



General Information

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Programme Goal

Starting with Endoscopic Spine Surgery

Endoscopic spine surgery is becoming the ultimate tissue preserving technique to treat a multitude of spine pathologies with accumulating evidence in support of its efficacy and reduced complication rate. This has generated huge interest among surgeons worldwide to learn and adopt this technology. This course will help you to make the first steps in spinal endoscopy or to widen the spectrum of the procedures you offer to your patients, allowing you to achieve highly rewarding and excellent surgical outcomes in disc and stenosis surgery in the lumbar spine.



Quick Facts

LIVE SESSION DATE & TIME	27 June 2024 (07:50-18:15 CEST)	
VENUE	IRCAD, 1 Pl. de l'Hôpital, 67000 Strasbourg, France	
MAX. ATTENDEES	24 delegates maximum	
REGISTRATON FEES	EUROSPINE Member: €800 Non-member: €1,000	
CME CREDITS	Course completion is achieved only after the completion of both the e-learning and live component. The Introduction to Spinal Endoscopy Course, Strasbourg, France 27/06/2024 - 27/06/2024, has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME®) with 8.0 European CME credits (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity. Through an agreement between the Union Européenne des Médecins Spécialistes and the American Medical Association, physicians may convert EACCME® credits to an equivalent number of AMA PRA Category 1 CreditsTM. Information on the process to convert EACCME® credit to AMA credit can be found at https://edhub.ama-assn.org/pages/applications . Live educational activities, occurring outside of Canada, recognised by the UEMS-EACCME® for ECMEC®s are deemed to be Accredited Group Learning Activities (Section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada.	
LANGUAGE	English	
DRESS CODE	Smart casual	
E-LEARNING	A computer (Mac/PC) or tablet (Android/Mac) and stable internet connection are required to access the e-learning content. The e-learning component is self-paced and will be available from 15 May 2024 on the EUROSPINE Learning Management System (LMS). The e-learning must be completed by the start of the live session.	



COURSE COMPLETION	The course is only deemed as complete when participants have met ALL of the following conditions: - Passed e-learning/pre-learning component AND - Attended the live session AND - Submitted course evaluations for the e-learning and the live session component	
TARGET AUDIENCE	Senior trainees and trained surgeons, who are planning a career in spine surgery.	
IMPORTANT (!)	 Completion of e-learning component is mandatory Attendance of the live session is mandatory 	

E-learning Programme

(available from 15 May 2024)

Time/Duration	Торіс	Faculty		
0:15	Basic concepts in spinal endoscopy	Debono		
Interlaminar				
00:20	Interlaminar endoscopic lumbar discectomy (IELD)	Loureiro		
00:20	Lumbar endoscopic unilateral laminotomy for bilateral decompression (LE-ULBD, "over the top" decompression)	Siepe		
00:20	0:20 Knowledge check questions			
Transforaminal				
00:20	Transforaminal endoscopic lumbar discectomy (TELD)	Hassel		
00:20	Transforaminal endoscopic lumbar foraminotomy (TELF)	Wagner		



Biportal				
00:20	Unilateral biportal endoscopy (UBE)	Lonjon		
00:20	Knowledge check questions			

Live Session Programme

27 June 2024 08:00 - 18:15 CEST				
Skills Lab				
08:00 – 09:30	Rotation 1			
09:30 – 09:45	Coffee Break			
09:45 – 11:15	Rotation 2			
11:15 – 11:30	Coffee Break			
11:30 – 13:00	Rotation 3			
13:00 – 14:00	Lunch			
Lectures and Cases				
14:00 – 15:45	Cases 1			
15:45 – 16:00	Coffee Break			
16:00 – 17:45	Cases 2			
17:45 – 18:15	Complications prevention and management in endoscopic spine surgery			
18:15	END OF COURSE			

Skills lab details:

• Number of participants: 24



- Rotations
 - o 3 rotations
 - 6 stations in total (2 each technique)
 - o 90 minutes per rotation
- Techniques
 - 1. Interlaminar endoscopic techniques
 - 2. Transforaminal endoscopic techniques
 - 3. Unilateral biportal endoscopic technique
- Lab groups: 4 participants in each group

