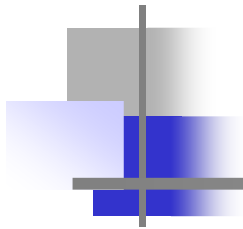


Spine Anatomy



Halldór Jónsson jr

Orthopaedic Department Landspítali

Reykjavík

Welcome to Iceland



.... to Spinal Instructional Course, *Monday, June 11th*,

Faculty:

Anna Lena Robinsson, Uppsala Sweden

Peter Försth, Uppsala, Sweden

Helena Brisby, Gothenburg, Sweden

Christian Hellum, Oslo, Norway

F C Öner, Utrecht, Netherlands

Halldór Jónsson jr, Reykjavik, Iceland

Hildur Einarsdóttir, Reykjavík, Iceland

Bjarni Valtýsson, Reykjavík, Iceland

Kristjan G. Guðmundsson, Reykjavik Iceland

Magnús Ólason, Reykjavik, Iceland



Moderators: Ragnar Jónsson, Halldór Jónsson jr., Peter Försth

17:00-17:30 Introduction. Diagnostic tests. Applied anatomy. - Halldór Jónsson Jr

17:30-18:00 Spinal imaging. Principles and pitfalls. - Hildur Einarsdóttir

18:00-18:30 Pathophysiology of spinal & nerve root pain - Helena Brisby

18:30-19:00 Spinal Pain: Epidemiology & life style factors - Kristján G. Guðmundsson

19:30- *Dinner - Vox, Hilton Reykjavík Nordica*



.... and Spinal Instructional Course, *Tuesday, June 12th*,

08:00-08:30 Clinical investigations, correlation with symptoms & imaging - Halldór Jónsson Jr

08:30-09:00 Nonoperative treatment of chronic cervical and lumbar pain - Magnus Ólason

*09:00-09:30 Acute and chronic cervical axial and nerve root pain, herniated disc of the cervical spine.
Diagnosis and treatment - Björn Zoëga*

09:30-10:00 Lumbar spinal stenosis. Diagnosis, and state of the art for surgery. - Peter Försth

10:00-10:20 COFFEE

10:20-10:50 Herniated disc of the lumbar spine. Diagn, treatm and state of the art for surgery. - Christian Hellum

10:50-11:20 Spondylolisthesis. Classification, Etiology, Epidemiology. Diagnosis and treatment. - Peter Försth

11:20-11:50 EB treatment and MI modalites of chronic lumbar and cervical pain. - Bjarni Valtýsson

11:50-12:30 LUNCH

12:30-13:00 Lumbar and thoracic spinal injuries. Conservative and operative treatment. - Halldór Jónson Jr

13:00-13:30 Cervical injuries. Conservative and operative treatment. - Anna Lena Robinsson

13:30-14:00 Surgery for chronic lumbar pain. - Christian Hellum

*14:00-14:30 Surgical complications, postoperative infection and neurological complications.
How to avoid, diagnose and treat. - F. Cumar Öner*

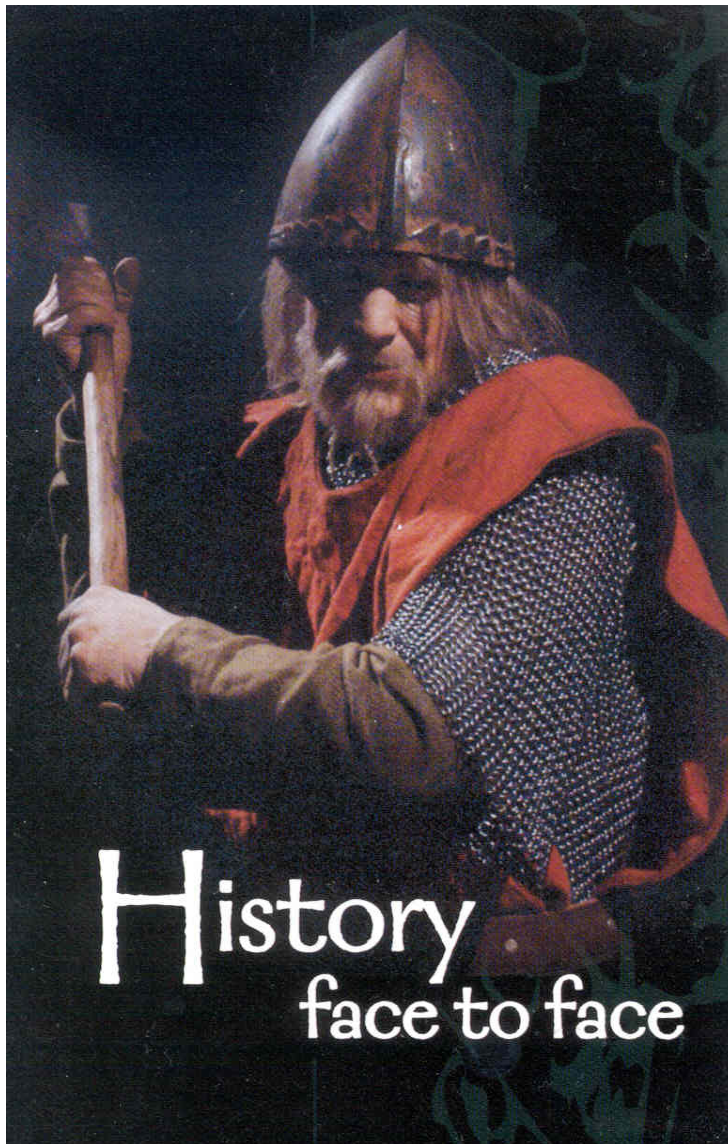
14:30-15:00 Patients with spinal problems. When is a referral to a spinal surgeon indicated. - Helena Brisby

15:00-15:20 COFFEE

15:20-16:40 Clinical cases and imaging - Smaller groups, one faculty member/group.

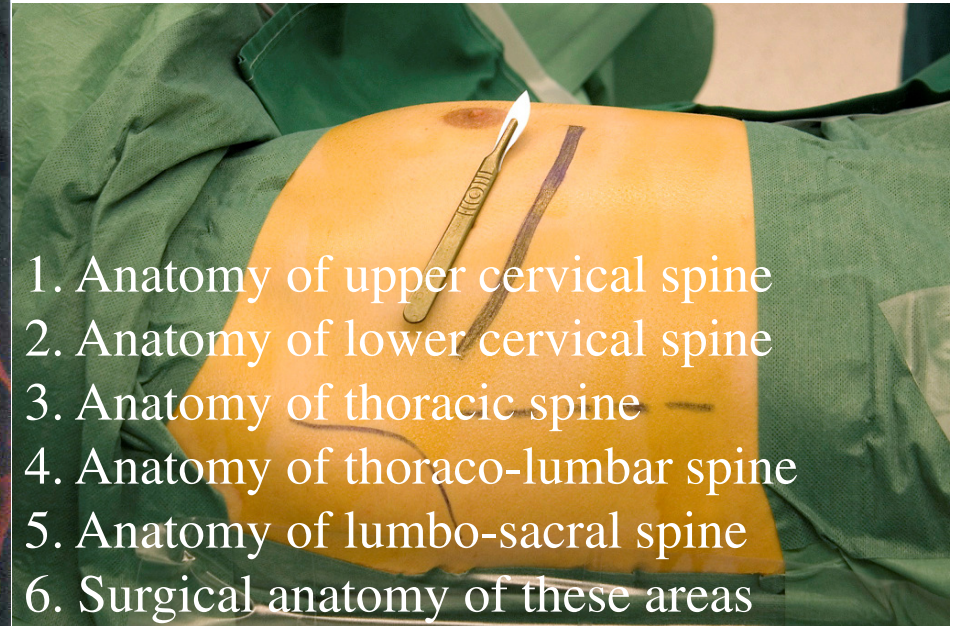
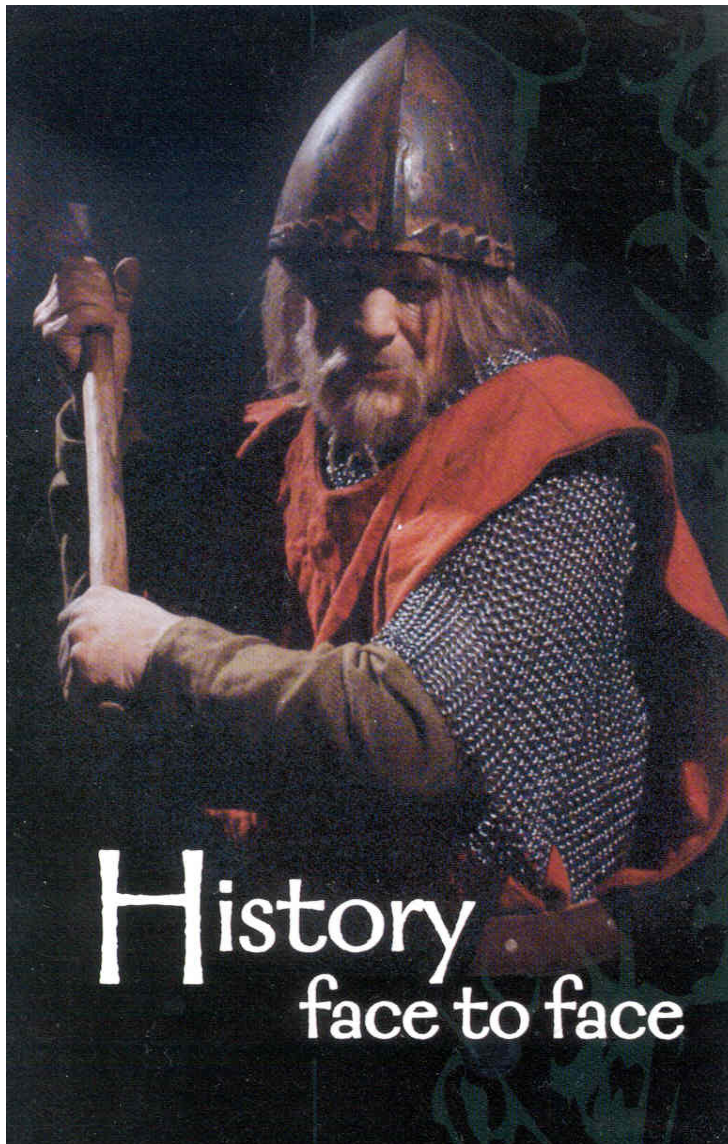
16:40-17:00 Take home message. Closing remarks. Course evaluation formula. - Ragnar Jónsson/Peter Försth

Anatomy of the spine: “Keys or the cutters”!

