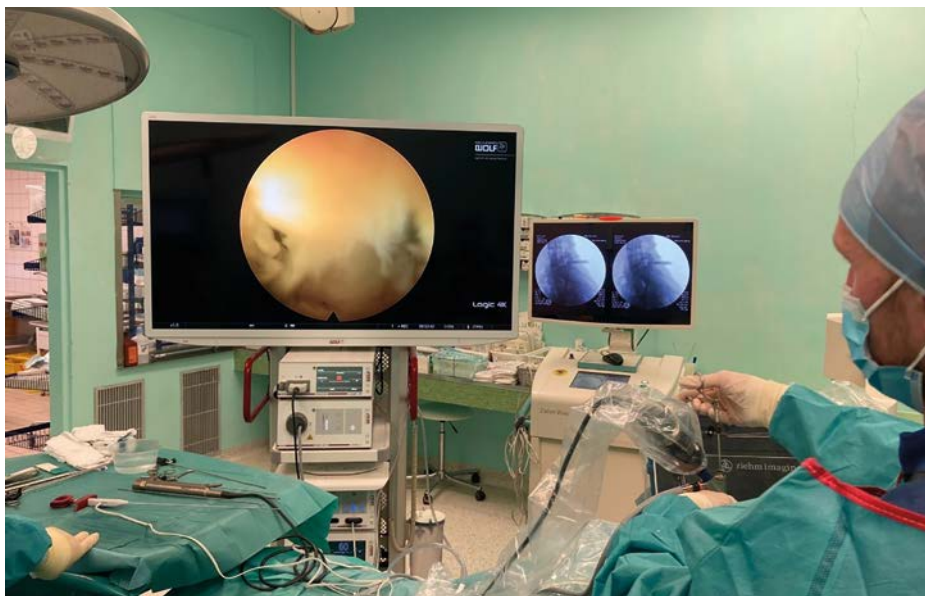


Obr. 16. Peroperačná fotografia – operatér stojaci po boku pacienta, pred operatórom je endoskopická veža a RTG monitor s peroperačným zobrazovaním pozície endoskopu, inštrumentárka a inštrumenty sú po ľavici operátora



LITERATÚRA

1. Abdu RW, Abdu WA, Pearson AM, et al. Reoperation for Recurrent Intervertebral Disc Herniation in the Spine Patient Outcomes Research Trial: Analysis of Rate, Risk Factors, and Outcome. *Spine*. 2017;15;42(14):1106-1114. doi: 10.1097/BRS.0000000000002088.
2. Foley KT. Microendoscopic discectomy. *Tech Neurosurg*. 1997;49(2):262-263. doi: 10.4103/0019-5413.152551.
3. Foley KT, Smith MM, Rampersaud YR. Microendoscopic approach to far-lateral lumbar disc herniation. *Neurosurg Focus*. 1999;7(5). doi: 10.3171/foc.1999.7.6.6.
4. Choi G, Lee SH, Bhanot A, et al. Percutaneous endoscopic discectomy for extraforaminal lumbar disc herniations: Extraforaminal targeted fragmentectomy technique using working channel endoscope. *Spine (Phila Pa 1976)*. 2007;5;32(2):E93-9. doi: 10.1097/01.brs.0000252093.31632.54.
5. Choi G, Munoz-Saurez D. Transforaminal Endoscopic Thoracic Discectomy: Technical Review to Prevent Complications. *Neurospine*. 2020;17(1). doi:1014245/ns.2040250. 125.
6. Junseok B, Sourabh C, Sang-Ha S, Sang-Ho L. Transforaminal endoscopic thoracic discectomy with foraminoplasty for the treatment of thoracic disc herniation. *J Spine Surg*. 2020;6(2):397-404. doi: 10.21037/jss.2019.11.19.
7. Kim DH, Choi G, Lee SH. Endoscopic spine surgery. *Thieme*. 2018: 2-70.
8. Lew SM, Mehalik TF, Fagone KL. Transforaminal percutaneous endoscopic discectomy in the treatment of far-lateral and foraminal lumbar disc herniations. *J Neurosurg*. 2001;94(2):216-20. doi: 10.3171/spi.2001.94.2.0216.
9. Liu X, Yuan S, Tian Y, et al. Comparison of percutaneous endoscopic transforaminal discectomy, microendoscopic

