



Artificial Spinal Discs

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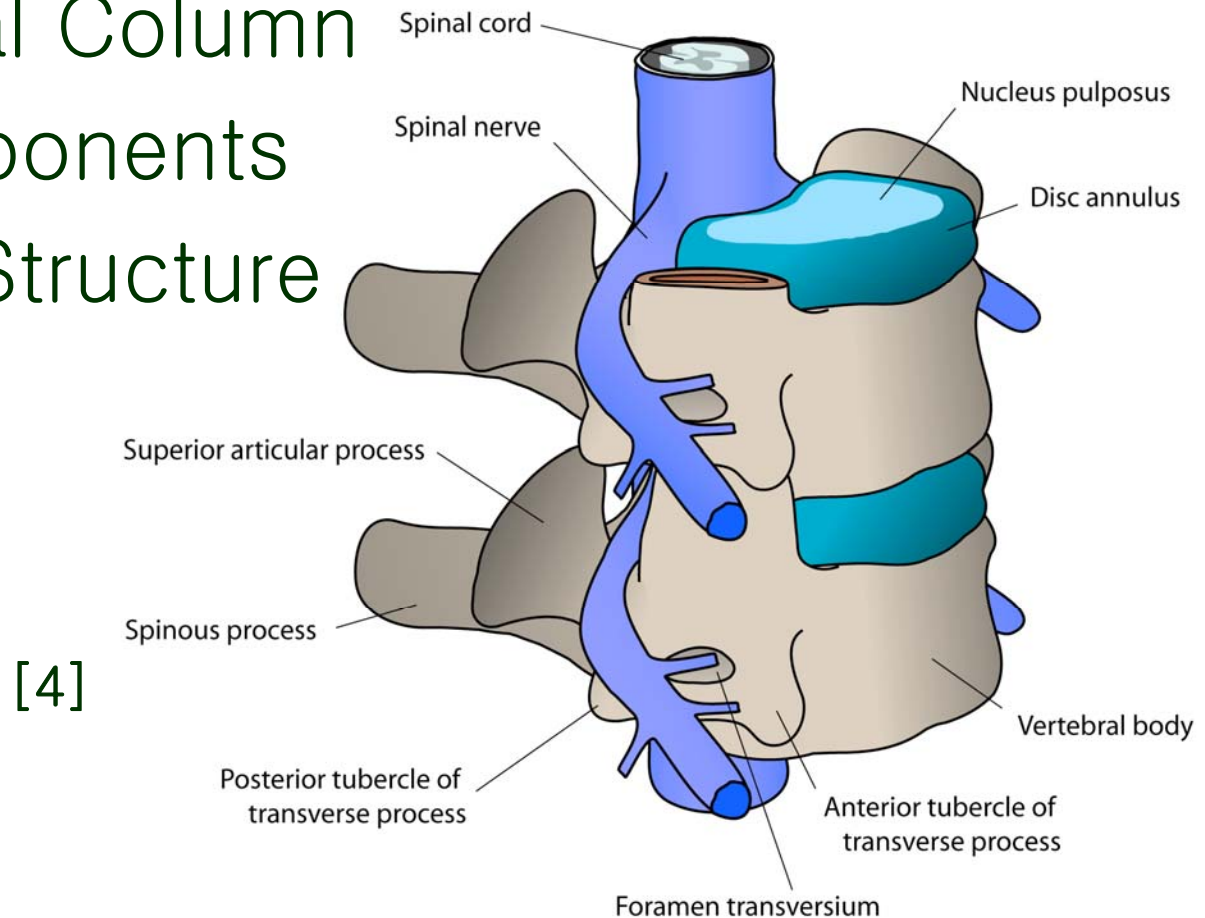
Introduction

■ Statistics

- In the U.S. almost 700,000 spinal procedures are performed every year [1]
- \$50 Billion spent on back pain treatment per year [2]
- 14% of new patient visits to physician office every year [3]

Our Spinal System

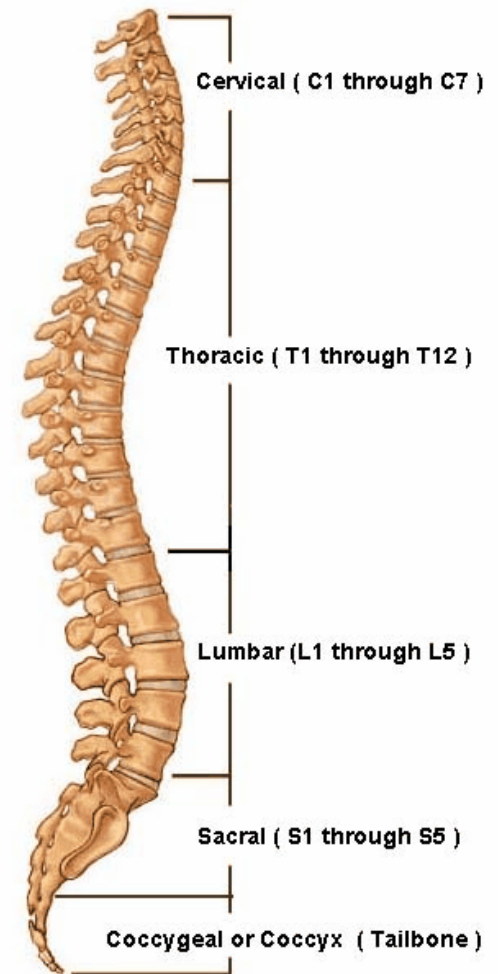
- The Vertebral Column
- Neural Components
- Supporting Structure



The Vertebral Column

- Cervical : 7 cervical vertebrae
- Thoracic: 12 thoracic vertebrae
- Lumbar: 5 lumbar vertebrae
- Sacrum: five bones
- Coccyx: tailbone (3–5 bones)

[5]



Intervertebral Disc

■ Three Components

□ Annulus Fibrosus

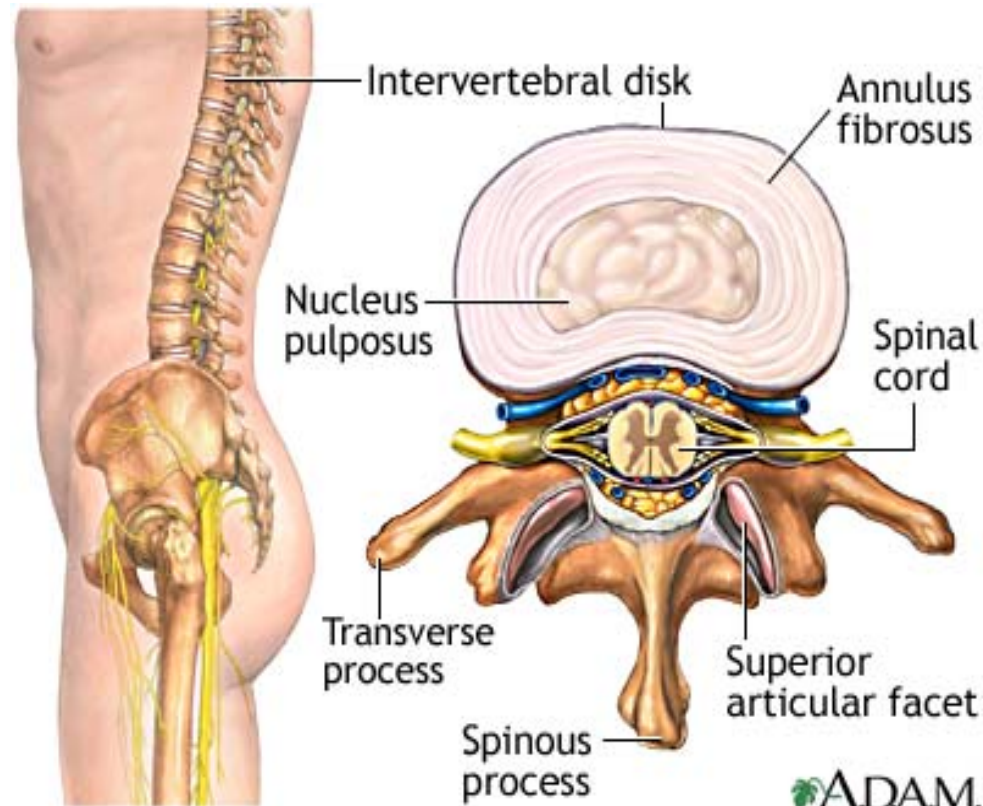
- Distributes even pressure on the disc

□ Nucleus Pulposus

- Acts as a shock absorber

□ End Plates

- Contacts adjacent vertebrae body [6]