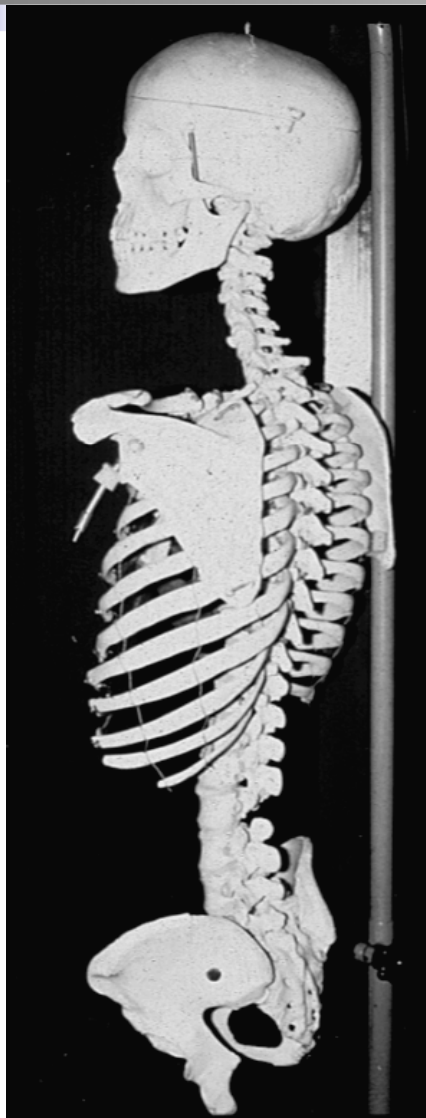


JPHjr

My aim is to teach you:



3 main functions: Support, Movement and



Occipito-Cervical region

**Cervical
LORDOSIS**

Cervico-Thoracal region

**Thoracal
KYPHOSIS**

Thoraco-Lumbar region

**Lumbar
LORDOSIS**

Lumbo-Sacral region

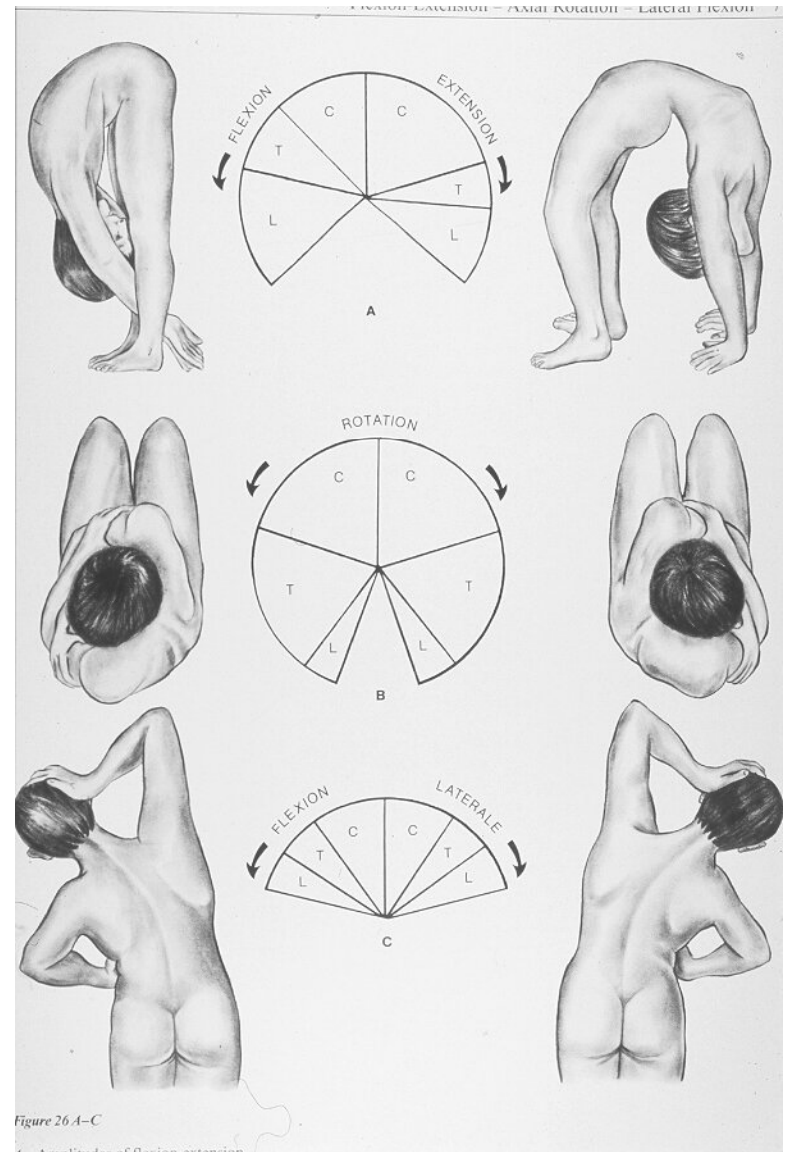
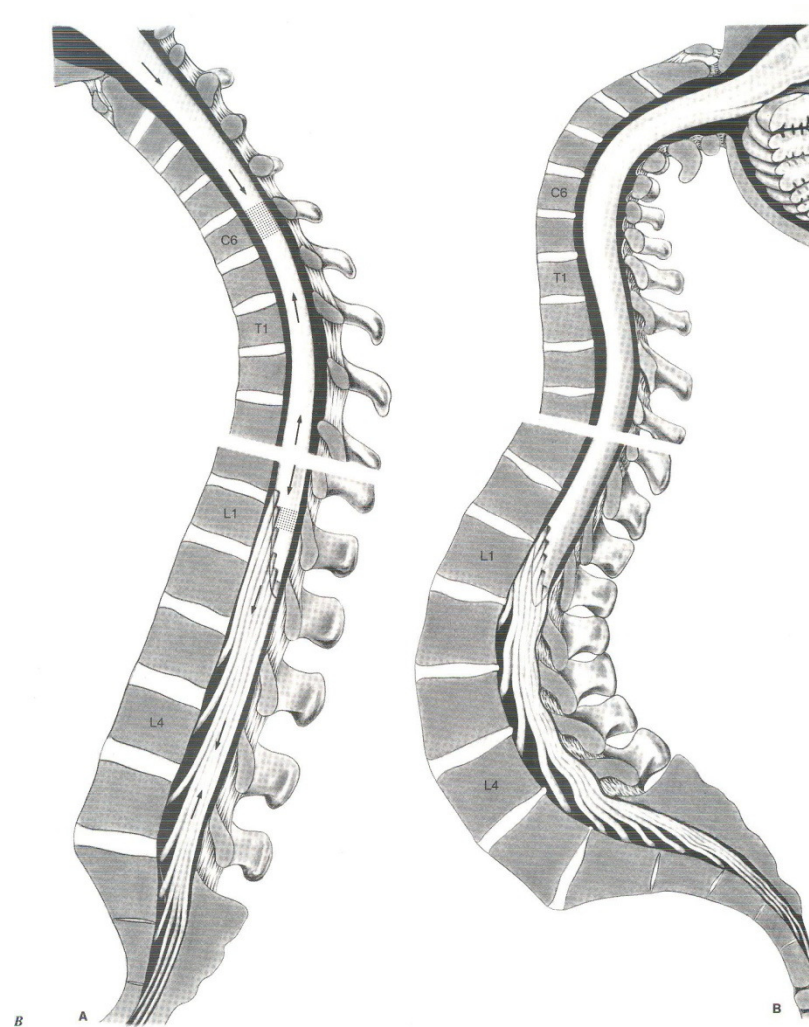


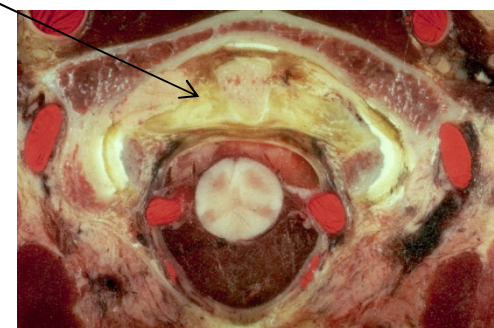
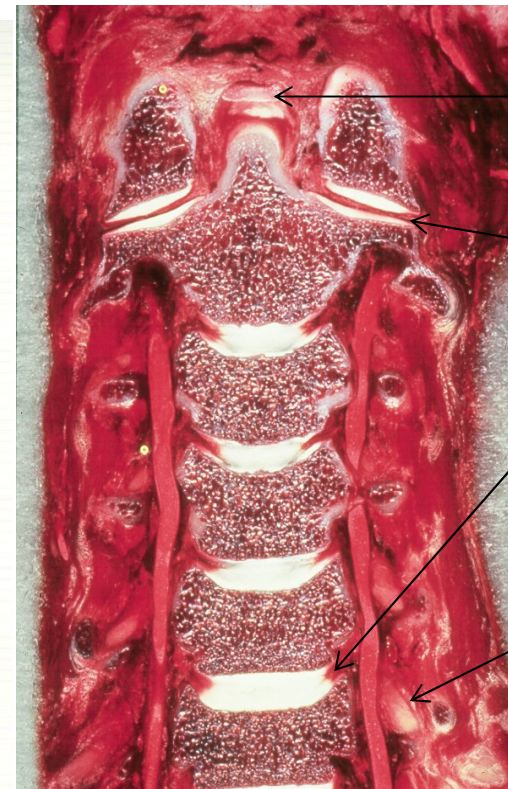
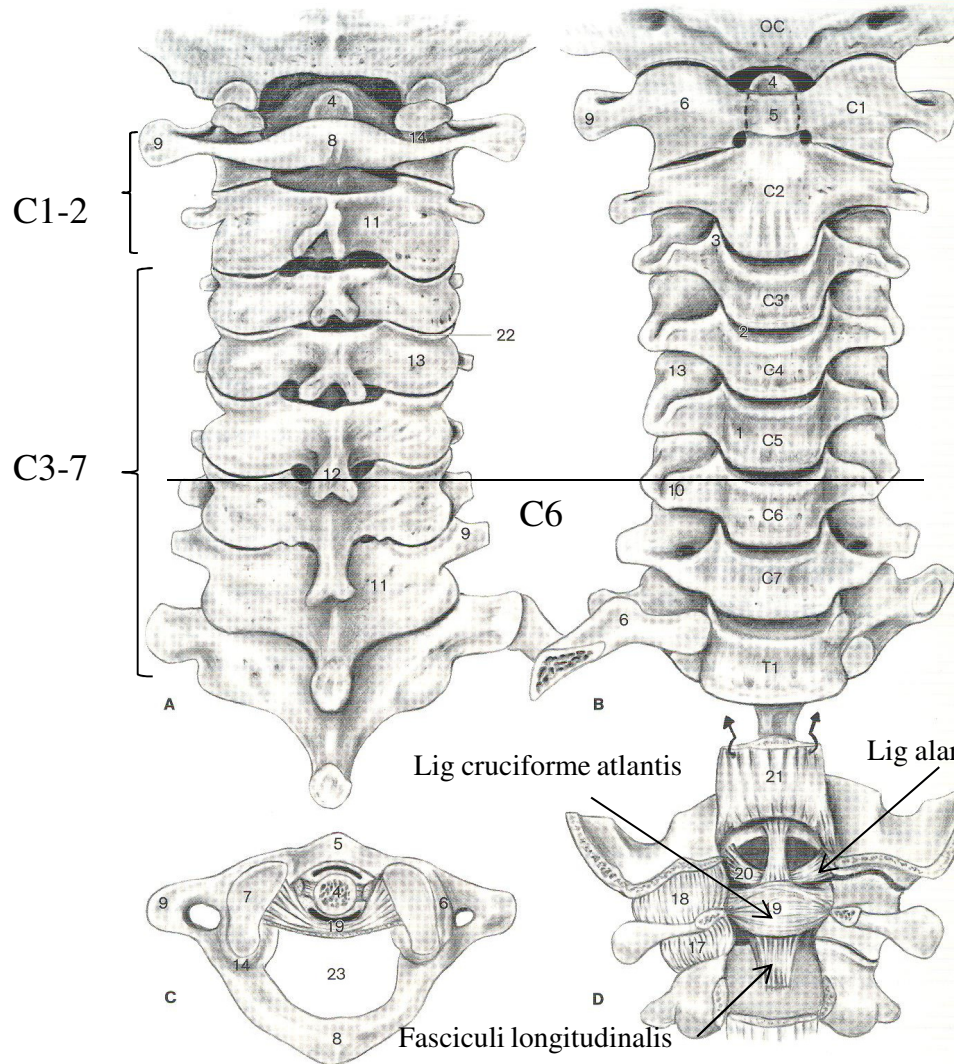
Figure 26 A-C

