

Minimally Invasive Surgery

Spinal Fixation



MAZOR X

by MAZOR ROBOTICS

www.MazorRobotics.com



DID YOU KNOW?

Minimally-invasive surgery can reduce post operative pain by reducing the amount of damage to muscle tissue compared to traditional surgery.¹

Minimally Invasive Surgery with Mazor X™

What is minimally-invasive surgery (MIS) for spinal fixation?

Spinal fixation is the process of two or more vertebrae fixated together, immobilizing them to prevent nerve irritation and instability. It is used to treat broken vertebra, a spinal deformity, spinal weakness, spinal instability, or chronic low back pain.

Traditionally, surgeons perform this procedure using an "open" technique. Open surgery provides a direct line-of-sight to the vertebra through a long incision which may aid in the process of inserting the implants. MIS allows the surgeon to perform the procedure with minimal incisions.



What are the benefits of MIS spinal fixation?

Performing spinal fixation in an open surgery can result in damage to surrounding healthy tissue, larger scars, and postoperative pain.

MIS uses smaller incisions and studies have shown patients may experience less postoperative pain and a faster recovery.¹ However, when MIS is performed without a guidance system, many intraoperative x-rays (fluoroscopy) are required to compensate for the surgeon's compromised visualization.

Ask your doctor about the benefits of Mazor Robotics Spine Surgery.

What are the advantages of spinal fusion with Mazor X?



Mazor X includes three integrated processes - Planning, Guidance, Verification - to assure predictability and precision for the benefit of patients and those who serve them. MIS spinal fixation with Mazor Robotics technology helps to preserve surrounding healthy tissue and may result in fewer complications, less pain and quicker return to daily life.²



PLANNING

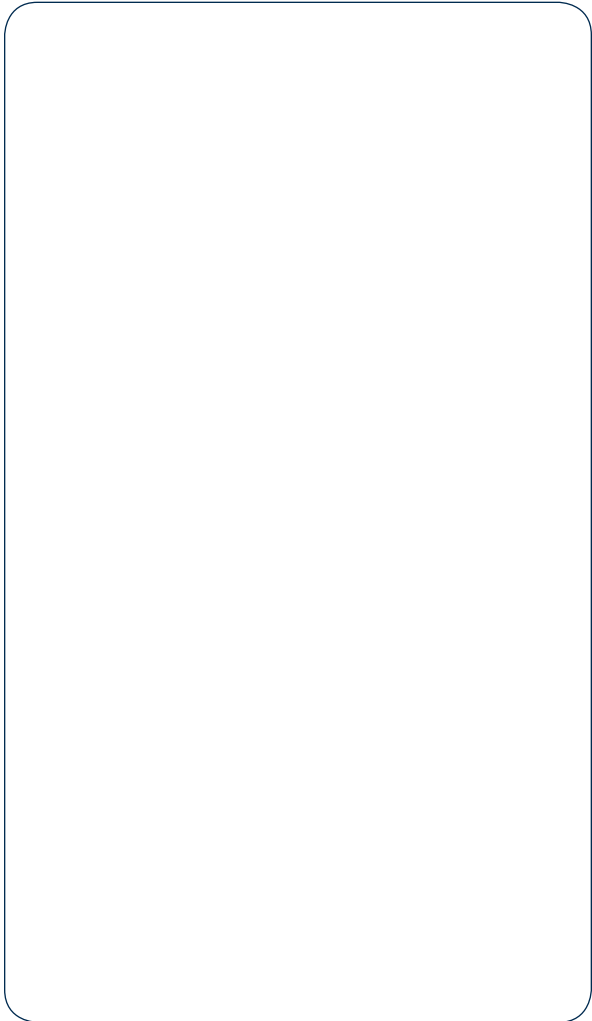
Surgeon pre-plans the surgery

GUIDANCE

Precise guidance of surgical tools and implants

VERIFICATION

Intra-operative verification of the Surgical Arm positioning



1. Goldstein CL, Phillips FM, Rampersaud YR. Comparative Effectiveness and Economic Evaluations of Open Versus Minimally Invasive Posterior or Transforaminal Lumbar Interbody Fusion: A Systematic Review. *Spine* 2016;41 Suppl 8:S74-89.
2. Kantelhardt SR, Martinez R, Baerwinkel S, Burger R, Giese A, Rohde V. Perioperative course and accuracy of screw positioning in conventional, open robotic-guided and percutaneous robotic-guided, pedicle screw placement. *Eur Spine J*. 2011;20(6):860-868.



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