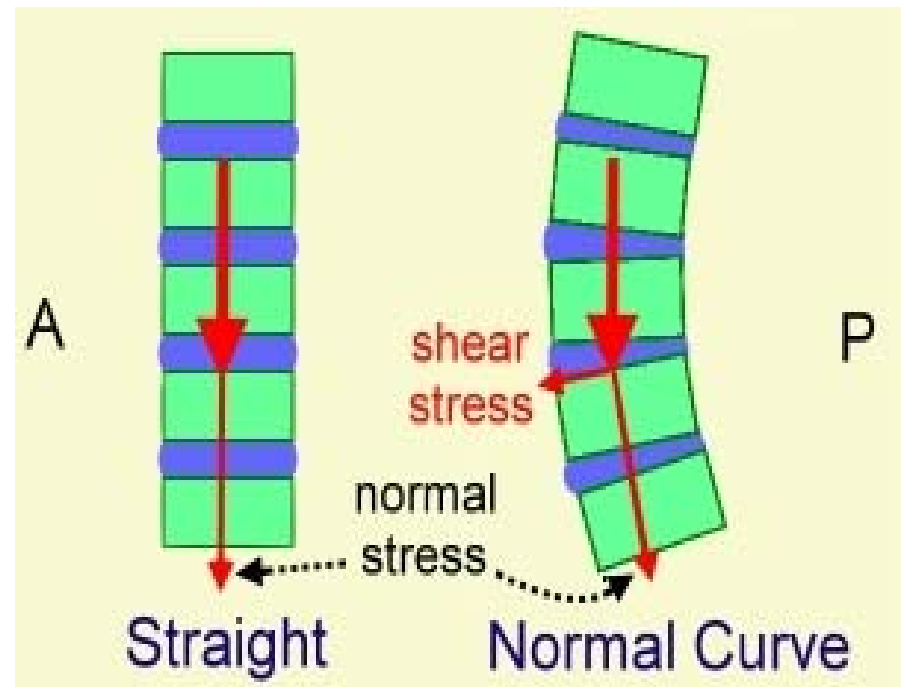


Biomechanics of Spine Column

■ Natural Curvature

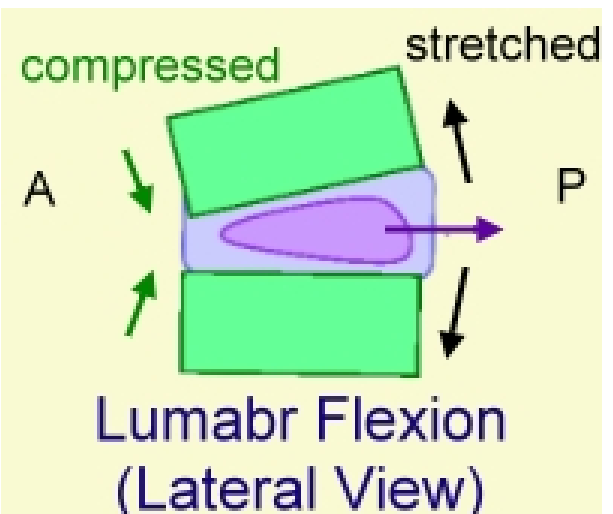
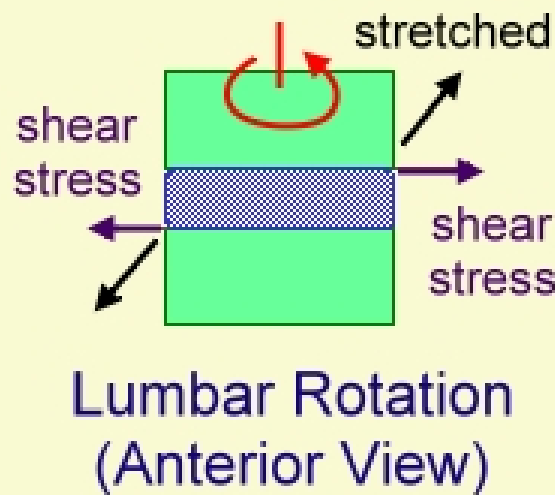
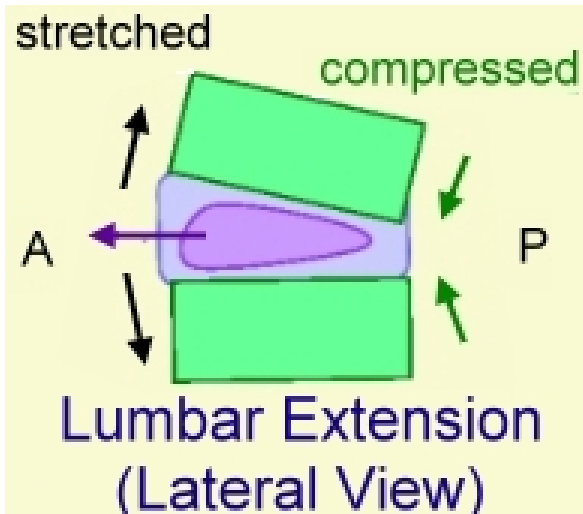
- Transmit forces from upper to lower extremities
- Distributes mechanical forces/stress on the spine
- Reduce the ground reaction forces

[7]



Biomechanics of Intervertebral Disc

- Like a Jelly Donut!
 - Distributes Sheer Forces
 - Absorbs forces through gel-like mechanism
- [7]



Disease / Disorder

■ Degenerative Disc Disease

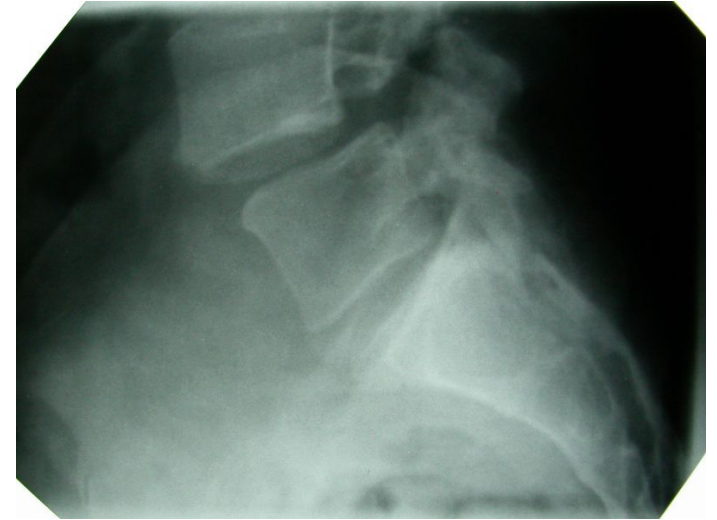
- Part of the aging process, where the intervertebral discs wear and tear off.
- DDD can affect any part of the spine.
- Lumbar and Cervical Spine are affected the most

[8]



Other Disorders

- **Spondylolisthesis:**
 - Forward slippage of the disc and the vertebra.
 - Can be categorized into 5 different levels.
- **Retrolisthesis:**
 - Backward slippage of the disc and vertebra.



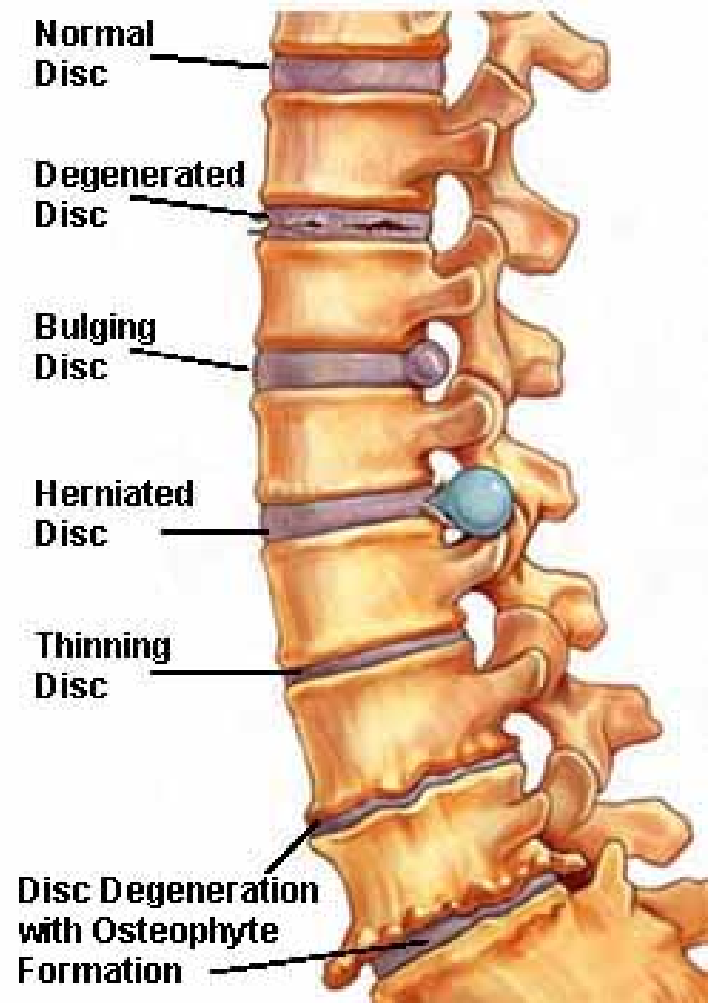
[9]

What causes DDD?

