

"New intraoperative simulator of navigated surgeries of the scoliotic spine: first results"

Cartiaux, Olivier ; Aubin, Carl-Eric ; D'Ercole, Marina ; Labelle, Hubert ; Cheriet, Farida

Abstract

OBJECTIF Développer un nouveau simulateur numérique intra-opératoire pour la chirurgie naviguée du rachis scoliotique. MÉTHODES Une stratégie d'instrumentation (insertion des vis pédiculaires, attachement d'une tige et dérotation, et serrage des vis) a été simulée numériquement pour un modèle synthétique de rachis scoliotique à partir de ses radiographies en position érigée respectant les conditions pré-opératoires. Le positionnement intra-opératoire en décubitus ventral a été simulé, et ensuite identifié à partir d'un appareil d'imagerie fluoroscopique 2D/3D intra-opératoire et un système de navigation chirurgicale. La nouvelle géométrie du rachis scoliotique a été transmise au simulateur, ce qui a permis de mettre à jour la planification pré-opératoire du positionnement des vis, le calcul des indices cliniques (angles de Cobb, etc.), et la simulation des manœuvres chirurgicales. Les positions des vis, mises à jour dans le simulateur conf...

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Référence bibliographique

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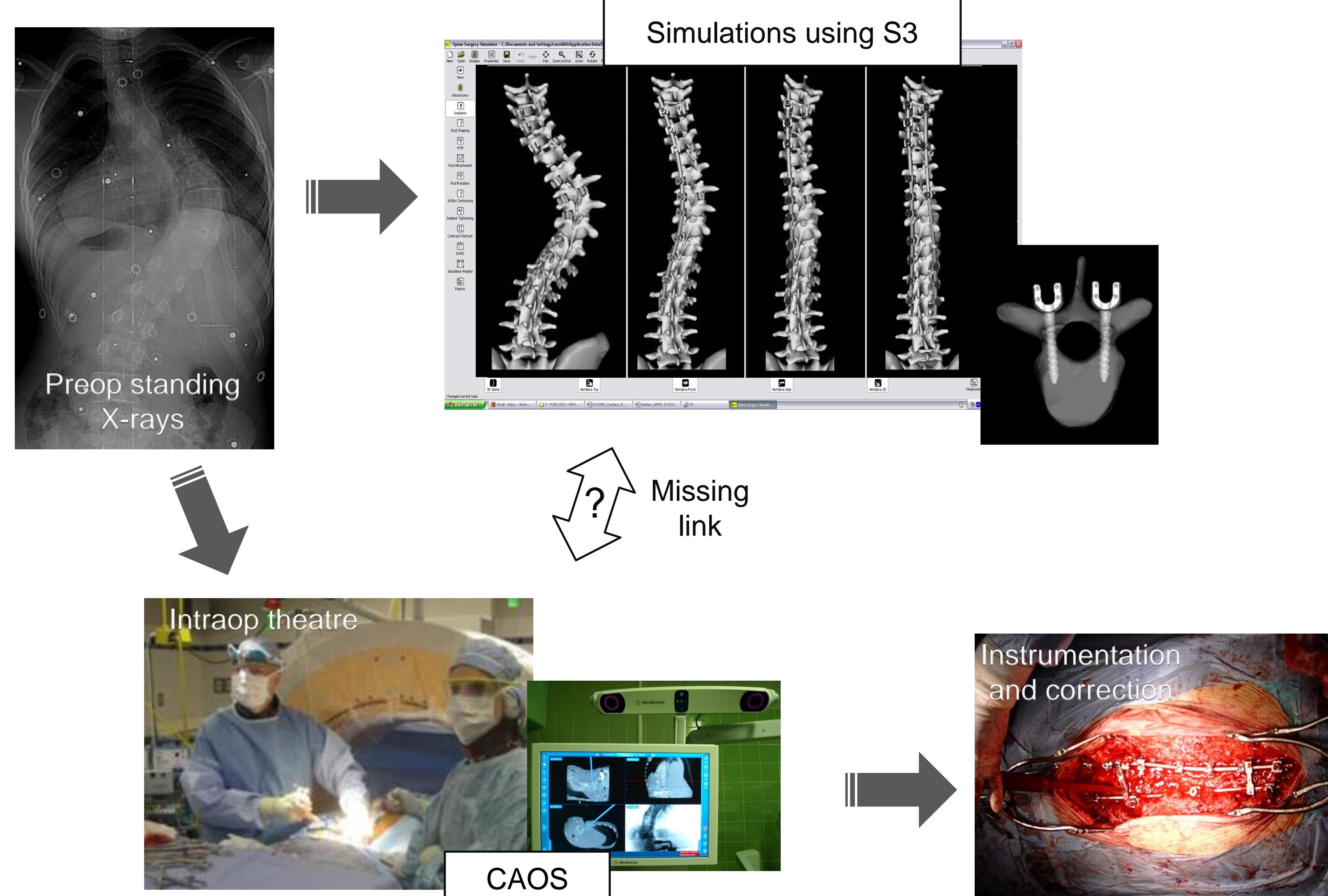
Intraoperative simulator for navigated surgeries of the scoliotic spine: first results