- discectomy, and microdiscectomy for symptomatic lumbar disc herniation: Minimum 2-year follow-up results. *J Neurosurg*. 2018;28(3):317-325. doi: 10.3171/2017.6.
10. Máca K, Ďuriš K, Smrčka M. Endoskopické operace výhřezu bederních meziobratlových plotének – první zkušenosti. *Cesk Slov Neurol N*. 2019;82(5):541-547. doi: 10.14735/amcsnn2019541.
11. Martens F, Vajkoczy P, Jadik S, et al. Patients at the Highest Risk for Reherniation Following Lumbar Discectomy in a Multicenter Randomized Controlled Trial. *JB JS*. 2018;3(2). doi: 10.2106/JBJS.OA.17.00037.
12. Mathews HH. Transforaminal Endoscopic Microdiscectomy. *Neurosurgery Clinics of North America*. 1996;7(1):59-64.
13. Nie H, Zeng J, Song Y, et al. Percutaneous endoscopic lumbar discectomy for L5-S1 disc herniation via an interlaminar approach versus a transforaminal approach. *SPINE*. 2016;41:p B30-B37. DOI: 10.1097/BRS.0000000000001810.
14. Pan M, Li Q, Li S, et al. Percutaneous Endoscopic Lumbar Discectomy: Indications and Complications. *Pain Physician*. 2020 Jan;23(1):49-56. PMID: 32013278.
15. Platt A, Fessler RG, Traynelis VC, O'Toole JE. Minimally Invasive Posterior Cervical Foraminotomy Versus Anterior Cervical Fusion and Arthroplasty: Systematic Review and Meta-Analysis. *Global Spine Journal*. 2022;12(7):1573-1582. doi: 10.1177/21925682211055094.
16. Ruetten S, Komp M, Merk H. Full-endoscopic interlaminar and transforaminal lumbar discectomy versus conventional microsurgical technique: A prospective, randomized, controlled study 2008. *Spine*. DOI: 10.1097/BRS.0b013e31816c8af7.
17. Ruetten S, Komp M, Merk H. Full-endoscopic cervical po-

Štetenie svalového aparátu chrbtice je prirodzene spojené s menšími pooperačnými bolesťami, čo môže viesť k skráteniu hospitalizácie pacienta, ako aj rekonvalescencie (Liu et al., 2018; Song et al., 2017; Choi et al., 1976; Lew et al., 2001). Na základe našich skúseností hodnotíme SE (interlaminárnu aj transforaminálnu techniku) ako efektívnu operačnú metódu pri ošetrení hernií intervertebrálneho disku driekovej chrbtice pri radikulopatii vrátane hyperalgických stavov a prípadov spojených s motorickým deficitom. Optimálnou indikáciou na SE liečbu sú hernie disku s dominujúcim radikulárnym syndrómom. Na základe literárnych údajov a vlastných skúseností očakávame rozšírenie spektra indikácií v SE chrbtice aj o komplexnejšie degeneratívne poškodenia driekovej chrbtice.

- terior foraminotomy for the operation of lateral disc herniations using 5.9 mm endoscopes: a prospective, randomized, controlled study. *Spine*. 2008;33(9):940-8. doi: 10.1097/BRS.0b013e31816c8b67.
18. Ruetten S, Komp M, Merk H, et al. Recurrent lumbar disc herniation after conventional discectomy: a prospective, randomized study comparing full-endoscopic interlaminar and transforaminal versus microsurgical revision. *J Spinal Disord Tech*. 2009; 22(2):122-9. doi: 10.4103/0019-5413.152551.
19. Smith Z, Fessler R. Paradigm changes in spine surgery – evolution of minimally invasive techniques. *Nat Rev Neurol*. 2012;8:443-450. doi: 10.1097/BSD.0b013e318175ddb4.
20. Song HP, Sheng HF. A case-control study on the treatment of protrusion of lumbar intervertebral disc through PELD and MED. *Exp Ther Med*. 2017;14(4):3708-3712. doi: 10.3892/etm.2017.4929.
21. Zhang B, et al. Transforaminal endoscopic discectomy versus conventional microdiscectomy for lumbar disherniation: a systematic review and meta-analysis. *J Orthop Surg Res*. 2018;13(1):169. doi: 10.1186/s13018-018-0868-0.
22. Zhu Y, Zhao Y, Fan G, et al. Comparison of the effects of local anesthesia and epidural anesthesia for percutaneous transforaminal endoscopic discectomy in elderly patients over 65 years old. *Expas*. 2017;1(9):2373-2378, 47(12):260-263.
23. Xinhua L, Zhouyang H, Jian C, et al. Percutaneous endoscopic lumbar discectomy for recurrent lumbar disc herniation. *International Journal of Surgery*. 2016;27:8-16.
24. Xu T, et al. Application of continuous epidural anesthesia in transforaminal lumbar endoscopic surgery: A prospective randomized controlled trial. *Elsev*. 2019;47(3):1146-1153.