) That conservative management may be good for most of the degenerative disc disease.  
2) That decompression and Fusion in degenerative disc without instability is not warranted.  
3) That there is no evidence that Pregabalin and baclofen must be routinely given in degenerative disc disease with radiculopathy.

Disc disease, evolution of the treatment, spine treatment, spine tango

Infección

Very interested in learning endoscopic spinal decompression techniques.  
Confirmation that anterior lumbar disc replacement has value

Update on pathogenesis of discogenic back pain, necessity to collect international data of outcome, role of disc replacement surgery

Modic changes are not fully understood yet.  
Maybe I shall change my view on epidural injections and disc prosthesis

UIV & LIV  
Shoulder balance  
Different

Inflammatory mediators in disc degeneration, gold standard discectomy, to fuse or not to fuse.

Info about conservative treatment, Endoscopic surgeries and disc prosthesis

1. Registry 2.  
Endoscopic discectomy  
3. Disc arthroplasty

Uno de los principales aprendizajes que adquiri y que quiza el menos desarrollado que tenia es:  
Registro es lo mas importante, y que este debe ser honesto, debe seguir un excelente seguimiento, debemos manejar un lenguaje comun, con aporte de datos relevantes como: los resultados de tratamiento, complicaciones, monitoreo de lo que se haga ( seguimiento de nuevos implantes)

Endoscopic spine surgery

Cell Therapy



Stratégie de prise en charge des patients et démarches meilleurs thérapeutiques

Disk replacement

Tumors

More plenaries from international experts/faculty

Uno de los problemas de lumbago yendo a la cronificacion y hallazgos imageenologicos que aportan cambios tipo modic. Que hacer con los que no son cadidatos a fijacion.

XLIF - pros and contras  
ALIF - pros and contras

Basic science

Discussion for bulging discs  
For protruded discs  
For extruded discs  
Correlation between MRI and clinical presentations

Proyector en sala se obstruida imagen con los sentados delante

### Please list areas where we could have improved the meeting for you.

Scientificly it was good but a cup of coffee would be nice not only during but also before the meeting:)

Spine Tango and registry discussions are not useful at such conferences it was wasting time.

Conventional disectomy against endoscopic disectomy , but Edith teje results, long term studys.

Ensure ALL speakers have at least some scientific justification for their claimed treatment superiority/success

Invited faculty from outside Europe eg. from Asia, to give a wider perspective.

Moderate speech, not busy slide

Conservative therapy

Just keep going

Location initially difficult to find for meeting room

cell therapy

Diagnostic clinical criteria still not uniform

Better facilities like writing table should be equipped

More info on other targeted drug therapies in managing low back pain/ discogenic pain.

I am very happy with this meeting and I have learned or confirmed new aspects.

There was no ARS voting system available. Room was small.

Peek against other materials in fusión

Scoliosis

Artroplastic

More basic science more future research trends

Speakers need to view their powerpoint notes during presentation

The review for non operative techniques is weak and can be improved.

More on future research

More surgical techniqs

More time



**Thank you for your attention!**