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Introduction

- Scoliotic spine instrumentation = complex surgery requiring many decisions pre- and intraoperatively^{1,2}
- Preop computational simulator (S3) → allows planning screw pattern design and simulating instrumentation correction³
- Commercially available intraop imaging/navigation systems (CAOS) → allow guiding pedicle screws insertion⁴



Objective

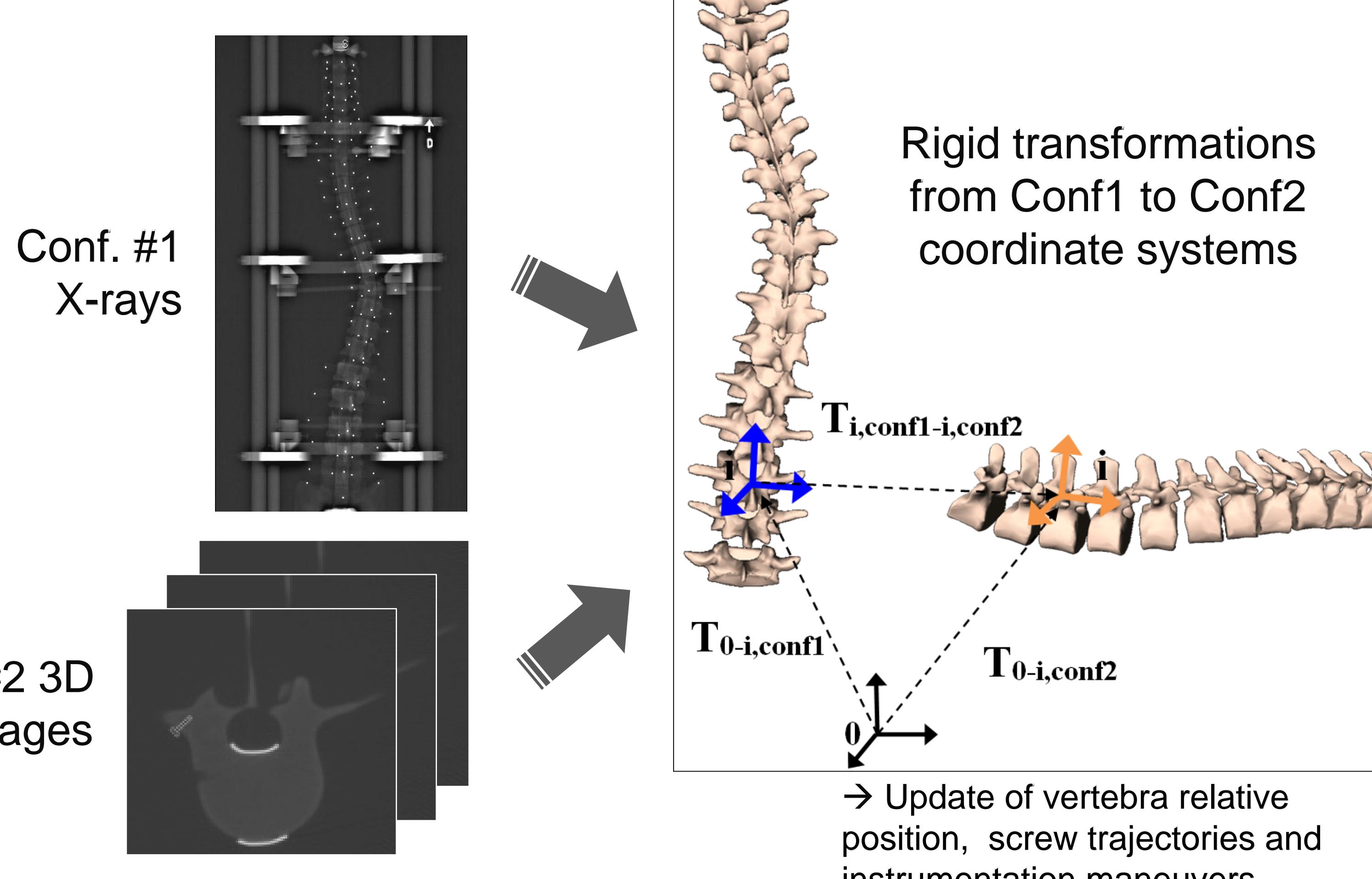
To develop a new computational simulator for navigated surgeries of the scoliotic spine.

