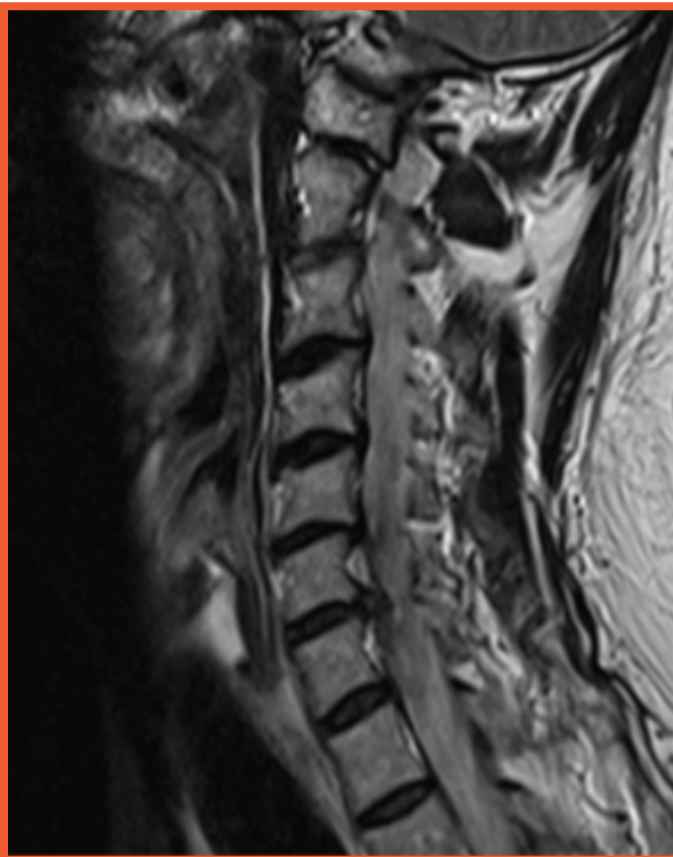


Male, 63 YO, C6-C7 Cervical Arthroplasty Ardeshir Ardeshiri, MD, Katholisches Marienkrankenhaus gGmbH, Hamburg, Germany

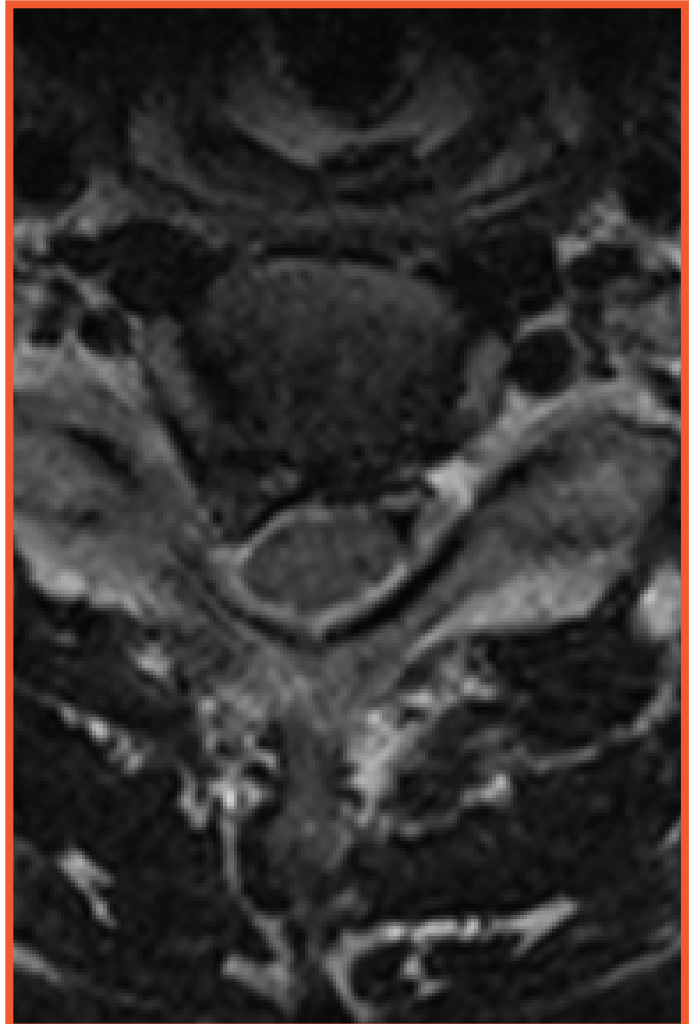


PATIENT HISTORY

- 63 year old male.
- Presenting with a 2-3-week history of neck pain and right-sided cervicobrachialgia.
- Progressive numbness and hypoesthesia of the right index finger (C7 distribution).
- Severe pain with an intensity of 8/10 on the NRS despite analgesic treatment.
- No bladder or bowel dysfunction.
- No gait disturbance or impairment of fine motor skills.
- Neurological examination revealed right triceps weakness (MRC 3-4/5) and sensory deficit of the right index finger.
- Cervical MRI demonstrated a large right-sided C6-C7 disc herniation causing C7 radiculopathy.



Pre-Op Lateral MRI of Cervical Spine



Pre-Op MRI of C6-C7 Levels

DIAGNOSIS

- Cervical disc herniation C6-C7 right.

TREATMENT

- Cervical disc replacement C6-C7
- Rapid improvement of symptoms after surgery.
- Resolution of paresis and numbness.
- High patient satisfaction at 6-month follow-up.
- Postoperative x-ray shows good position of implants with good movement in flexion/extension.

THREE MONTHS POST OPERATIVE



Three Months Post-Op Lateral X-ray of Cervical Spine with Triadyme-C Cervical Artificial Disc at C6-C7



Three Months Post-Op AP X-ray of Cervical Spine with Triadyme-C Cervical Artificial Disc at C6-C7



Three Months Post-Op Flexion X-ray of Cervical Spine with Triadyme-C at C6-C7



Three Months Post-Op Extension X-ray of Cervical Spine with Triadyme-C at C6-C7

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LA-300273 Rev. A