4 Amplitudes of flexion-extension

3 main functions: ... Protection of neural structures



Anatomy of the Upper (C1-2) and lower (C3-7) cervical spine



Lig transversum
(7mm vs 3-5mm)

A.A. joint

Uncovertebral joint

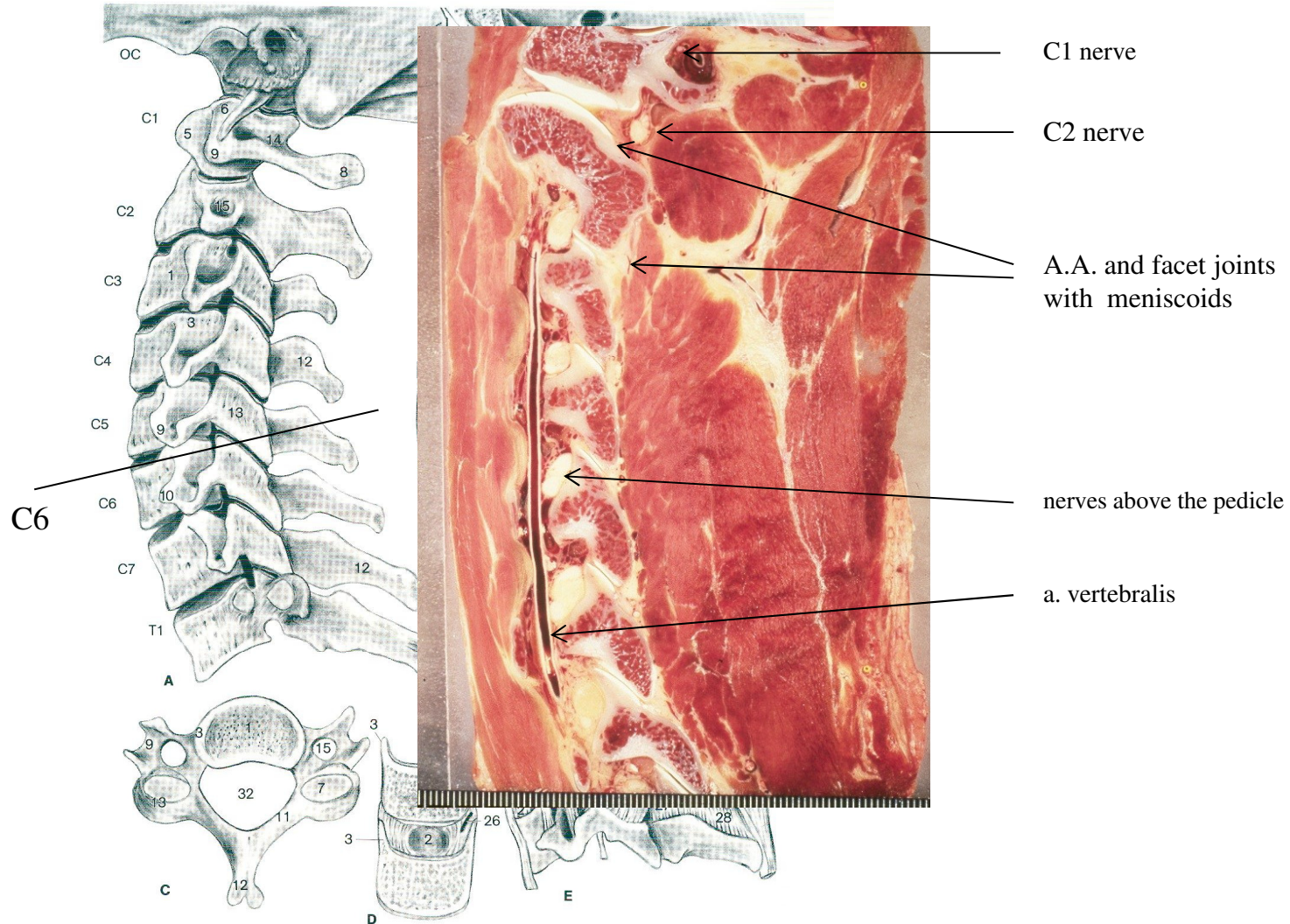
Nerves behind and lateral to A.

Lig cruciforme atlantis

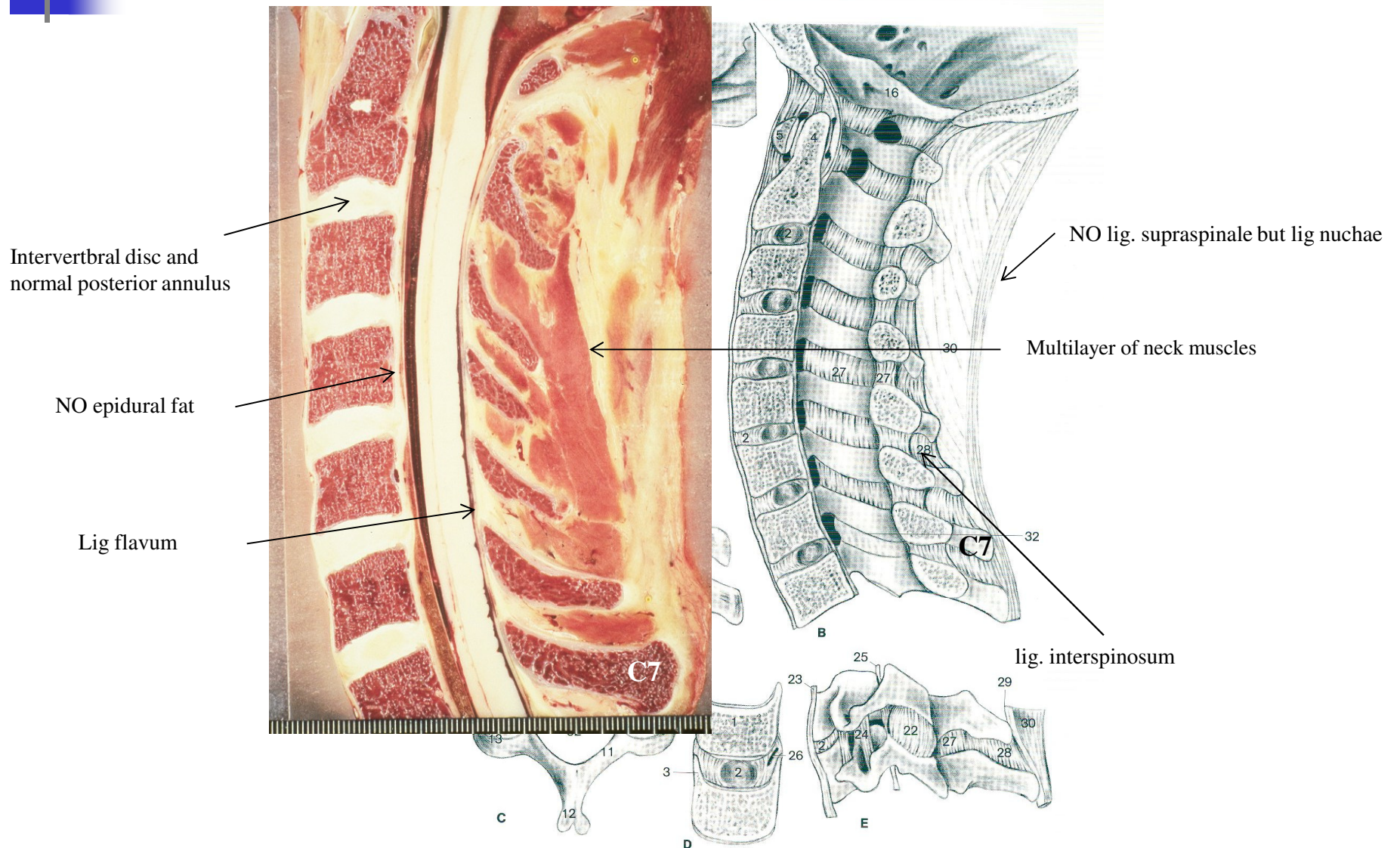
Lig alaria

Fasciculi longitudinalis

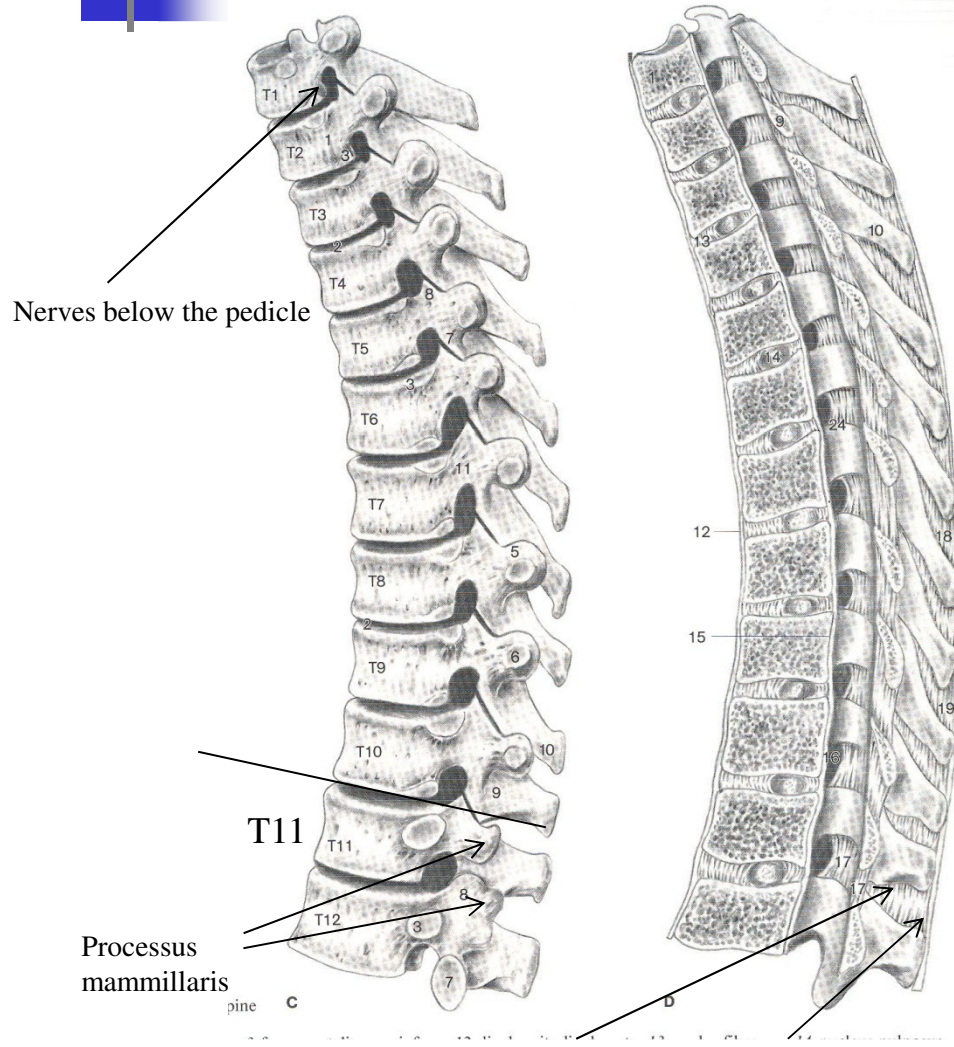
Anatomy of the Upper and lower cervical spine