- Age
 - Dehydration of Disc
 - Bones and Ligaments become less flexible
 - Thinning Disc
- Bad natural habits
- Herniated Discs

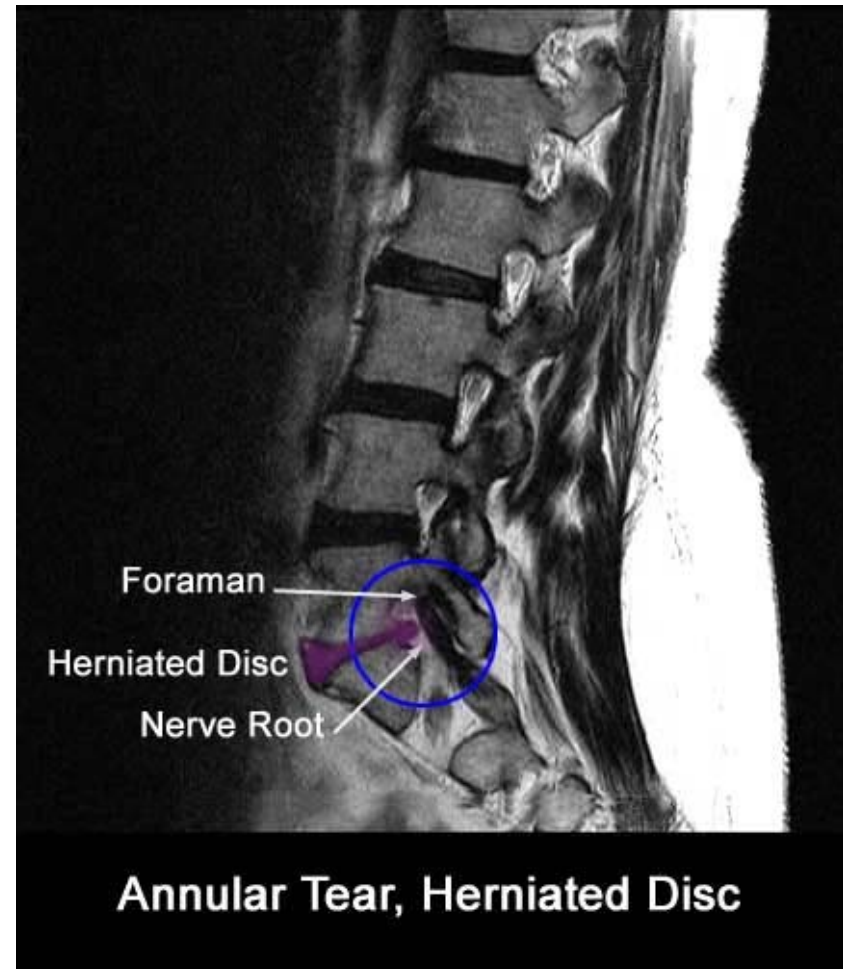
[10]

Examples of Disc Problems



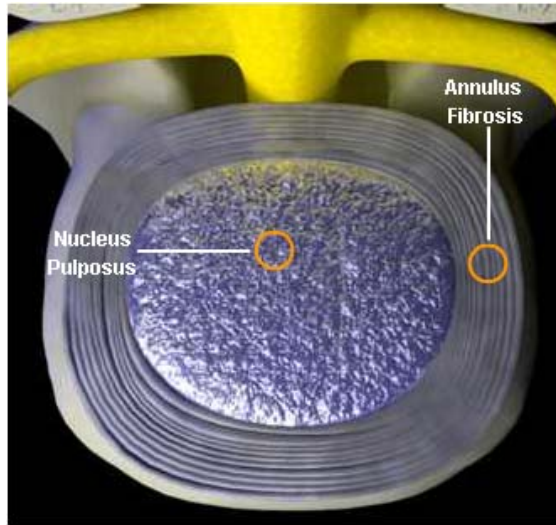
Herniated Disc

- Main reason behind DDD
- A tear on the Annulus Fibrosus
 - Leak of nucleus pulposus
 - Nucleus “Bulges Out”
 - Could result in “Drying Out”
- Occurs usually in the thirties or the forties

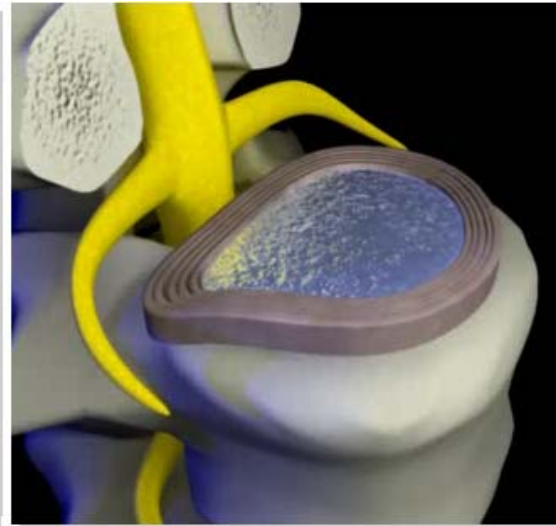


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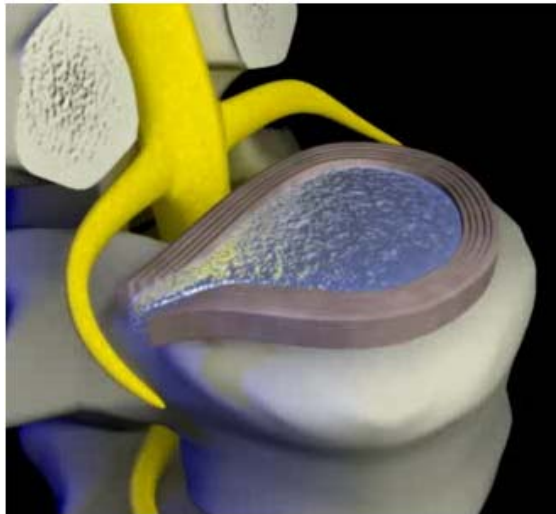
Stages of Herniated Disc



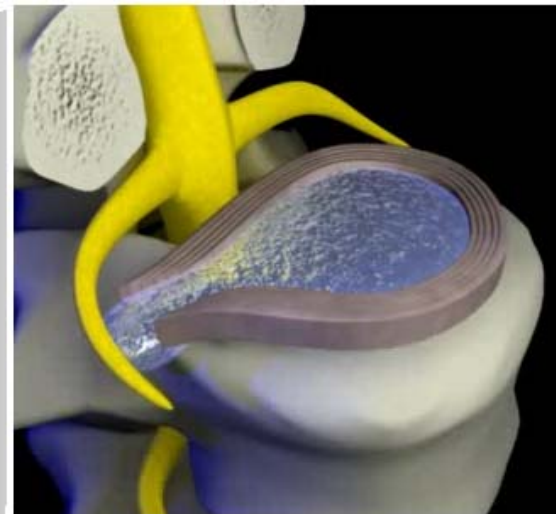
■ Normal



■ Prolapse



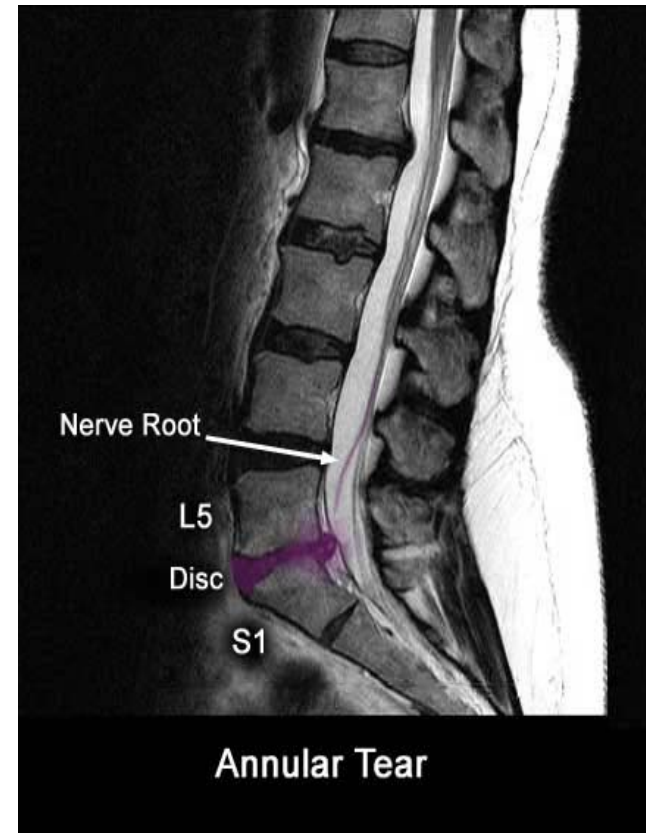
■ Extrusion



■ Sequestration

Why does it hurt?

