



## البحث الخامس

Surgical repair of multiple level spondylolysis with preservation of spine mobility: A Clinical Study

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**Objective:** To report nine cases of multiple-level spondylolysis and evaluate the effectiveness of surgical repair in relieving the patient's pain scores and improving their quality of life, in addition to exploring possible alternative management plans.

**Patients and Methods:** We followed the CONSORT guidelines during the preparation of this study. Patients with multiple-level spondylolysis were included. We compared postoperative lower back pain (LBP), leg pain, and Oswestry disability index (ODI) during a follow-up period of 12 months with baseline values. The pain was assessed using a self-reported visual analog scale (VAS). Other outcomes as operation time, blood loss, and hospital stay were also analyzed.

**Results:** nine patients (five males and four females) were included in this study. The mean  $\pm$  SD age was 24 $\pm$ 2.96 years. Compared with preoperative data, the LBP-VAS has significantly decreased (p <0.001) after one day (5.67 $\pm$ 0.87), after three months (3.67 $\pm$ 0.5), after six months (2.78 $\pm$ 0.44), and after one year (1.67 $\pm$ 0.5). Leg pain VAS has been reduced to 3.11  $\pm$  1.05 on the first postoperative day, 1.44  $\pm$  1.59 after three months, 0.56  $\pm$  0.53 after six months, and 0.11  $\pm$  0.33 after one year. The mean operative time was 120 $\pm$ 37.1 minutes, blood loss was 325.56 $\pm$ 53.18 ml., and hospital stay was 5.22 $\pm$ 1.2 days.

**Conclusion:** After 12 months of follow-up, surgical repair and preservation of the spine motion are possible with excellent outcomes in patients with two or three-level spondylolysis