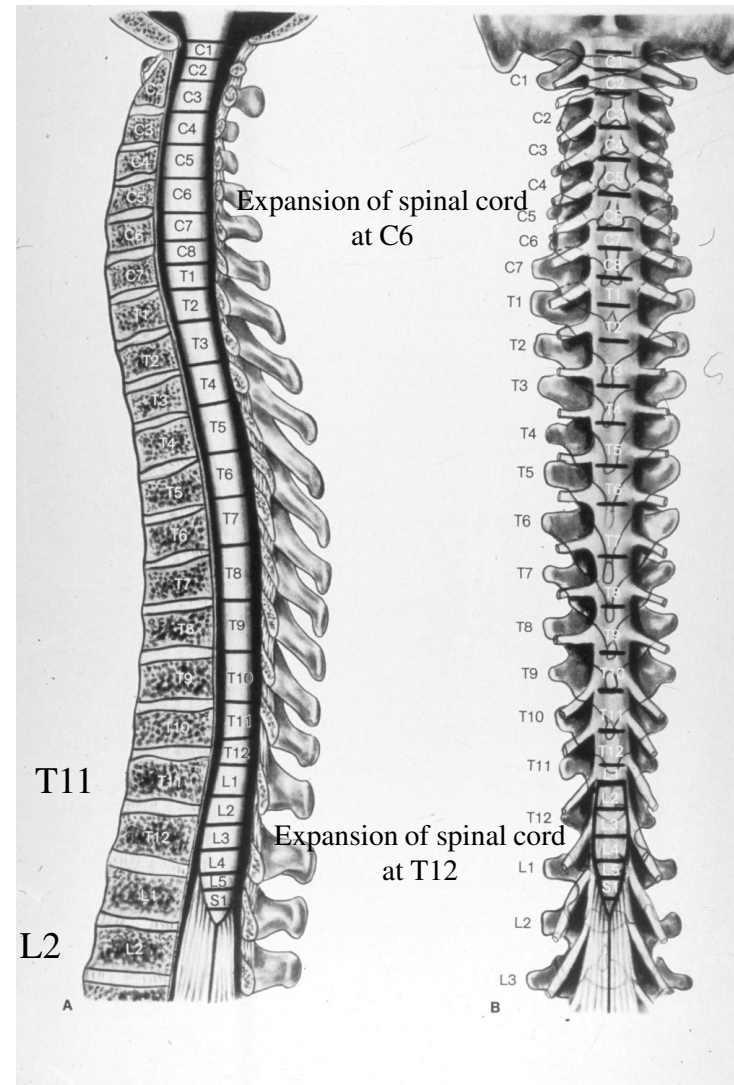
Anatomy of the Lower cervical spine



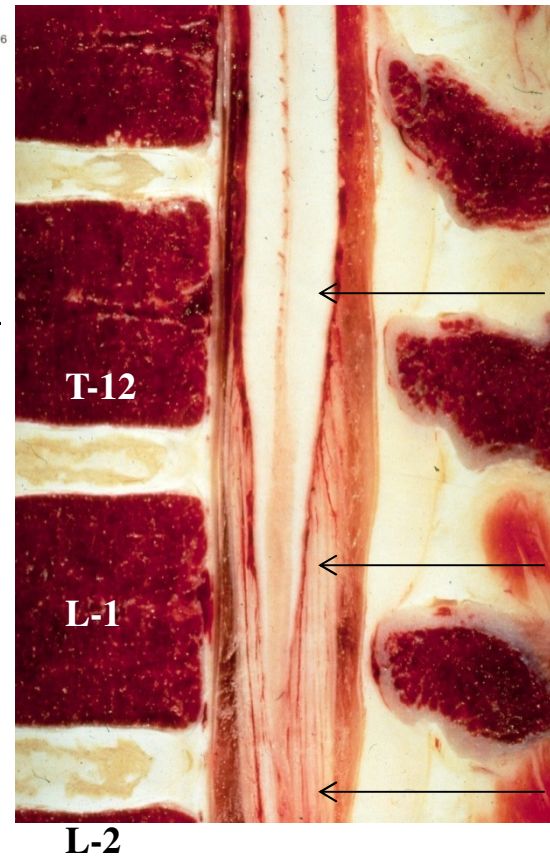
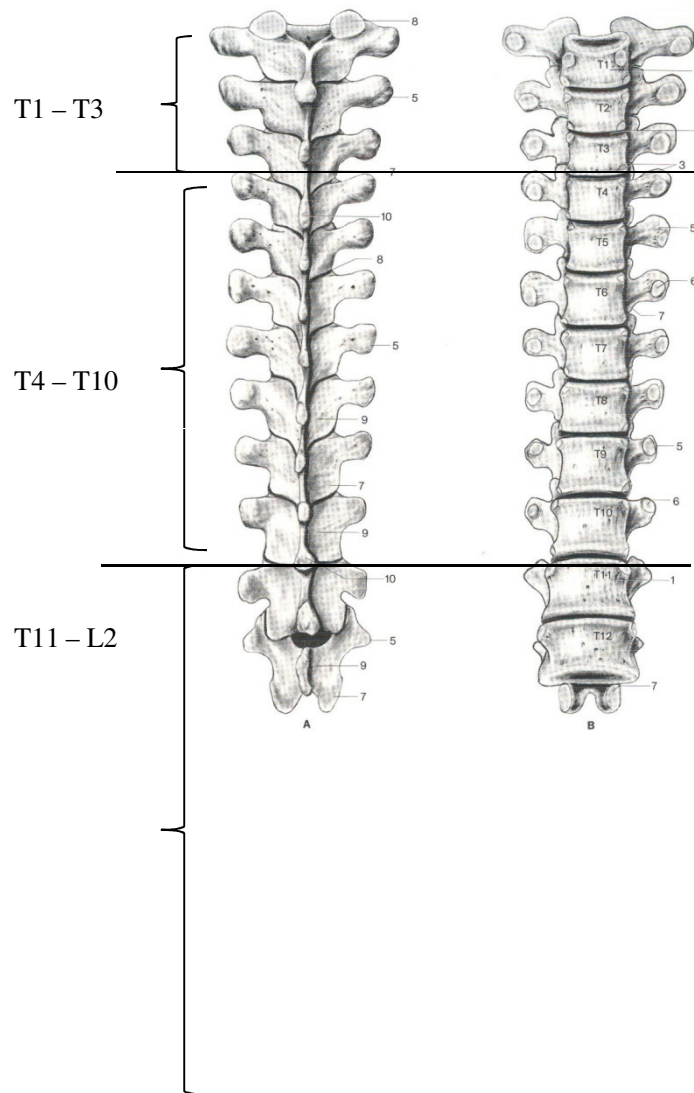
Anatomy of the Thoracic and thoraco-lumbar (T-L) spine