- Pressure:
 - Leaked Nucleus presses on spinal cord and nerve roots
 - Pain signals are sent to CNS
- Weakness or numbness:
 - Lumbar: Legs, Thighs, buttocks
 - Cervical: Shoulder, Arm, Hand





Symptoms of Spinal Disorder

■ Common Symptoms:

- Pain when sitting for a long time.
- Pain through daily activities, such as running, lifting, twisting, etc.
- Pain when you lie down, or change posture.

■ Severe Symptoms:

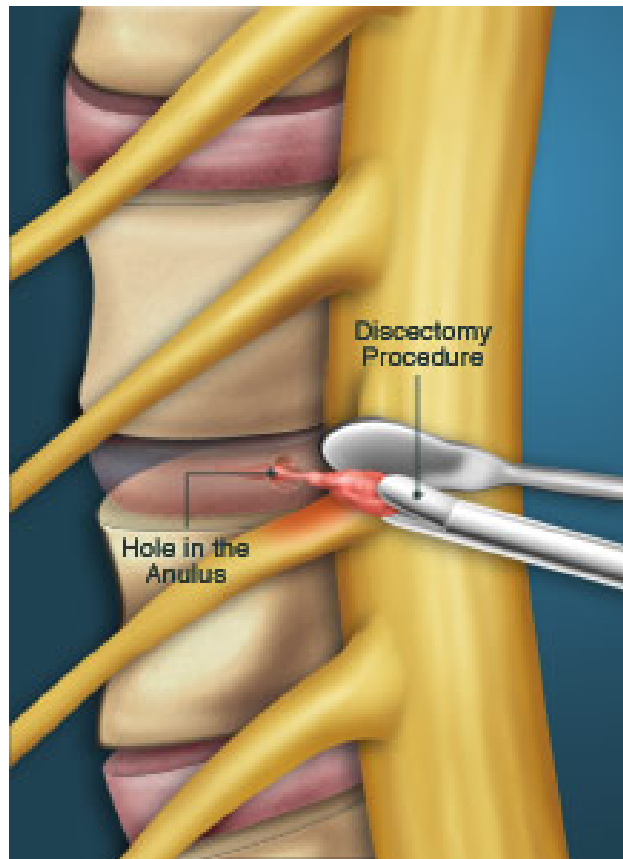
- Worsening of spine pain, (Chronic pain)
- Disabling pain
- Weakness, numbness or tingling in parts like legs, arms, neck.
- Loss of bladder control

What can be done?

- 3 Common Surgical Procedures:
 - Discectomy
 - Spinal Fusion
 - Artificial Disc Replacement

Discectomy

- Dissection of the leaked nucleus
- Relieves pressure on nerves, ligaments



- Pros:
 - Short-term pain relieving effect
 - High success rate
- Cons:
 - Disc height reduction
 - Increase of instability in structure
 - Possibility of Spinal Stenosis, facet pain [13]

Spinal Fusion

- Joining of two or more vertebrae
- Pedicle screws and interbody cages required
- Bone graft is placed between the vertebrae



- Pros:
 - Relieves back pain
 - 75% success rate
 - Great knowledge on the surgery procedures
- Cons:
 - Alters intervertebral disc functions
 - Increase of stress/strain on other discs
 - Limited movement [14]

Artificial Disc Replacement

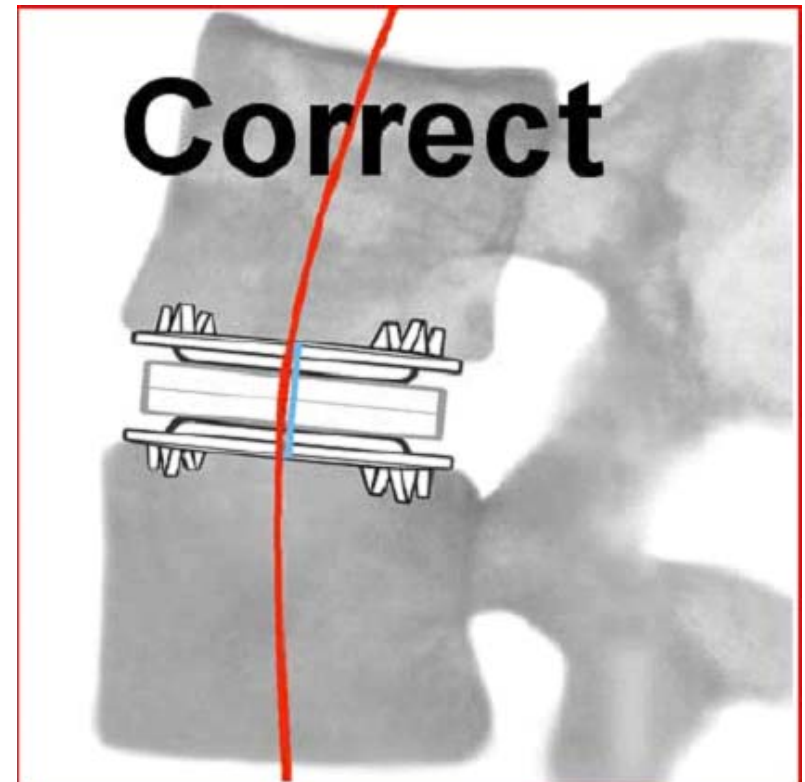
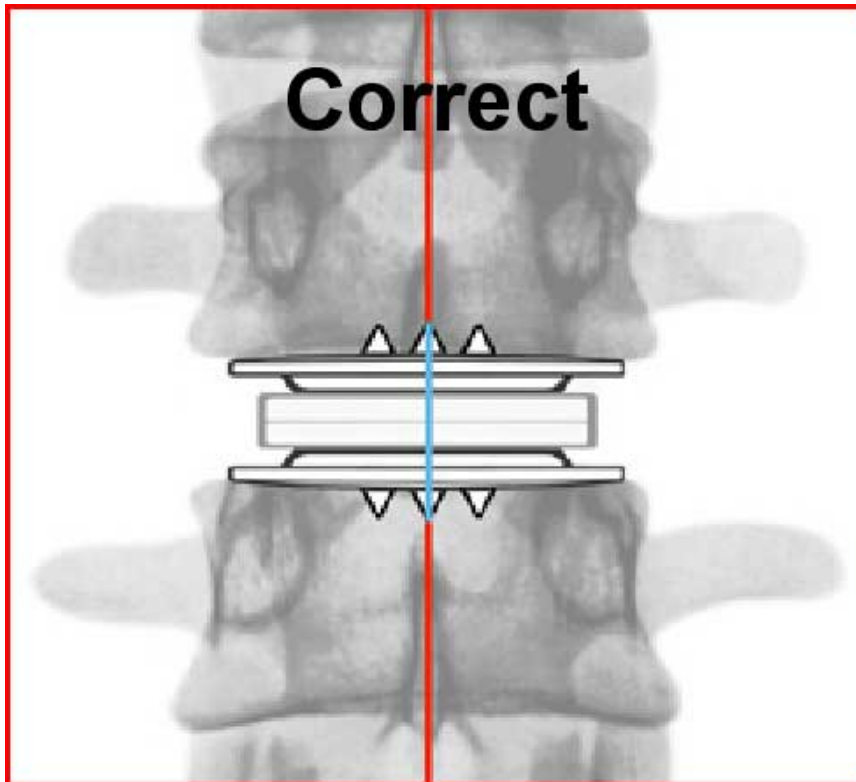
- Anterior approach
- Damaged Disc is removed
- Space is heightened to relieve pressure on nerve cords
- Debris is freed
- Artificial Disc is inserted
- Spinal height is re-adjusted

[15]



Artificial Disc Replacement Cont...