Learning Outcomes

Endoscopy in Lumbar Spine

- Explain how to use the endoscope in spine
- Describe the relevant anatomy for lumbar endoscopy
- List and evaluate the different approaches to lumbar spine

Interlaminar Endoscopic Techniques

- Describe the interlaminar endoscopic technique (theatre set-up, patient positioning, planning, procedural steps, limitations)
- Describe interlaminar endoscopic lumbar discectomy (IELD)
- Describe lumbar endoscopic unilateral laminotomy for bilateral decompression (LE-ULBD, "over the top" decompression)

Transforaminal Endoscopic Techniques

- Describe the transforaminal endoscopic technique (theatre set-up, patient positioning, planning, procedural steps, limitations)
- Describe transforaminal endoscopic lumbar discectomy (TELD)
- Describe transforaminal endoscopic lumbar foraminotomy (TELF)

Unilateral Biportal Endoscopic Technique

• Describe the unilateral biportal endoscopic technique (theatre set-up, patient positioning, planning, procedural steps, limitations).

General

- Identify the ideal indications for novice surgeons and recognise
- the contraindications based on the evidence



- Describe pitfalls of the different procedures and discuss how to
- Prevent and manage complications

Assessment

For the completion of this course, participants are required to complete and pass the elearning quizzes with a minimum score of 70% and complete the required course evaluations, which includes a reflective component.

Recommended Reading

AOSpine Consensus Paper on Nomenclature for Working-Channel Endoscopic Spinal Procedures Global Spine Journal. 2020 Apr; 10(2 Suppl): 1115–121S. DOI: 10.1177/2192568219887364

Endoscopic Spine Surgery (J Korean Neurosurg Soc 60 (5): 485-497, 2017) DOI: 10.3340/jkns.2017.0203.004

Endoscopic Disc and Decompression Surgery (Book chapter) Rütten, Hahn (AOSpine MISS)

Comparative Study Between Uniportal Full-Endoscopic Interlaminar and Tubular Approach in the Treatment of Lumbar Spinal Stenosis: A Pilot Study Global Spine Journal 2020, Vol. 10(2S) 70S-78S

TELF: Percutaneous Endoscopic Lumbar Foraminotomy: An Advanced Surgical Technique and Clinical Outcomes Neurosurgery, 2014, 75:124–133 DOI: 10.1227/NEU.000000000000361

TE-LRD: Percutaneous Transforaminal Endoscopic Decompression on Lateral Recess Stenosis: Technical Notes and Outcomes of Two Years Follow-up. A Case Series Study International Journal of Clinical and Experimental Medicine, 2018; 11(10):10731-10739 URL: www.ijcem.com/IJCEM0077613 / ISSN: 1940-5901

Complications of Percutaneous Endoscopic Lumbar Discectomy: Experiences and Literature Review Zhu et al., J Spine 2017, 6:6 DOI: 10.4172/2165-7939.1000402

Unique Complications of Percutaneous Endoscopic Lumbar Discectomy and Percutaneous Endoscopic Interlaminar Discectomy Pain Physician 2018; 21: E105-E112 • ISSN 2150-1149#

Complications and Limitations of Endoscopic Spine Surgery and Percutaneous Instrumentation Kim HS, Sharma SB, Wu PH, Raorane HD, Adsul NM, Singh R, et al. Indian Spine Journal 2020; 3:78-85

Introduction to Spinal Endoscopy Course



New Era of Percutaneous Endoscopic Lumbar Surgery: Lumbar Stenosis Decompression – A Technical Report Choi et al., J Spine 2014, 3:5 DOI: 10.4172/2165-7939.1000182

Clinical Outcomes and Complications after Biportal Endoscopic Spine Surgery: A Comprehensive Systematic Review and Meta-analysis of 3673 Cases Don Y. Park, Alexander Upfill-Brown, Nora Curtin, Christopher D. Hamad, Akash Shah, Brian Kwon, Yong H. Kim, Dong Hwa Heo, Cheol Woong Park, William L. Sheppard DOI: 10.1007/s00586-023-07701-9