lig. interspinosum and supraspinale



Anatomy of the Thoracic and thoraco-lumbar (T-L) spine

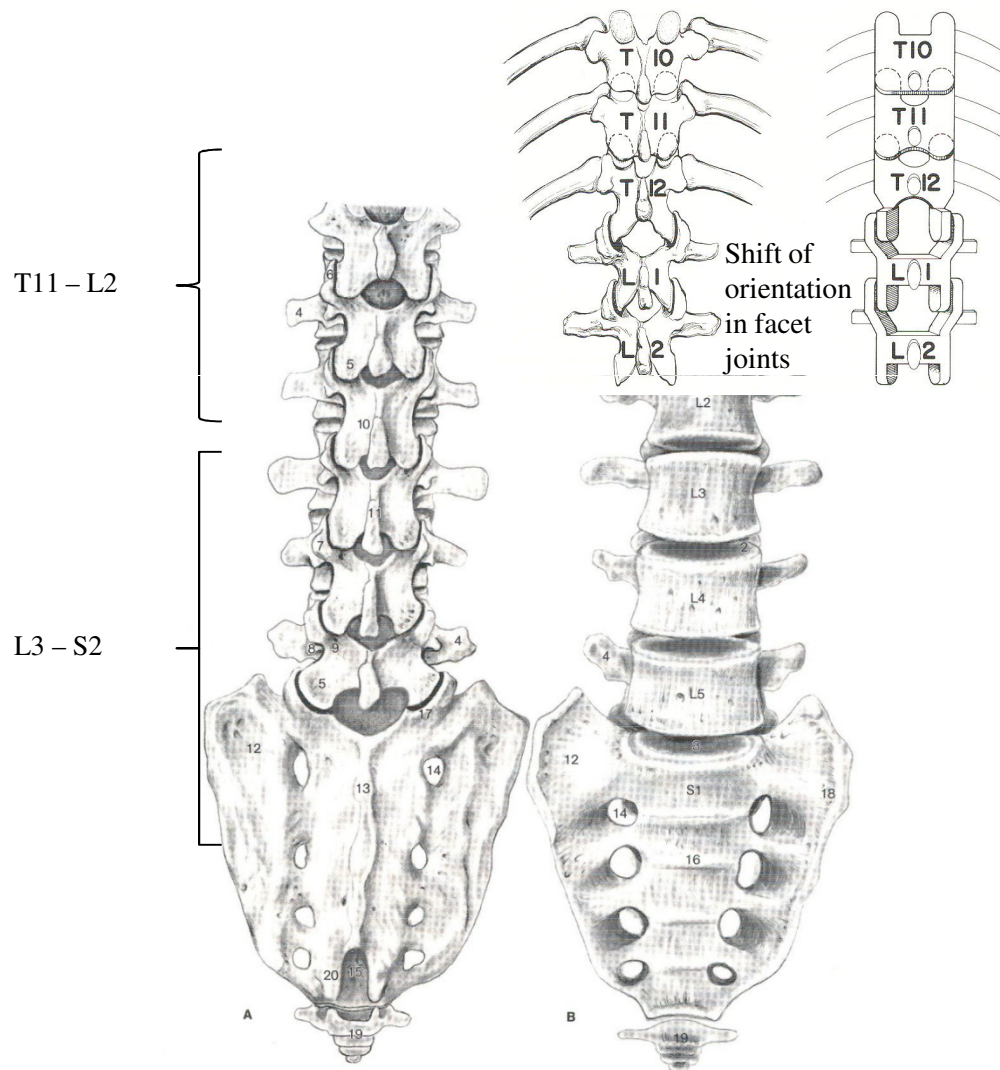


Spinal cord
– central nerves

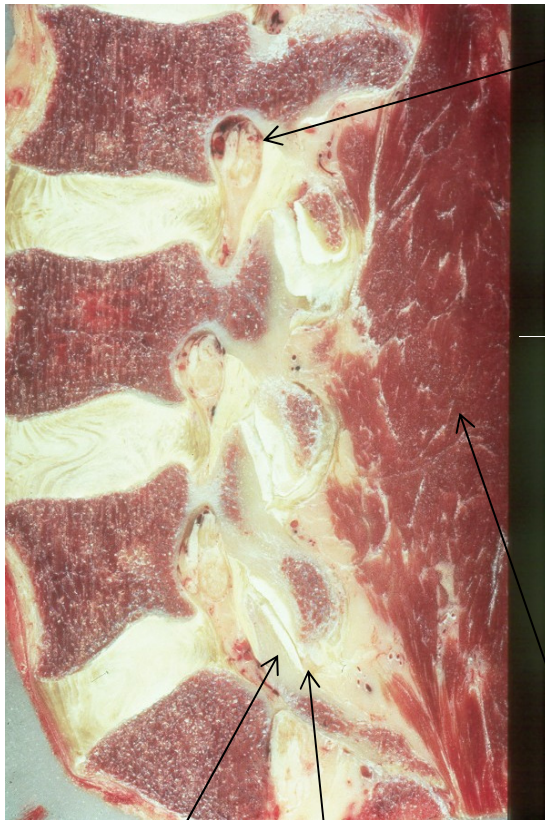
Conus medullaris
– mixed nerves

Lumbo-sacral
– peripheral nerves

Anatomy of the Thoraco-lumbar and lumbo-sacral spine

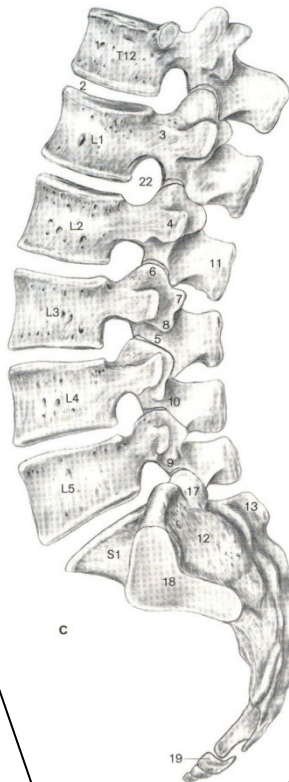


Anatomy of the Lumbar and lumbo-sacral spine



facet joints meniscoids

nerves below the pedicle

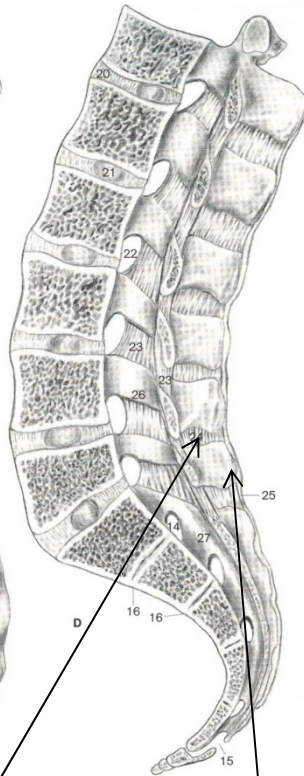


multilayer of back muscles

lig. interspinosum and supraspinale

Cauda equina nerves posterior in thecal sac

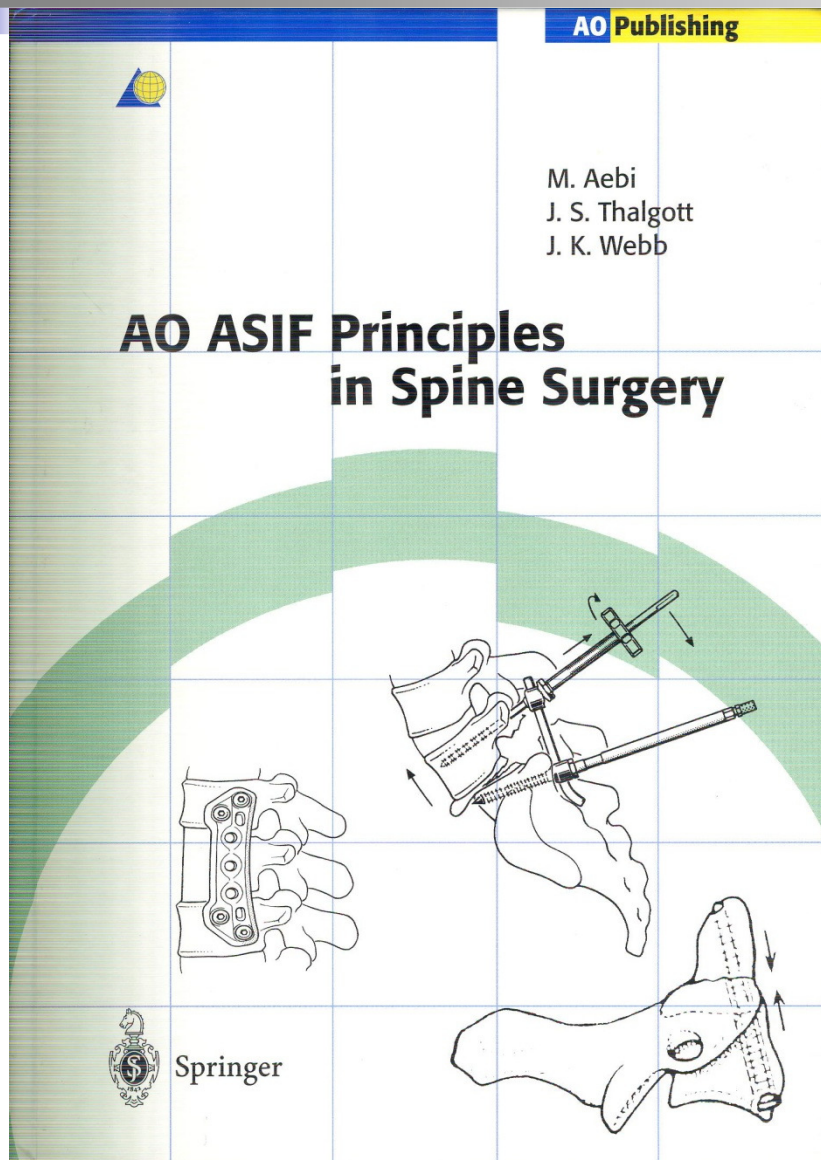
Epidural fat and Batson venous plexus



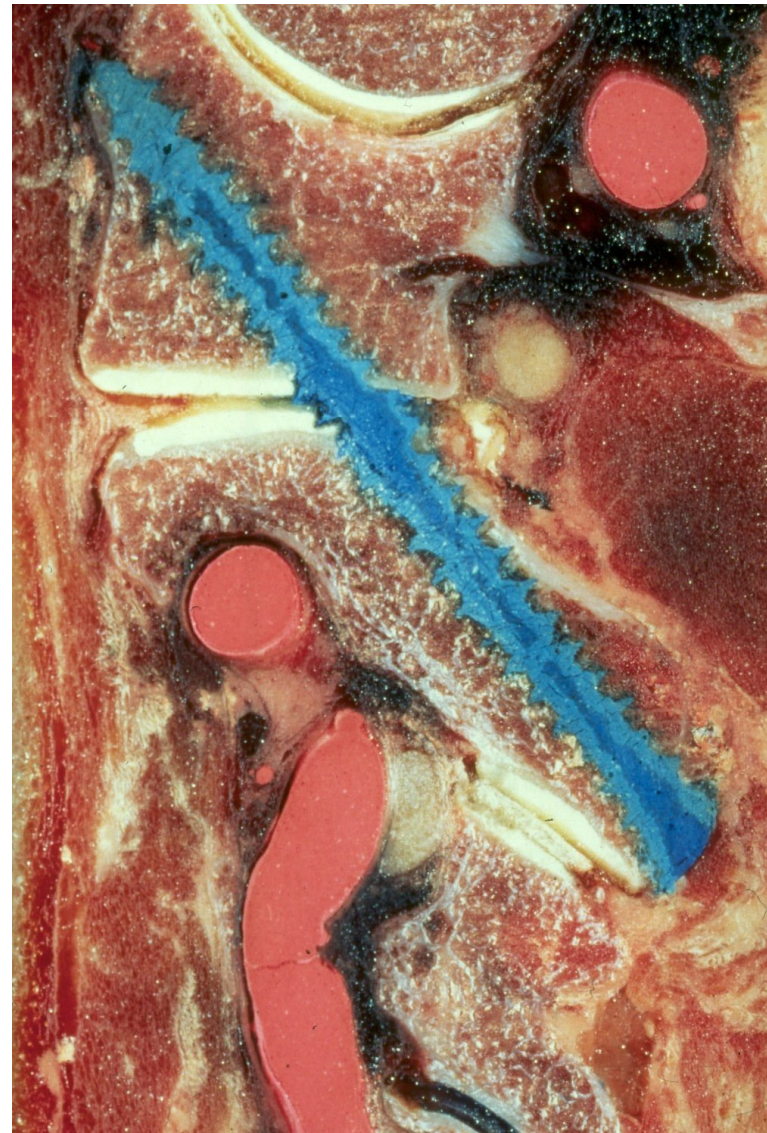
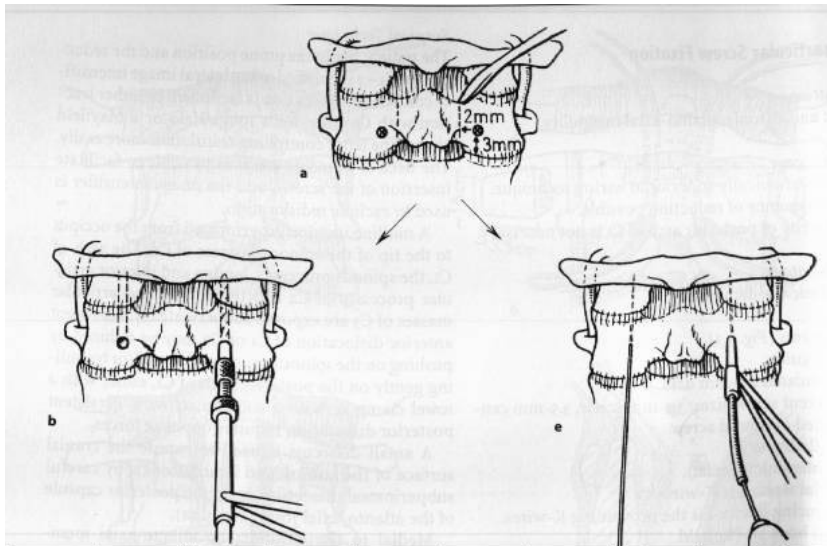
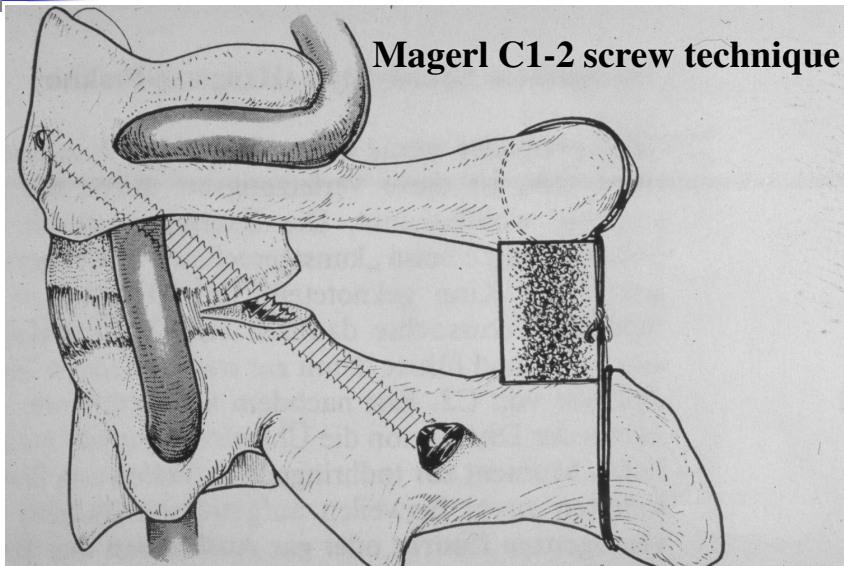
intervertebral disc and normal posterior annulus