- Alignment with Center of the Posterior Spinal axis
- Anatomic alignment in lordosis [16]



Pros/Cons

■ Advantages:

- Successful Pain Relief
- Stabilization of Spine
- Independent integrity of the annulus
- Full restoration of Original Disc function
- Promising for severe cases of DDD

■ Disadvantages:

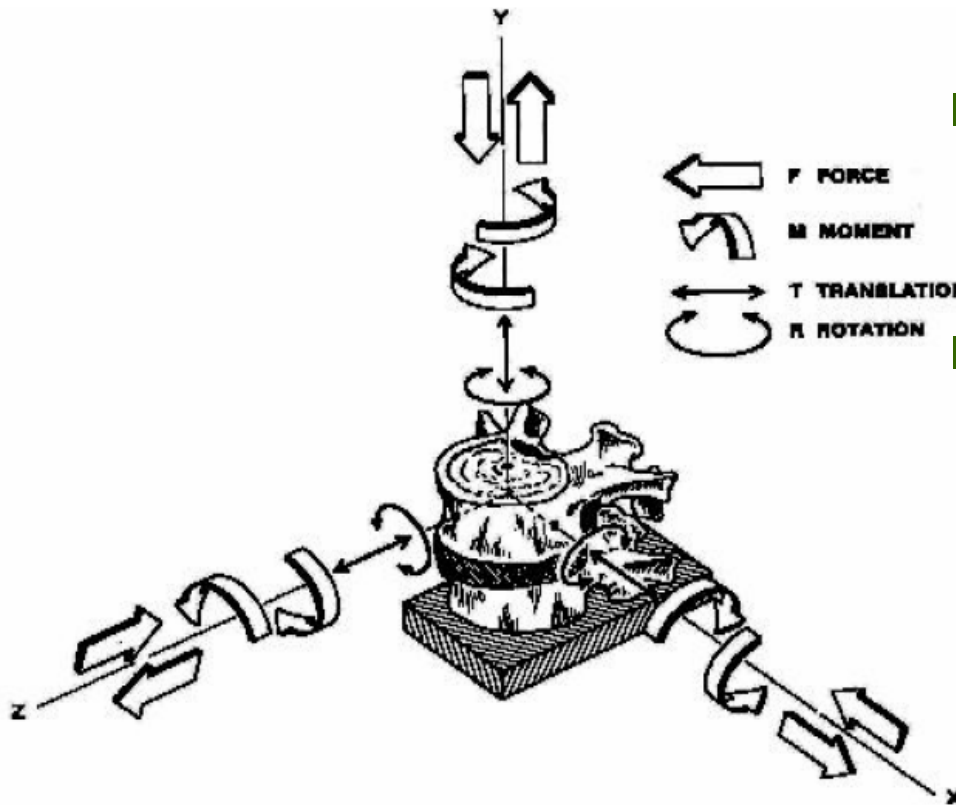
- Long & Difficult process (108 ~ 300min)
- Still in “Learning Curve” phase
- Possibility of nerve damaging
- Very specific patient requirement are needed

[16]



Biomechanical Properties of Intervertebral Disc & Artificial Disc

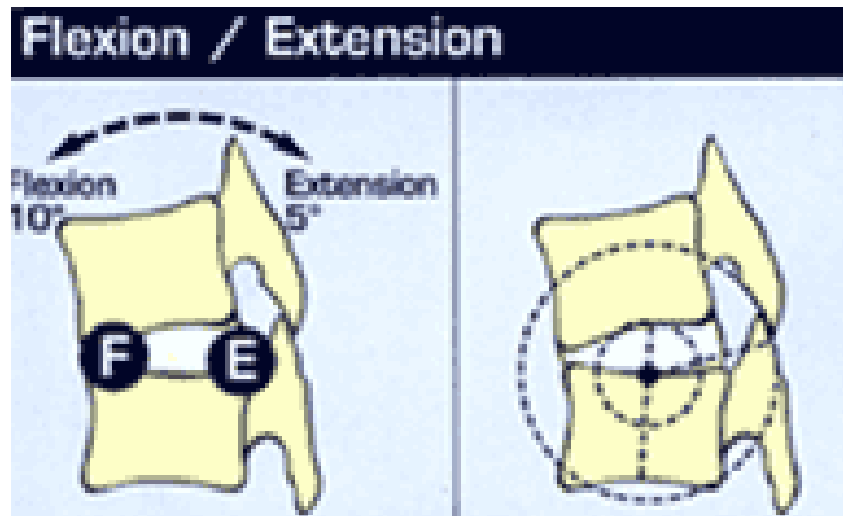
Spinal Unit



- Six degrees of freedom
 - 3 Rotational
 - 3 Translational
- Total of five motions
 - Axial compression
 - Flexion & Extension
 - Lateral Bending
 - Axial Torsion

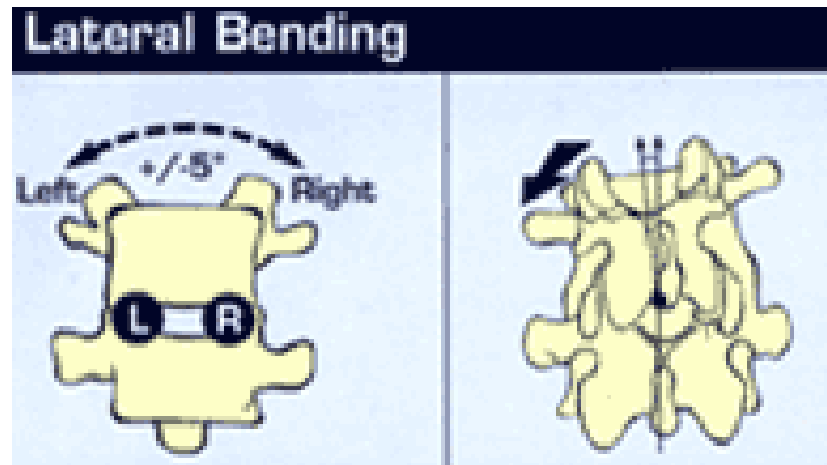
[17]

Flexion/Extension



- Allows 10° flexion freedom and 5° extension freedom
 - Annulus layers in the direction of the motion are under compression
 - Tension on the opposite side of annulus layer
 - Nucleus will move with tensile force
- [19]

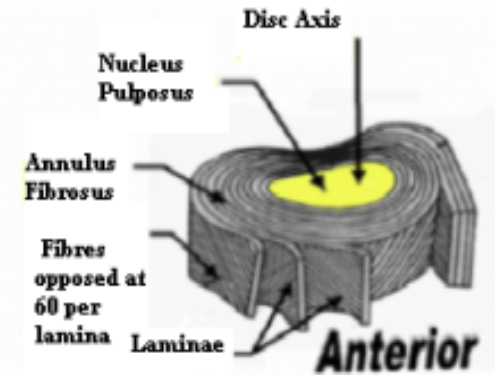
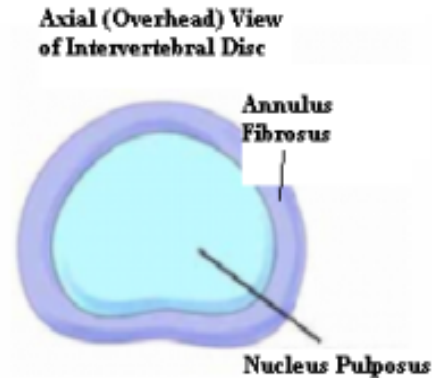
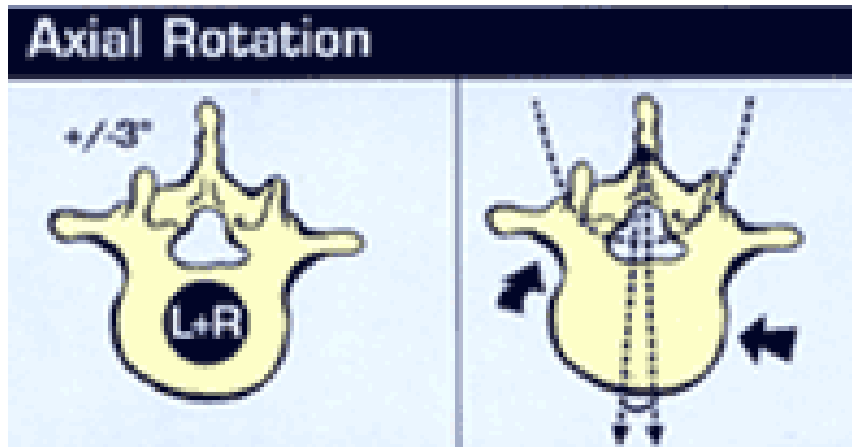
Lateral Bending