Prototype development and testing

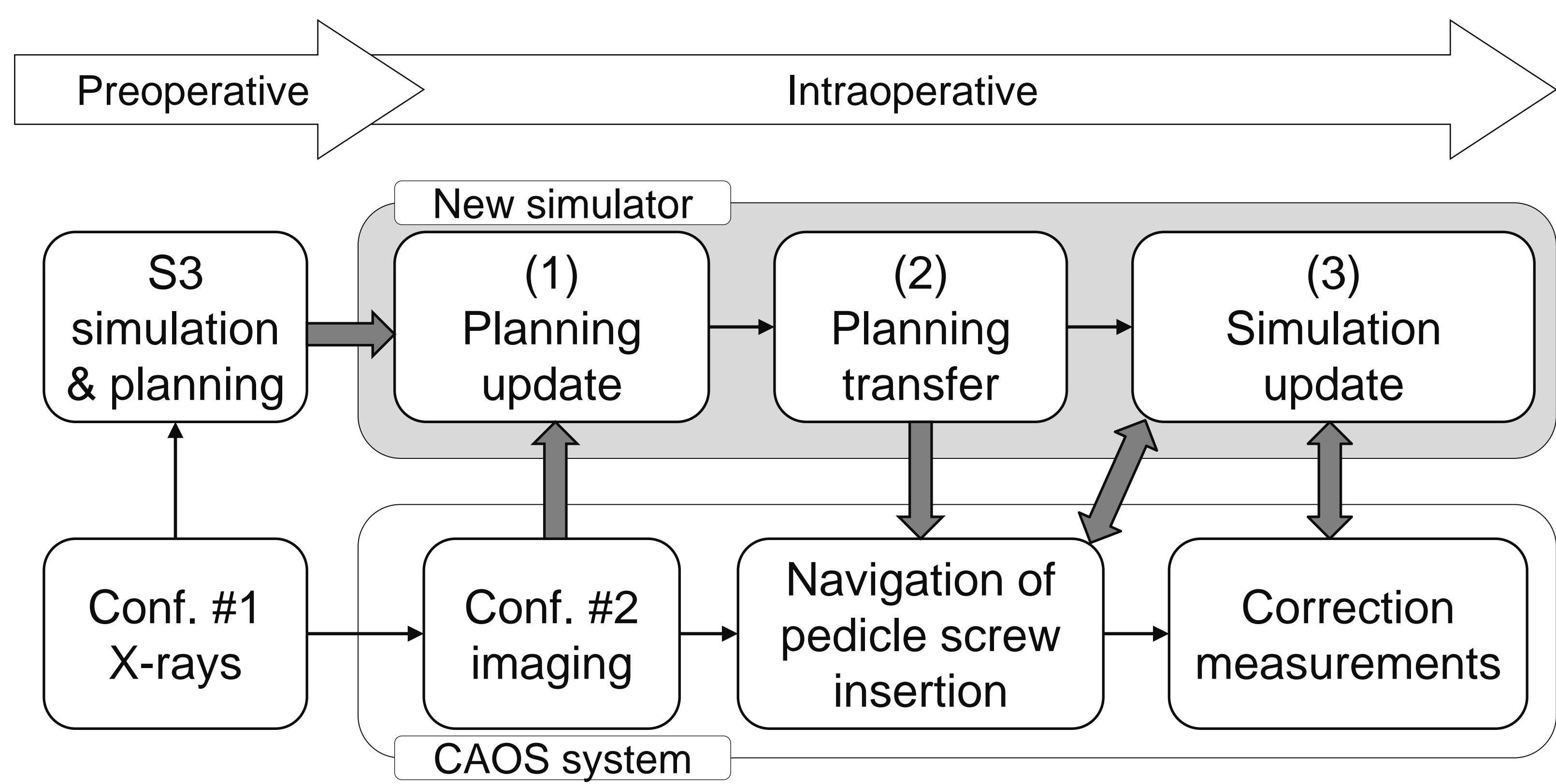
- Synthetic model of a scoliotic spine
- Configuration #1
 - Preop standing posture
 - Biplanar radiographs
 - S3 simulation/planning
 - Desired pedicle screw trajectories
 - Correction maneuvers
 - Resulting clinical indices (Cobb angles...)
- Configuration #2
 - Intraop prone positioning
 - Intraop 2D/3D fluoroscopic images



