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Abstract:
During the last few years, an increasing number of unstable thoracolumbar fractures, especially in elderly patients, has been treated by dorsal instrumentation combined with a balloon kyphoplasty. This combination provides additional stabilization to the anterior spinal column without any need for a second ventral approach. We report the case of a 97-year-old male patient with a lumbar burst fracture (type A3-1.1 according to the AO Classification) who presented prolonged neurological deficits of the lower limbs - grade C according to the modified Frankel/ASIA score. After a posterior realignment of the fractured vertebra with an internal screw fixation and after an augmentation with non-absorbable cement in combination with a balloon kyphoplasty, the patient regained his mobility without any neurological restrictions. Especially in older patients, the presented technique of PMMA-augmented pedicle screw instrumentation combined with balloon-assisted kyphoplasty could be an option to address unstable vertebral fractures in "a minor-invasive way". The standard procedure of a two-step dorsoventral approach could be reduced to a one-step procedure.

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