- Allows $\pm 5^\circ$ of freedom to lateral bending to both left and right
- Tension is highest on the opposite side of bending
- Again, works like a jelly-donut

[19]

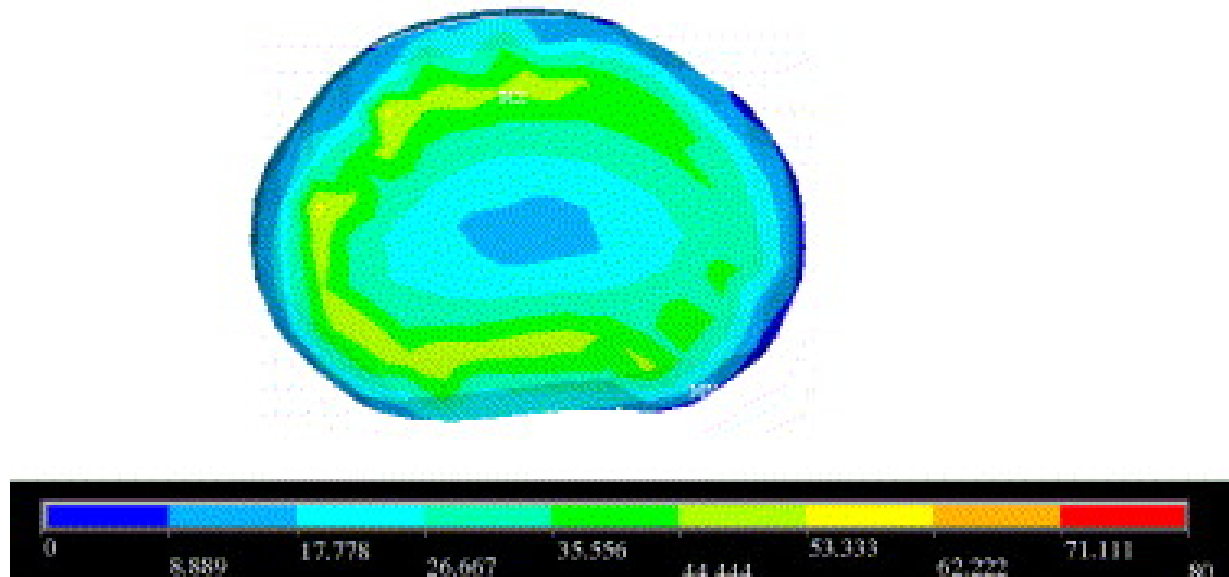
Axial Rotation / Torsion



- Allows $\pm 3^\circ$ of freedom to rotate around spinal axis
- In the Anterior & Lateral annulus region:
 - Tensile forces on fibers lie in the direction of axial torque
 - No stress on fibers lie in the opposite direction
- In the Posterior annulus region:
 - Annulus fibers are always in tension regardless of torsion direction

Axial Compression

- 1000N axial compressive loads on Lumbar Disc
- Intensity of Stress weakening towards nucleus
 - Annulus fiber shows in Green
 - Nucleus Pulposus shows in Blue
- Nucleus Pulposus absorbs some loads
- Stress/Strain distributed mainly on posterior of annulus fibers [20]



Composition of Intervertebral Disc

■ Collagen:

- Main protein of connective tissue
- 50%, in annulus fibrosus, 20–30%, in nucleus, of dry weight.
- Annulus Fibrosus contains Type II and 40% of Type I
- Nucleus Pulposus contains Type II
- Type II collagen fibers have greater intermolecular spacing than Type I
 - Nucleus has higher hydration level and better withstand compressive forces than annulus fibrosus

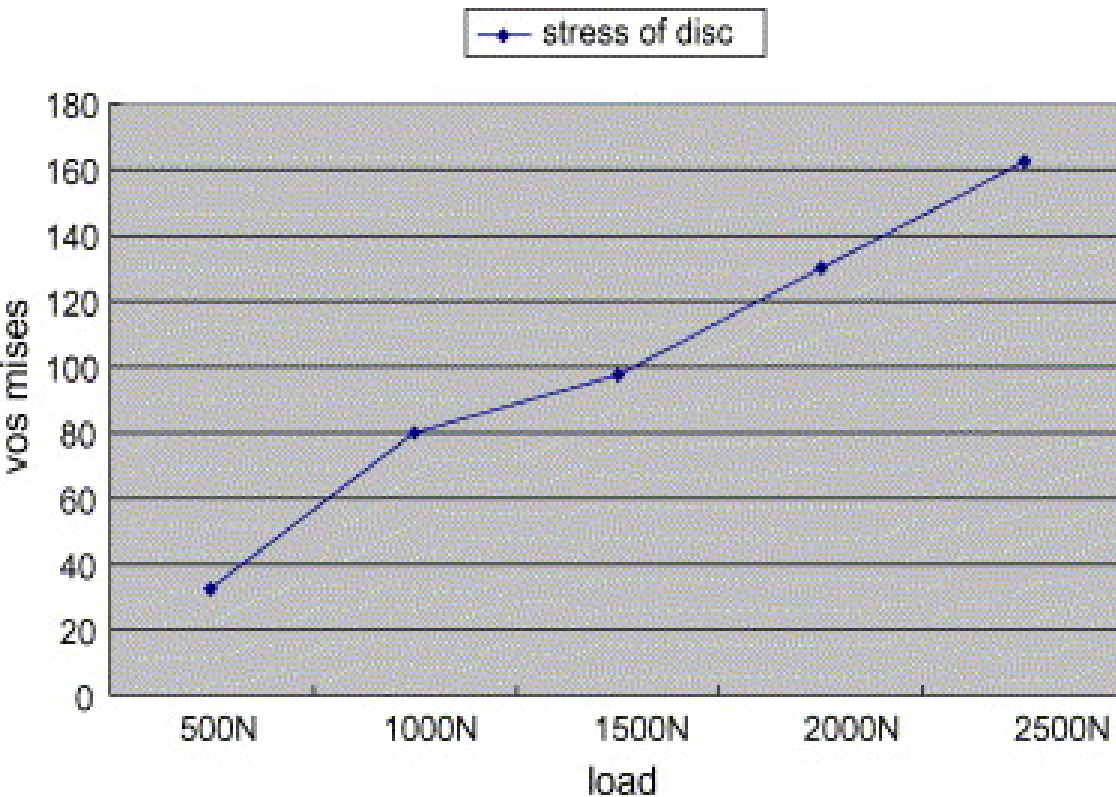
■ Proteoglycans:

- Found in Nucleus and Endplates
- Regulates transportation of solutes into and out of the disc

■ Water:

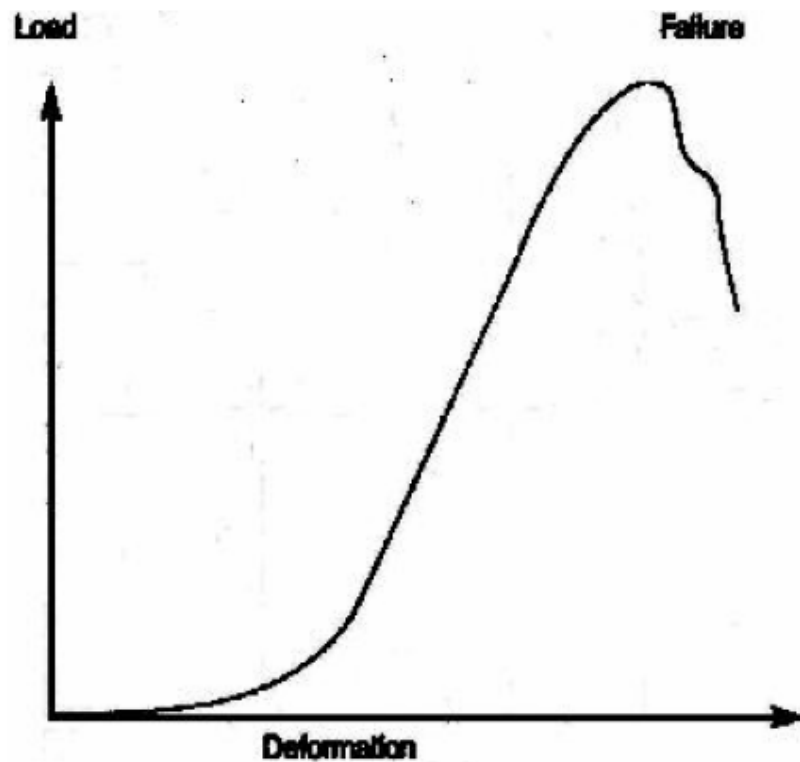
- Main component of an intervertebral disc
- Annulus Fibrosus contains 60–70% of water
- Nucleus Pulposus is composed of 70–90% water