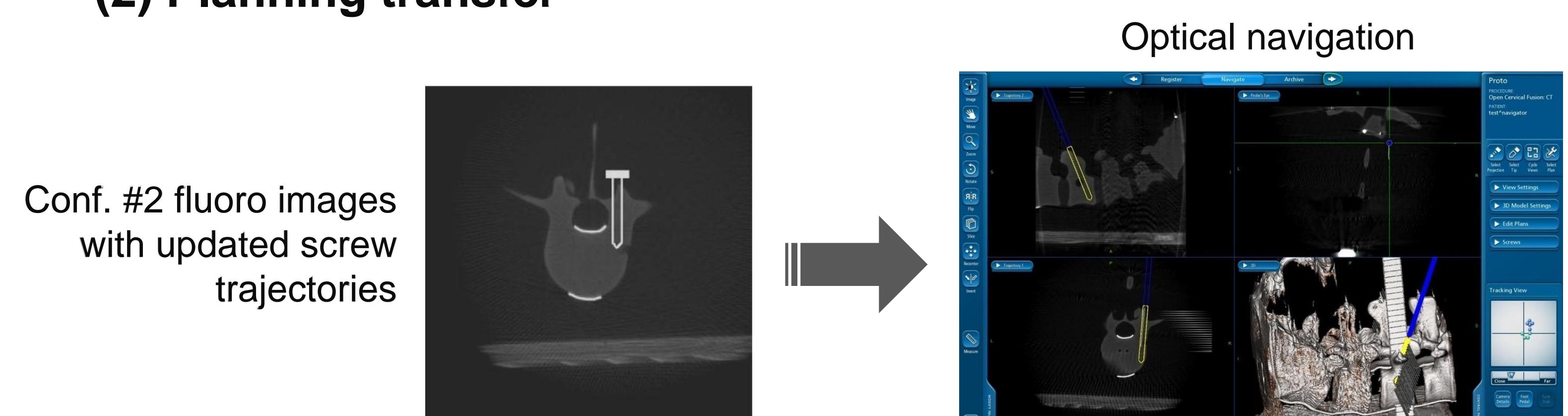
(1) Planning update



Workflow diagram



(2) Planning transfer

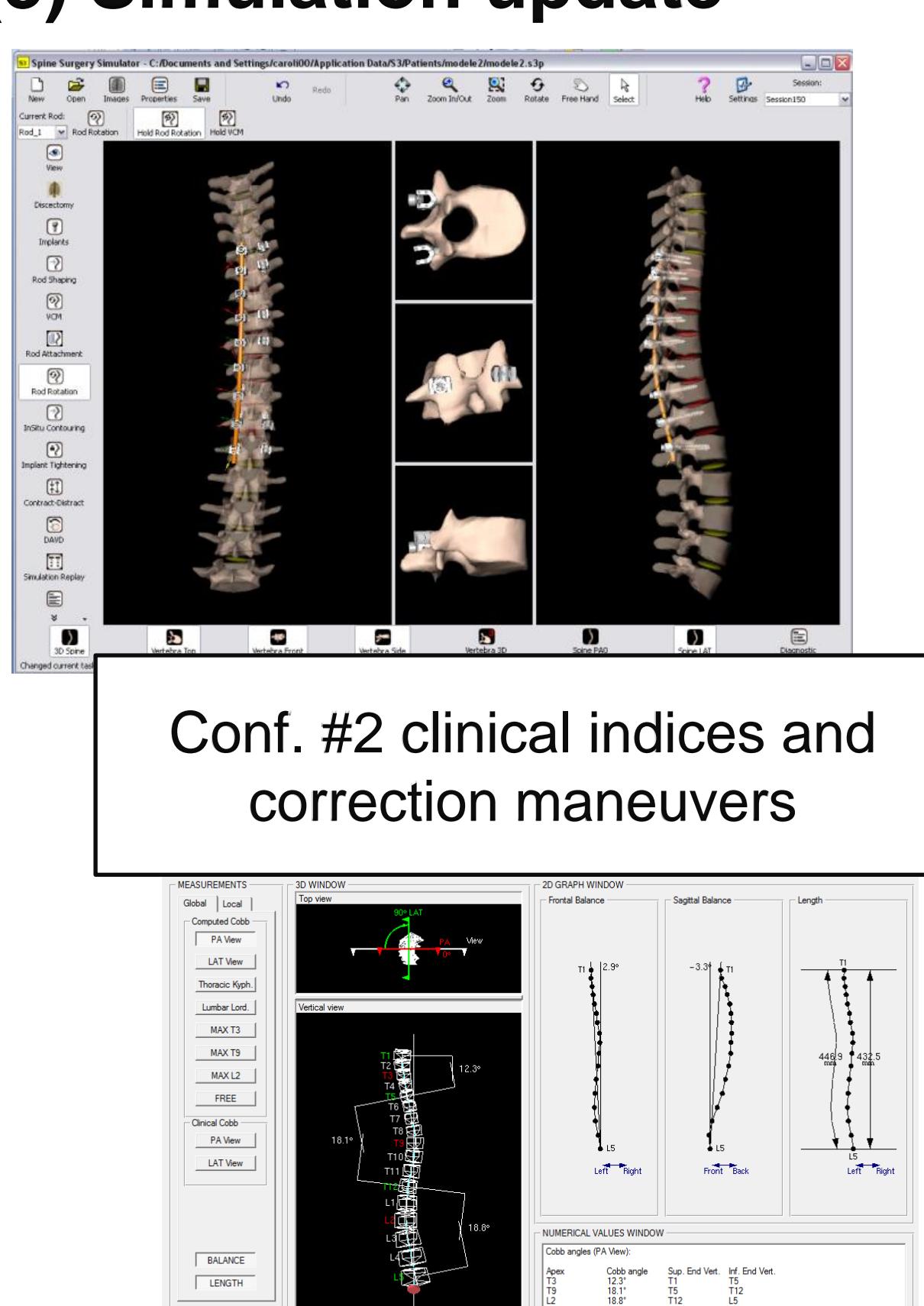


First results

- Planning update accuracy ~ 0.5 mm
- Planning transfer accuracy ~ 1 voxel
- Simulation update:

	Cobb angle	
	Pre-instrumentation	Simulated instrumentation
Conf. #1	34°	12°
Conf. #2	24°	12°

(3) Simulation update



Preliminary conclusions and perspectives

- First results using a physical model:
 - Intraop data from CAOS systems can be used to update preop simulations/planning, account for changes occurring in the OR, and test other instrumentation strategies
 - These results have to be validated during real surgeries
 - The new intraop simulator may contribute to obtain real-time feedback during CAOS surgeries and optimize correction

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