lig flavum

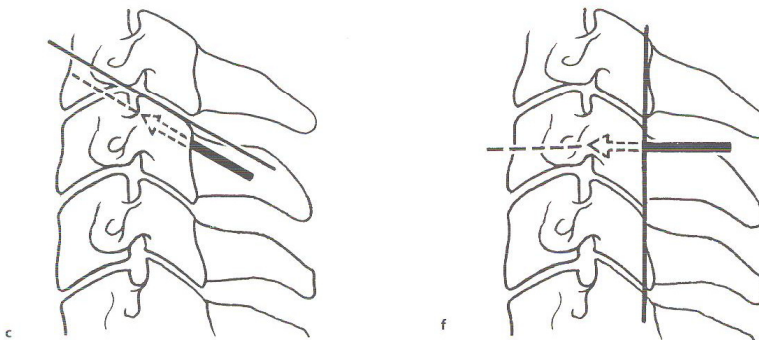
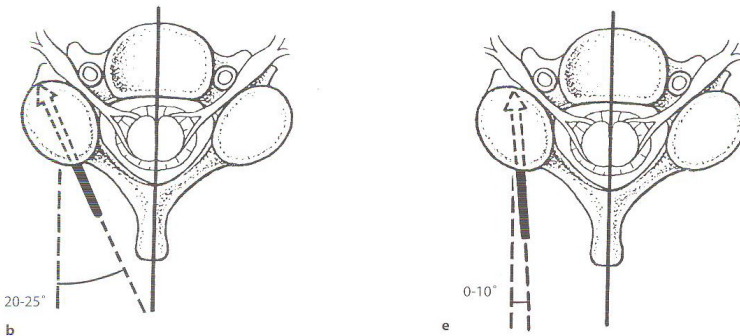
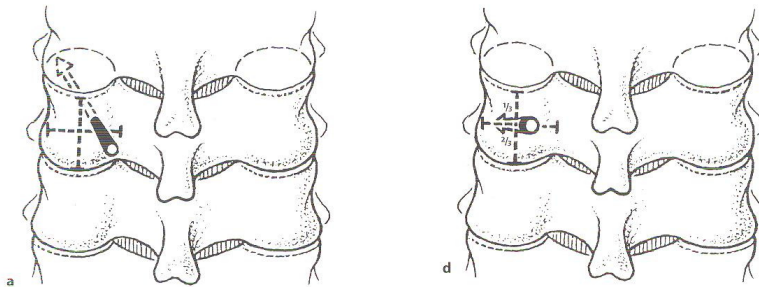
Surgical anatomy of the spine:



Surgical anatomy of the Upper cervical spine – C1-C2



Surgical anatomy of the Lower cervical spine – C3-C7



Magerl

Roy-Camille

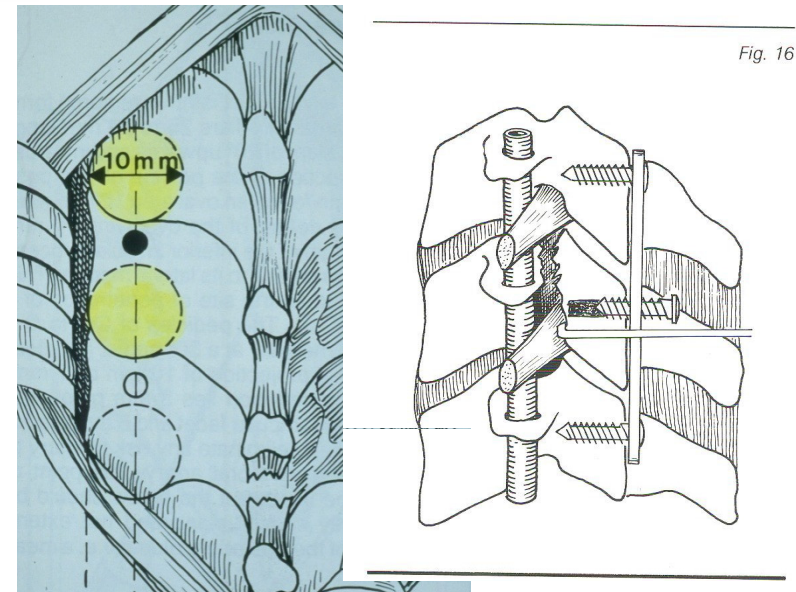


Fig. 16

René Louis



Surgical anatomy of the Lower cervical spine – C3-C7

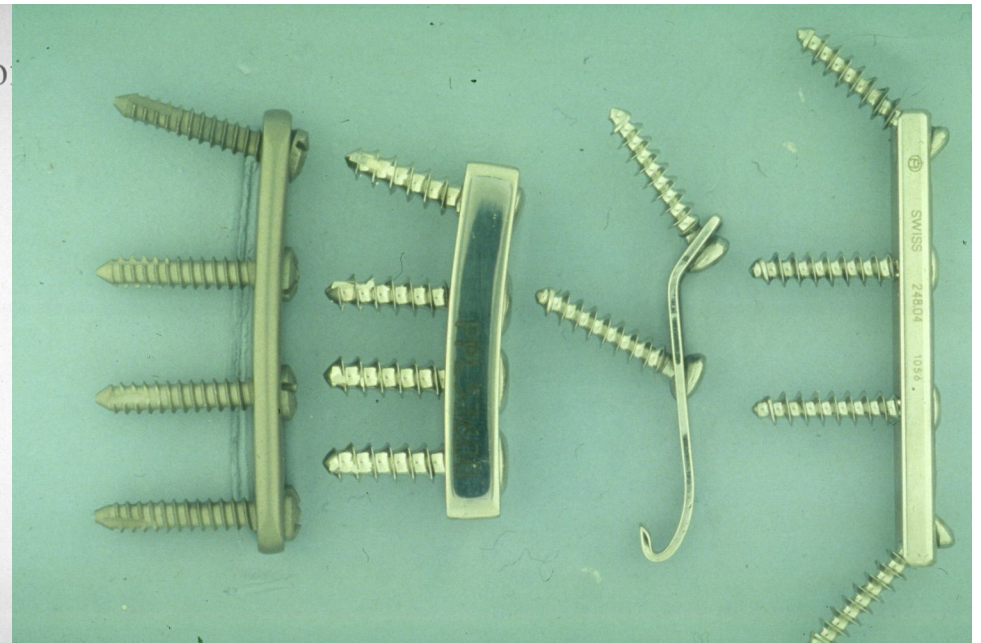
Anatomical and Morphometric Studies in Posterior Cervical Spinal Screw-Plate Systems

Halldór Jónsson, Jr. and Wolfgang Rauschnig

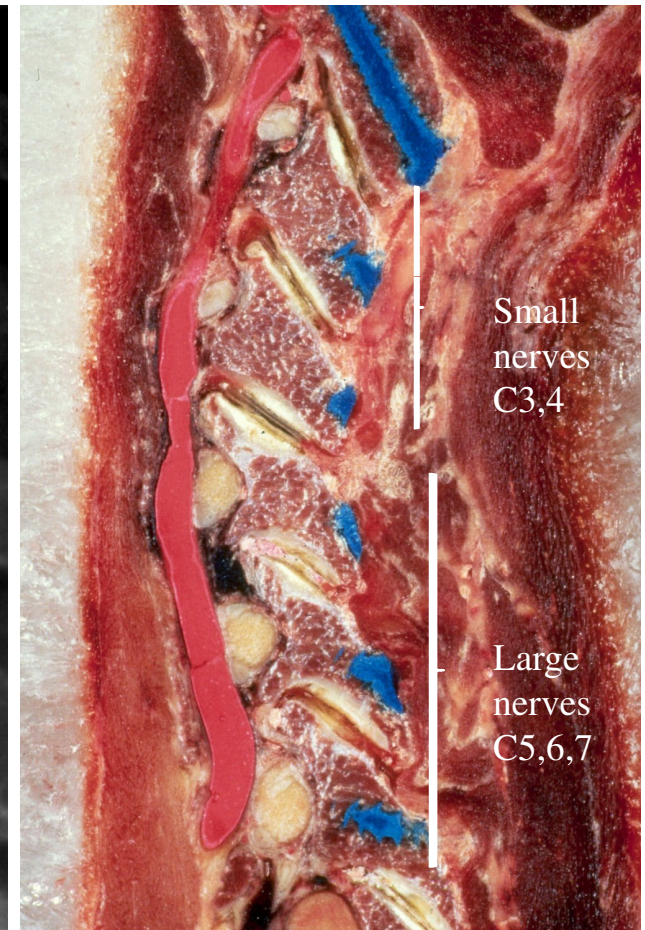
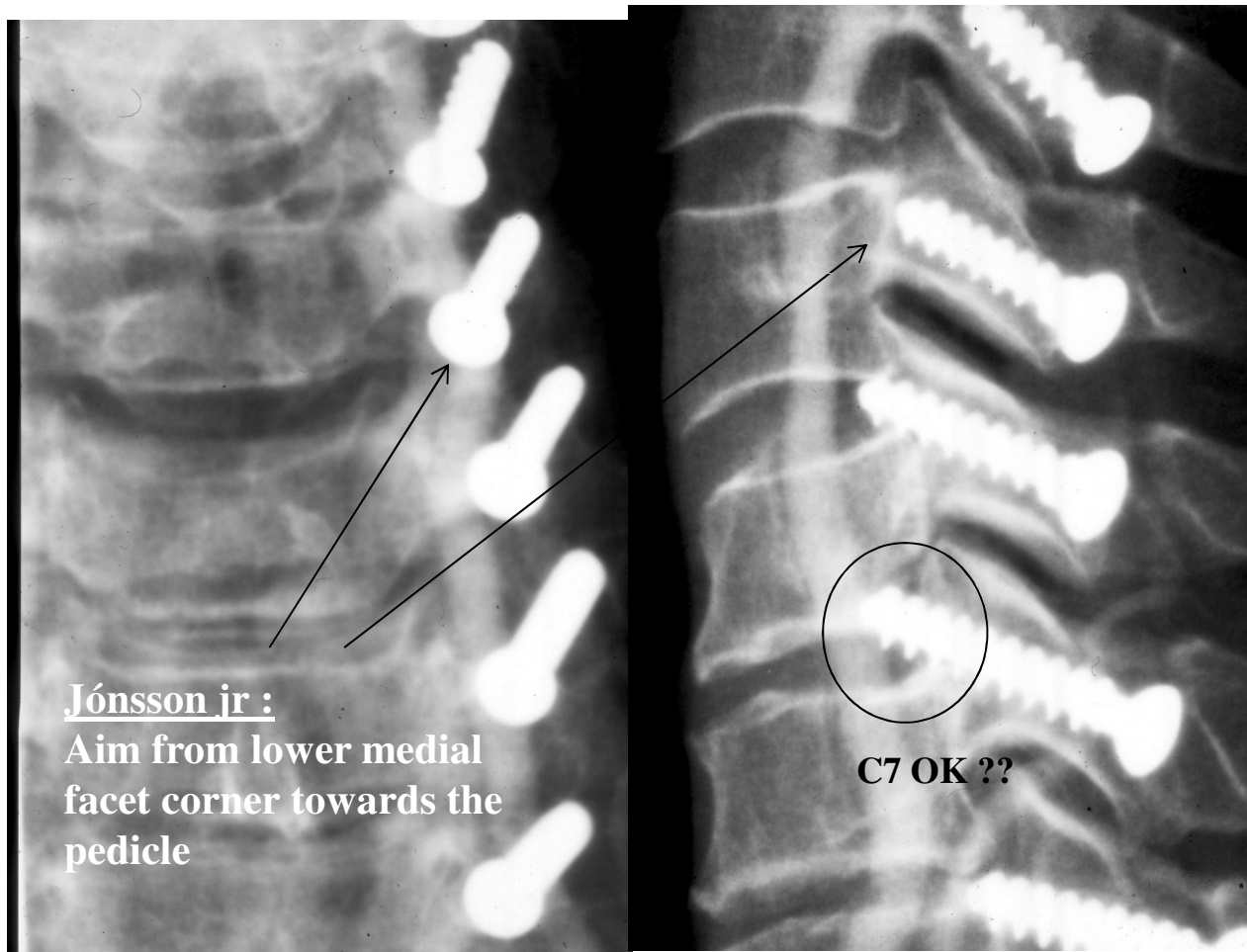
Department of Orthopaedic Surgery, Academic University Hospital, Uppsala, Sweden