Intervertebral Disc



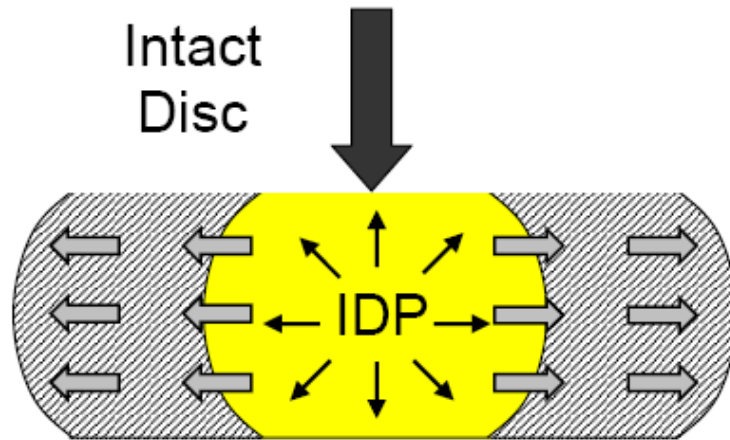
- Stress Vs. External load
- Linear Relationship
- Load increases as Stress increases
- Flexible properties to a certain extent

Intervertebral Disc



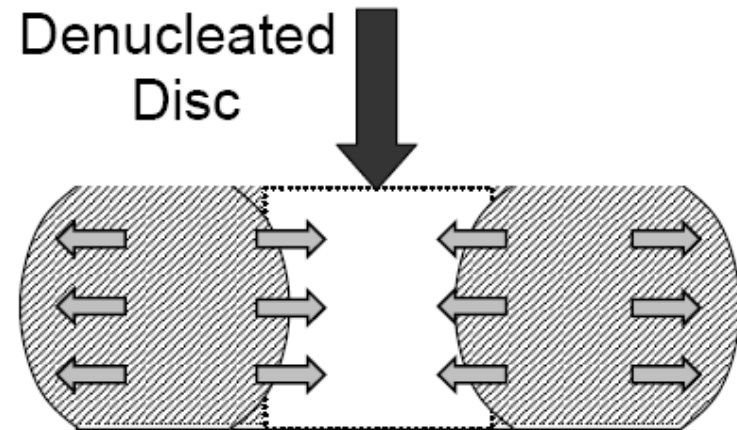
- Linear Relationship B/W Load and Deformation
- After Max.peak, disc will be damaged
 - Herniated Disc
- As the load increases, the disc stiffens
 - At low loads, disc provides flexibility
 - At intense loads, disc provides stability

Nucleus Pulposus



■ With Nucleus

- Force pushes down
- Nucleus absorbs shock
- Evenly distributes pressure & force



■ Without Nucleus

- Annulus Fiber pushes inwards
- Forces are not distributed evenly

Desired Biomechanical Properties of Artificial Disc

- Flexibility
- Good Range of Axial & Lateral rotation
 - Range of Motion: 5° of flexion–extension
- Fatigue Strength / Life
 - Estimated that individual takes 2 million steps/year, or bends 125,000 times.
 - Over 50 year of life expectancy of artificial disc = over 106 million cycles
- High Tensile & Torsional Strength
- Minimization of Contact Stress
 - Cross Sectional area of Intervertebral Disc

[14,16,17]



What types of Artificial Disc?

- Metal on Metal
- Non-Metal on Non-Metal
- Metal on Non-Metal

Biomaterials

- Inflammatory, Organotoxic or carcinogenic
- Imaging Friendly

■ Metal

- Titanium Based Alloy
 - Poor bearing surface
 - Good Imaging artifact
- Cobalt – Chromium Based Alloy
 - Superior bearing surface
 - Poor imaging artifact
- Stainless Steel Alloy
 - Great ductility
 - Poor biocompatibility

■ Nonmetal

- Rubber
- Elastomers
 - Silicone
 - Polyurethane
 - Polyethylene



Metal on Metal Design

■ Design Pros:

- Entire cross sectional area minimizes contact stress
- High fatigue strength
- High tensile strength
- High Corrosion resistance

■ Design Cons:

- Metallic/Metal ionic debris
- Stiffness of the system
- Lack in flexibility

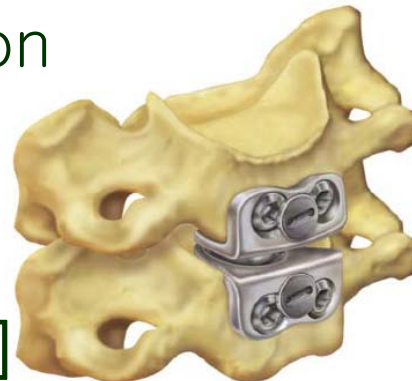
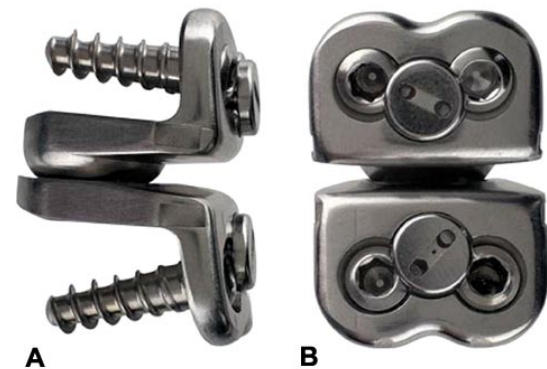
[21]

Metal on Metal:

Bristol/Cummins Disc

- “Ball in socket” design secured to anterior vertebral body by screws
- Prestige ST disc
 - Titanium carbide
 - Size:
 - Lengths: 14 to 18 mm
 - Heights: 6 to 8 mm
 - Greater degree of rotation
 - Undamaged vertebrae required
 - For soft disc herniation patients

[22]



Metal on Metal Design Cont...

■ Kineflex-C disc

- Cobalt chrome molybdenum endplates & core
- “Ball in socket” design
- Rough endplate surfaces grabs on to the surfaces of vertebrae
- Preserve motion with low wear



[23]



Nonmetal on Nonmetal Design

■ Design Pros:

- Mechanical similarity to the natural disc
- Low elastic modulus
- Close replication of disc kinematics

■ Design Cons:

- Difficult to develop long lasting device (>40 years)
- Lack of adequate implant method
- Lack in vertebrae fixation
- Difficult promoting in-growth of bone implant [21]

Nonmetal on Nonmetal: Lee Disc

■ Center:

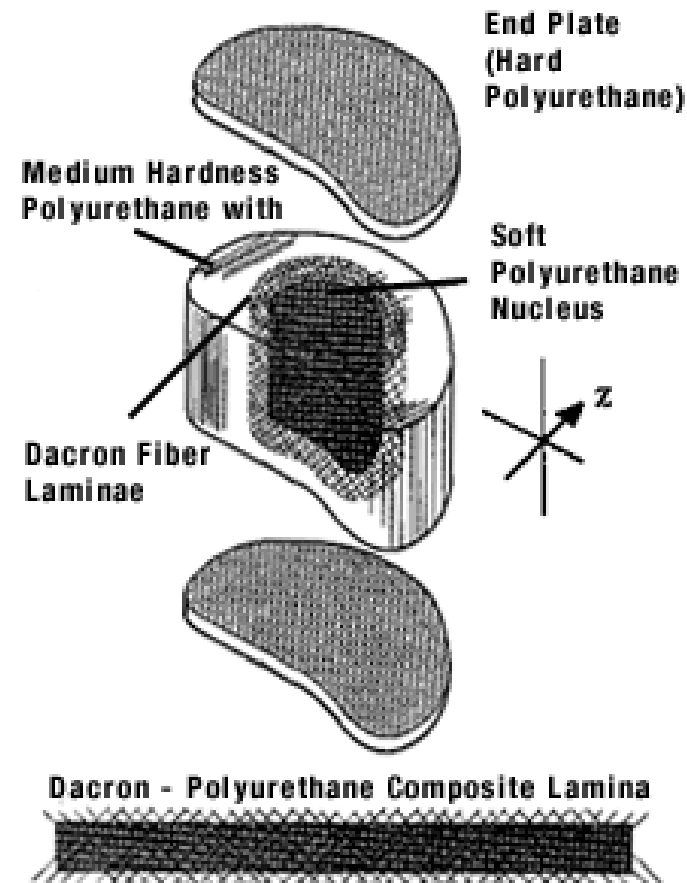
- Soft Polyurethane central core
- Mimics the structure and the function of natural nucleus

■ Outside:

- Reinforcing the structure of central core
- Sheet of Polyurethane with specific alternating fiber orientation
- Mimics the function of Annulus fibrosus

■ Endplates:

- Moderately stiff
- More similar to the bony endplates [17]



Nonmetal on Nonmetal Cont...

