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## UCLA Doctor Uses Implant Surgery to Relieve Back Pain

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**Sue Pascoe** , Staff Writer

When Pacific Palisades resident Nancy Howell started having back pain two years ago, she had never heard of lumbar spinal stenosis, which most commonly affects the middle-aged and elderly.

'All of a sudden, my back started hurting and it got worse and worse,' Howell said in an interview. 'I had pain in my buttock and both legs. I thought it was a pinched nerve.'

After suffering for six months and enduring pain so severe that she had trouble sleeping, Howell went to see her regular physician, who prescribed pain medication.

'The medicine didn't help much and it messed up my stomach,' said Howell, now 72. She was accustomed to walking along the beaches and canyons that are characteristic of the Palisades, but the pain became so intense, 'I got to the point that I couldn't walk anymore.'

Howell, a retired bookkeeper who has volunteered 26 years as a manager at the Santa Monica Hospital gift shop, finally happened to read an article about Dr. A. Nick Shamie and a new transplant surgery he was doing for back pain only a few miles from her home.

'This sounded like something I needed to check on,' Howell said.

Shamie, who is chief of spine surgery at the VA hospital and director of spinal deformity surgery at UCLA Orthopaedic Hospital, was one of the first doctors in the country to use X-stop, an implant that relieves back pain in certain patients. The implant is designed to help patients who have problems with lumbar sacral pain, a condition caused by degeneration of the spine.

'As we age,' Shamie explained, 'the discs of the spine, which are like inflated tires, start to deflate. Since the discs hold the bones of the spine apart, their deflation causes bones to collapse on each other and rub.'

Although age and gravity cause this condition, not everyone suffers as much as Howell did. Some people may have more space between the bones in the spinal column and not be affected. Others may have not have lost as much fluid from their discs, which means their 'tire' remains inflated.

Shamie also noted that the vertebrae are held together with ligaments, which are normally stretched. As the 'tires' in the front deflate, the ligaments in the back of the spine "crinkle" up, crowding the space for the nerves and causing the symptoms commonly known as sciatica.

Until two years ago, with the exception of major back surgery, few medical options were available for stenosis. Then the X-stop device became available to physicians, following FDA approval. The device is inserted between the bony structures that stick out of the lumbar vertebrae, keeping the spacing between the vertebrae--a straightforward solution that gives patients immediate relief.

'It's so simple, I wish that I had thought of it,' Shamie told the Palisadian-Post.

On September 21, 2006, Howell went into surgery at 10 a.m., and was home from the hospital by noon the next day. 'I was out of pain,' Howell said. 'My husband has had four back surgeries and he couldn't believe I was pain-free.'

Shamie said that Howell's experience is typical. The operation usually takes under an hour and involves an overnight stay in the hospital. An IV sedation and local anesthesia are used, which means patients are awake during the procedure and generally feel instant relief afterwards.

Lumbar spinal stenosis patients typically are over 50, and complain of lower back pain or pain in their legs. They experience significant relief from that pain when they sit down or lean over, like when pushing a shopping cart. When seeing patients, Shamie orders an MRI to determine if they are candidates for this procedure.

'The X-stop is a big improvement because it replaces major back surgery,' said Shamie, who was one of the first surgeons in the country to do the procedure. 'With this surgery there is no risk of damage to the nerve and the nerve sac.' The implant is removable and does not limit further treatment options; no bone or soft tissue removal is typically required; and the bone surrounding the spinal canal is left intact, protecting the spinal cord from damage.

Well over a year after her surgery, Howell remains pain-free and has been enjoying her long daily walks.

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