Summary: To study potential risks for complications in posterior articular pillar plate fixation, screw-plate systems of Roy-Camille, Louis and Magerl were implanted into the cervical spines of cadavers under authentic operation theater conditions and also in vitro into isolated spine specimens according to the inaugurators' recommendations with regard to plate and screw positioning. We compared these systems with the method of our preference, using the small AO compression plate and monitoring each screw insertion fluoroscopically. The screws were directed towards the projection of the pedicles and their length was measured individually. Radiographic analysis of the specimens and cryoplaning after implant removal and casting of the screw-plate cavities showed significant differences of the four systems with respects to effective screw length, possible and desirable screw trajectories, and risk for injuries of the facet joints, foraminal neurovascular elements and the vertebral artery and mechanical conflict of the plate with adjacent facet joints.

Key Words: cervical spine; articular pillar; articular mass; facet joints; neuroforamen; screw placement; screw-plate fixation



Surgical anatomy of the Lower cervical spine – C3-C7



Surgical anatomy of the Thoracic spine T1-3 and T4-10

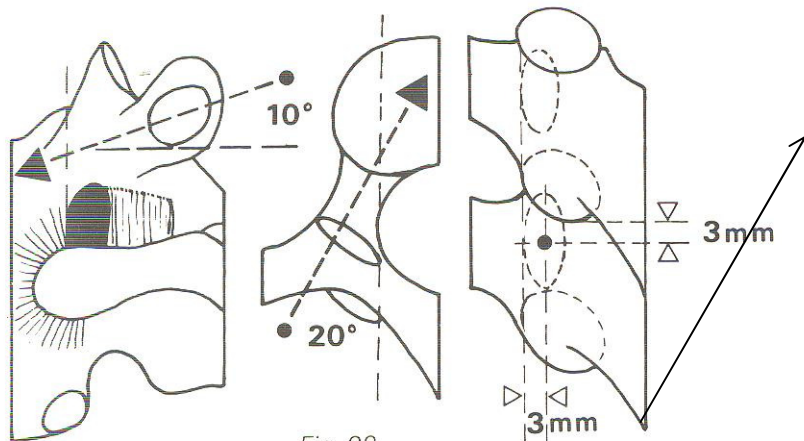


Fig. 28
Pedicles from T 1 to T 3

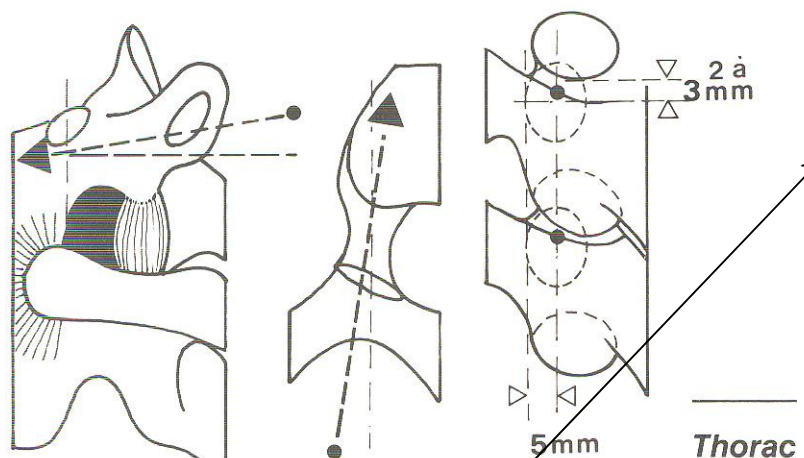
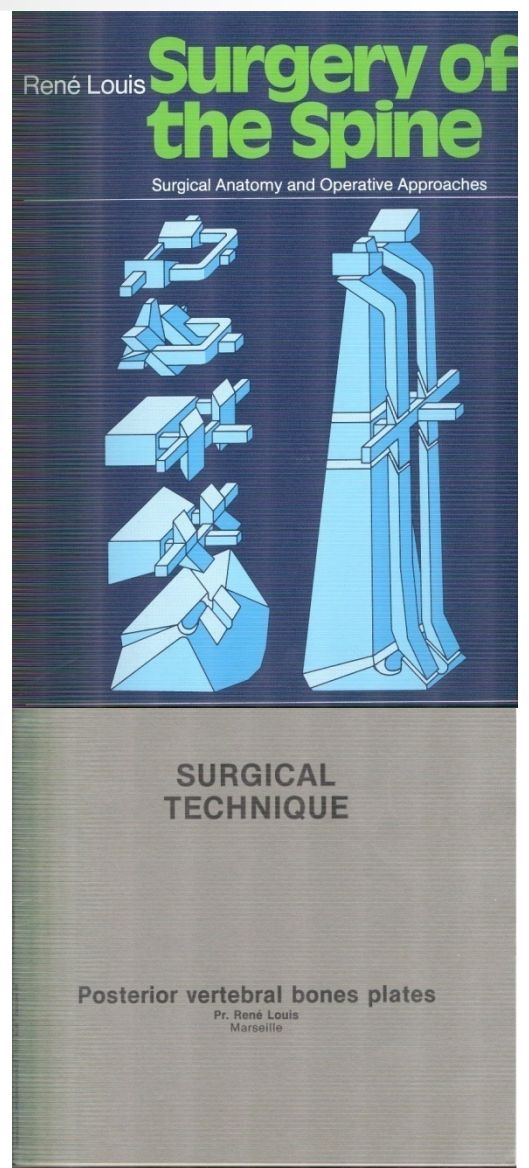
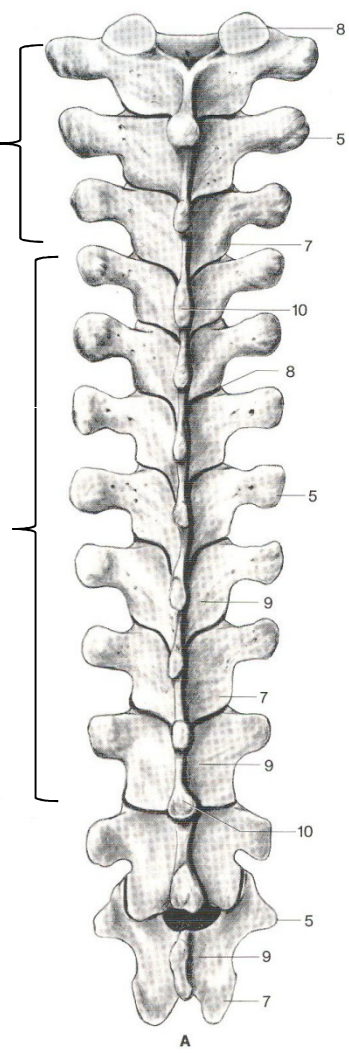


Fig. 29
Pedicles from T 4 to T 10

Thorac
(Fig. 28,)
The upper



Surgical anatomy of the Thoraco-lumbar (T-L) spine – T11-L2

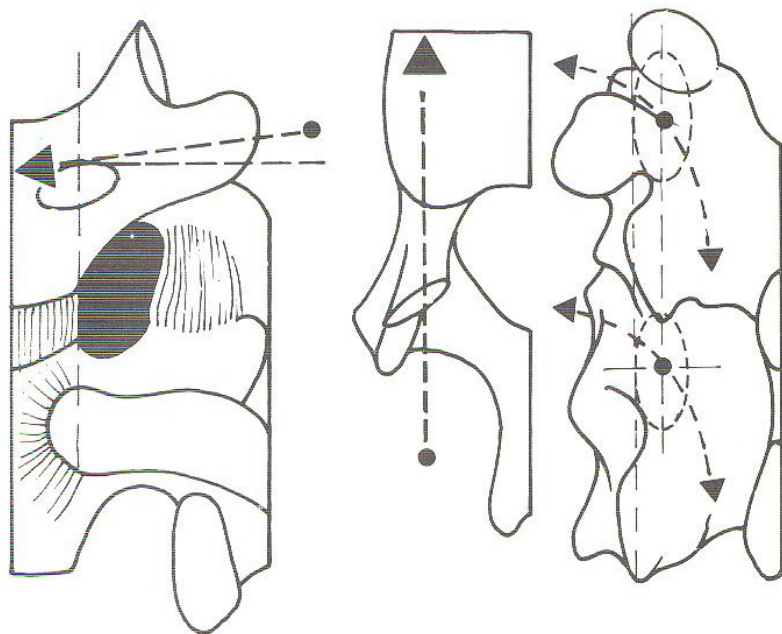
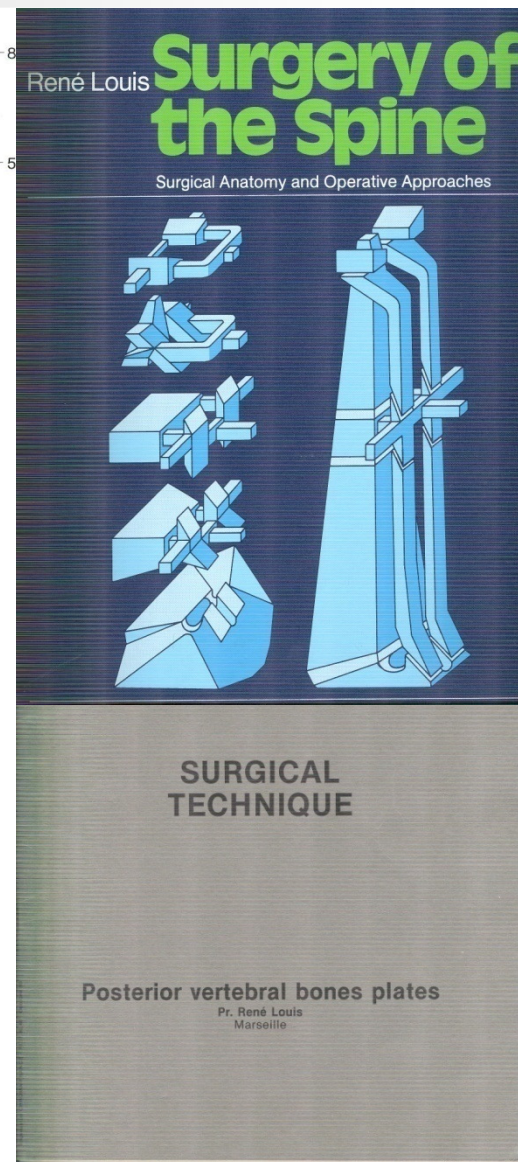
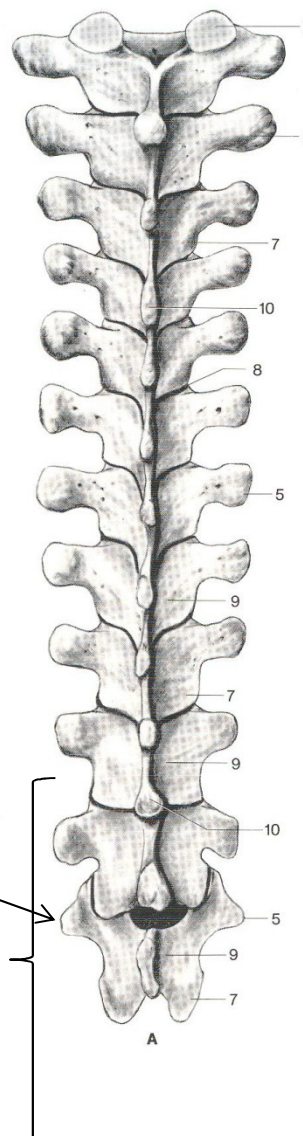