■ Successful:

- Portraying the compressive modulus of the natural disc
- Mimics the compressive-torsional stiffness of the natural disc

■ Failed:

- Lack of adequate implant method
- Poor Vertebrae fixation
- Poor life expectancy

[18]



Metal on Nonmetal

■ Design Pros:

- High fixation rate of metal plates
- Close replication of nucleus mechanics
- Entire cross sectional area minimizes contact stress
- Excellent range of motion in all direction
- Experimentally proven to last longer
- High Biocompatibility

■ Design Cons:

- More experimental data needs to be gathered on existing designs
- More costly to design with variety of materials
- Complex design including fusion of different materials

Metal on Nonmetal: Sandwich Design

- The CHARITÉ® Artificial Disc
 - First ever to be approved by FDA
 - Cobalt Chromium alloy end plates
 - Spikes for better fixation of disc
 - Sliding core is made of polyurethane and fits between the end plates
 - Allows good motion:
 - 0° to 20° of flexion/extension



[23]

Metal on Nonmetal: CHARITÉ® Artificial Disc Cont...

- Good?
 - Designed to restore disc space height
 - Fully restores motion segment flexibility
 - Biocompatible and durable
 - Expected life span of 40 years (85 million cycles)
- Test?
 - Long term cyclical motion simulating for less than 11 years:
 - No wear debris particles identified
 - Minimal deformation of the core: with less than 8% height loss expected in 10 years of use

[23]

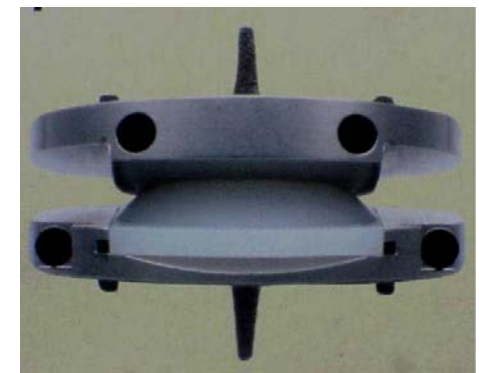


Metal on Nonmetal Cont...

■ ProDisc-C:

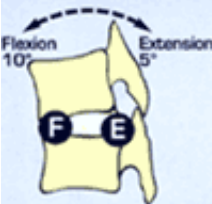

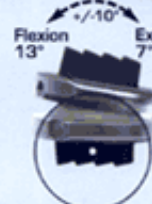
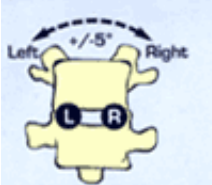

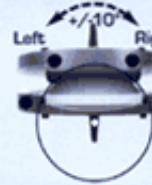

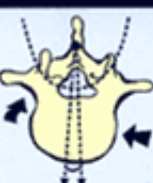

- Cobalt Chromium Molybdenum alloy endplates
- Ultra-high molecular weight polyethylene
- Connected through large central keel and spikes on each endplate
- Sizes:
 - Two endplates: medium and large
 - Three heights of nucleus: 10, 12, 14mm
 - Three lordosis angles: 6 and 11 degrees

[23]



Metal on Nonmetal: ProDisc Cont...

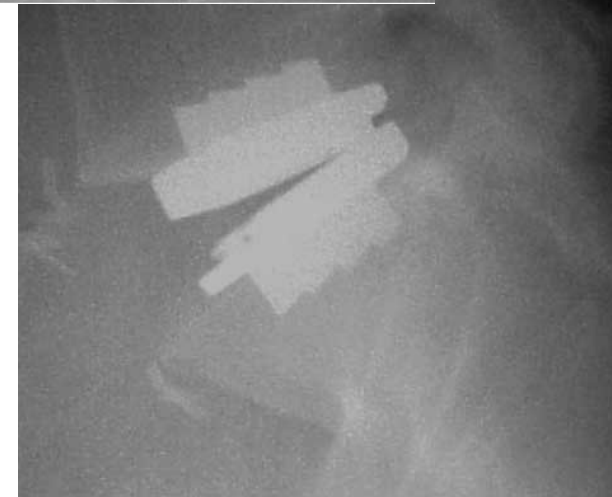
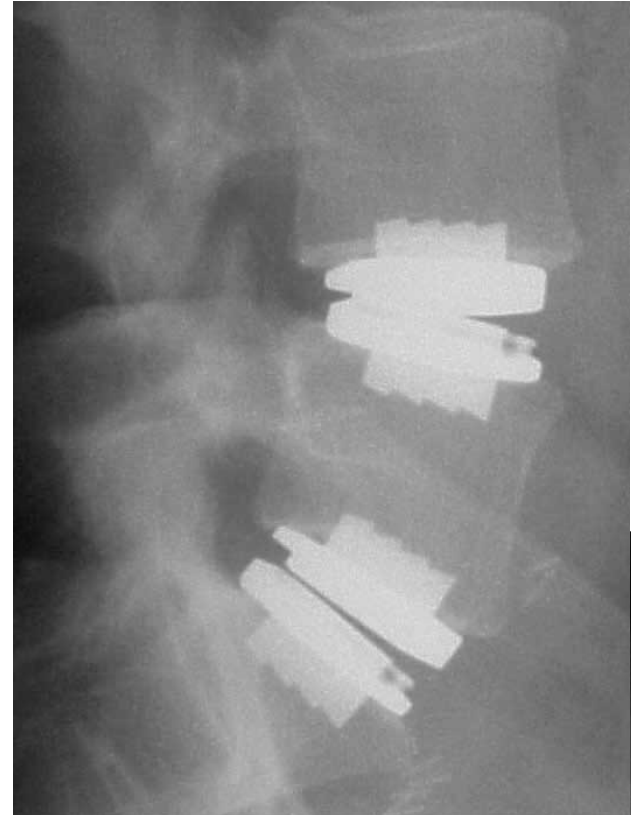
[19]

Literature: White, Panjabi 1990, Hayes 1989, Peacock 1994 + 1995, Dvorak 1989 + 1991		PRODISC®: Louis, 1992	
Flexion / Extension			
			The PRODISC® center of rotation is located just below the inferior vertebral endplate. This is consistent with the kinematics of the facet joints.
Lateral Bending			
			The PRODISC® range of motion allows the physiological range of motion.
Translation			
		PRODISC® combines all movements of flexion / extension and lateral bending with translation.	
Axial Rotation			
			The range of motion is not limited by the PRODISC® implant, but by the surrounding structures.
Axial Compression			
		Axial compression on the PRODISC® is absorbed by the mechanical properties of the polyethylene component.	

Metal on Nonmetal: ProDisc Cont...

■ Durability:

- In 7 – 11 years, 95% of patients had no implant removals, revision or failures
- A significant reduction in back and leg pain
- Still being tested to be improved





Future: What is left?

- New design of Artificial Disc are being released every year
- More design needs to be approved
- Longer experiment needs to be conducted
 - More accurate data on Life Expectancy
- Improvement on surgical method
 - Easier Fixation method

Artificial Nucleus Implantation



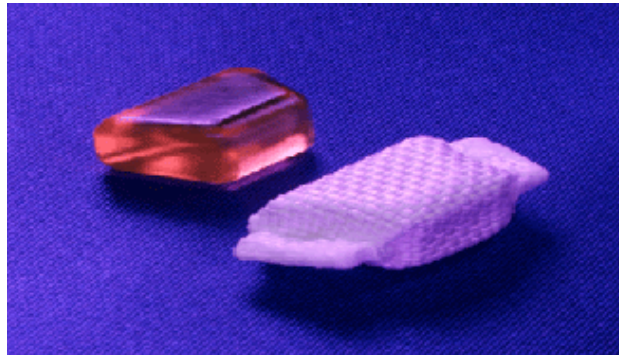
- Polycarbonate Urethane
- Nucleus Pulposus replacement called the Newcleus.
- Absorb water up to 35% of it's net weight
- An elastic memory spiral design allows for easy uncoiling and coiling to facilitate a minimally invasive implantation.

[19]

Artificial Nucleus Implantation

■ Hydraulic Artificial Discs

- Gel-like core covered with a tightly woven polyethylene jacket
- Before implantation, the pallet shaped core is compressed and dehydrated to minimize its size
- After implantation, the woven allows fluid to pass through the core
- Allowing fluid to pass through in 24 hours
- It takes 4 – 5 days for maximum expansion
- Two hydraulic implants are needed, in most cases, to provide the necessary height [26]



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THE END