Fig. 30
Pedicles from T 11 to L 2

Proc mamillaris or the lower corner
of the upper facet



Surgical anatomy of the Lumbo-sacral (L-S) spine – L3-S2

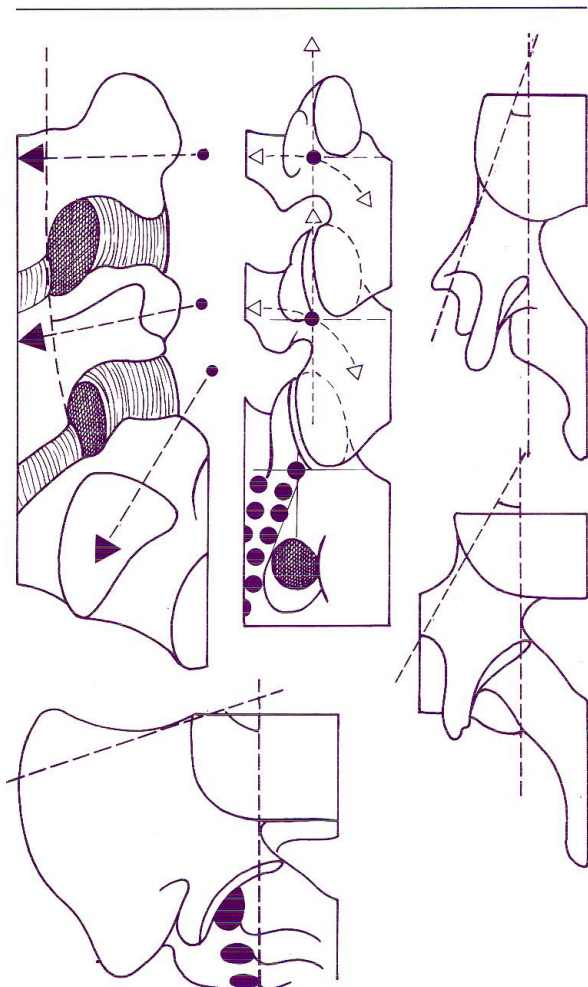
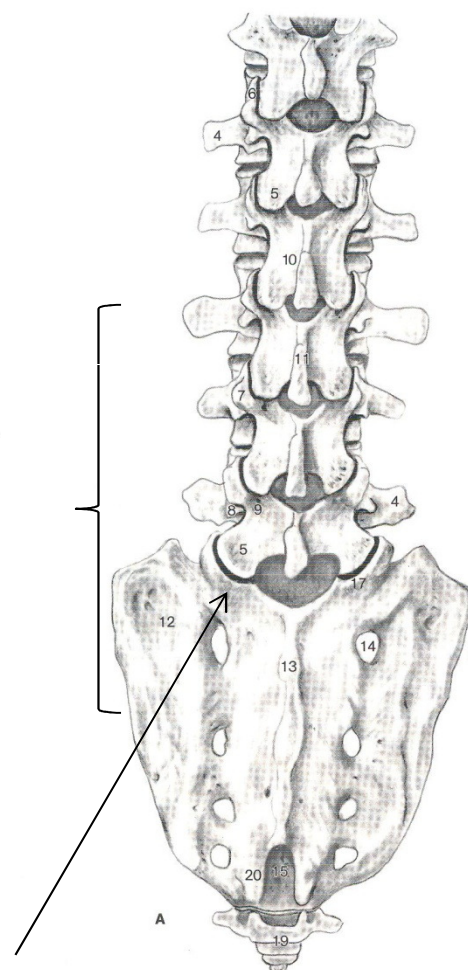
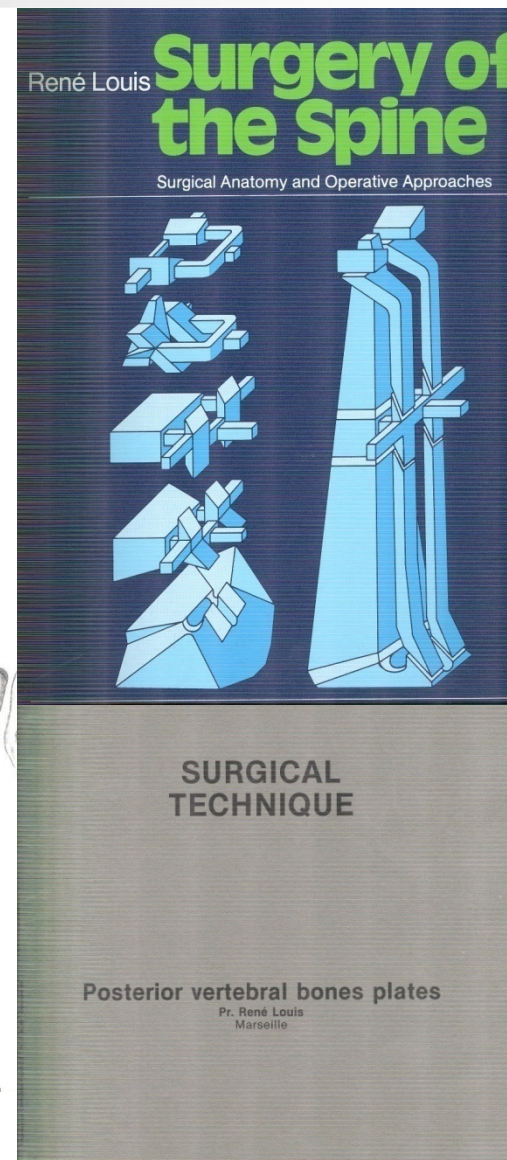


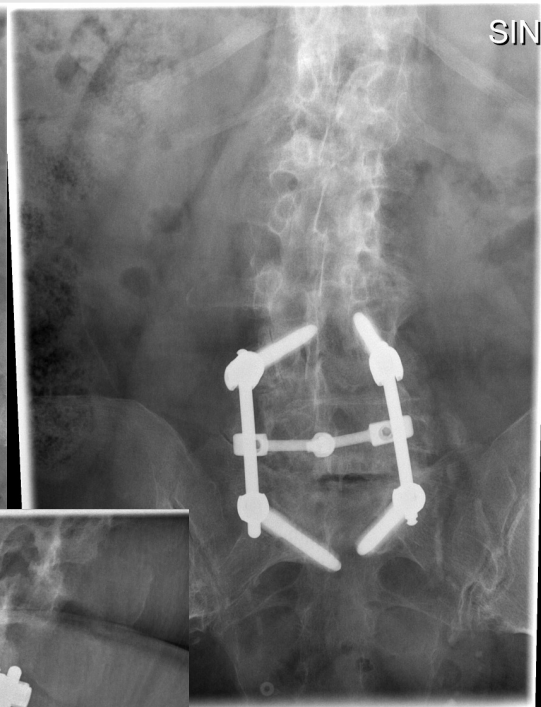
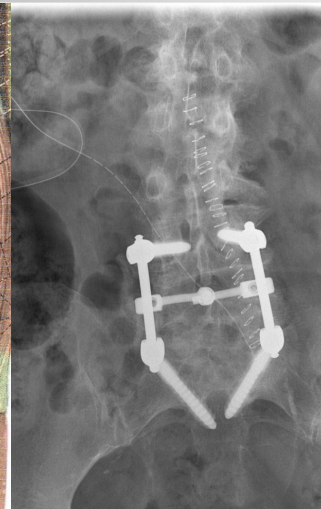
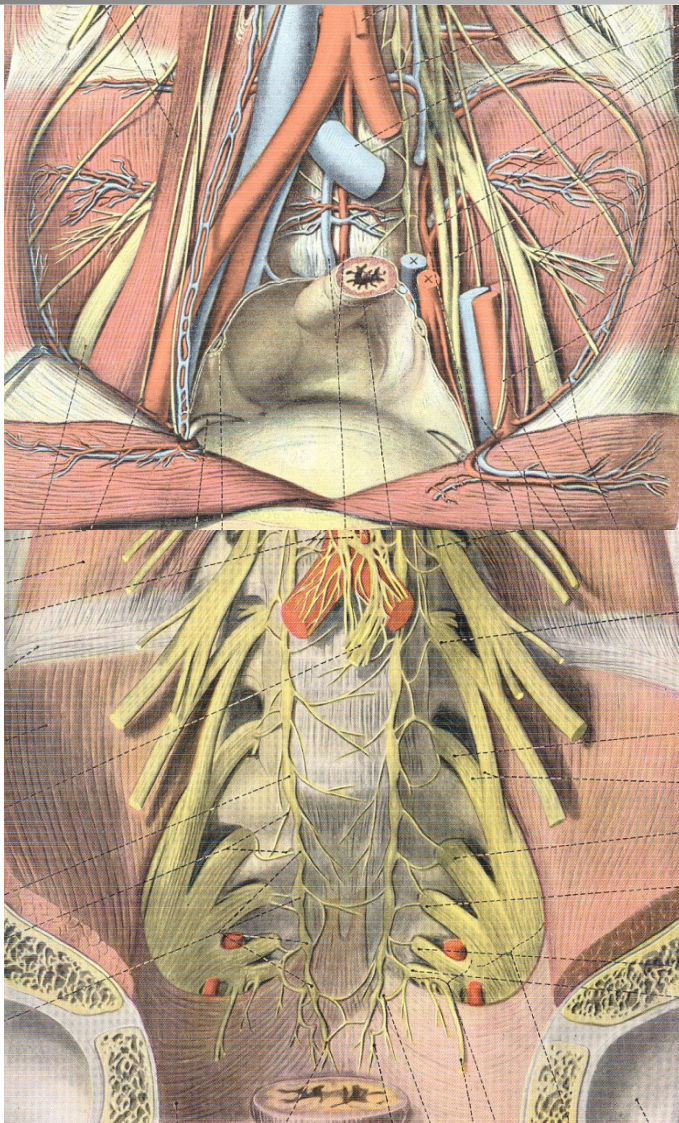
Fig. 31
Lumbosacral pedicles (L3 to S2)



Proc. mamillaris or the lower corner
of the upper facet



Surgical anatomy of the Lumbo-sacral (L-S) spine - L3-S2





THANK YOU!

