



MIDWEST
ORTHOPAEDICS
AT RUSH

PRESERVING YOUR CERVICAL SPINE HEALTH

A guide to cervical disc degeneration and replacement



Just a pain in the neck...or something more?

Stiffness or pain in the neck is exceedingly common. It can be the result of stress, spending too much time staring down at our smartphones, or simply sleeping awkwardly the night before. But for many, its underlying cause is cervical (neck) disc degeneration, a naturally occurring condition that affects people of all ages, from all walks of life. And if left untreated, it can lead to chronic symptoms that can seriously diminish quality of life.

This guide provides a brief introduction to cervical disc degeneration and offers a potential solution. Learn more about the warning signs and risk factors associated with disc degeneration and the treatment options available to today's patients. And if you haven't already, be sure to see an orthopedic provider to diagnose your unique condition.

WHAT IS CERVICAL DISC DEGENERATION?

Gradual wear and tear of the discs of the cervical spine is a normal part of aging. Composed mostly of water, these discs naturally become less hydrated over time, making them weaker with less soft tissue cushioning. This is called “cervical disc degeneration,” and the condition can be accelerated by smoking, genetic factors, spine injuries, or even recreational/occupational activities. While it may manifest in obvious ways, such as mild pain in the neck, cervical degenerative disc disease can also produce symptoms elsewhere in the body.



Could my pain be a symptom of cervical disc degeneration?

A common warning sign is pain in one arm and hand. It often starts as a tingling sensation, then as a weakness or numbness that can make performing simple tasks difficult. Many people have trouble sleeping and wake up several times per night. This pain and loss of function are the result of the cervical disc putting pressure on the nerves connected to the arm and hand. If pain persists or intensifies, it's likely due to conditions related to cervical degenerative disc disease like spinal stenosis (a narrowing of the spine) or a herniated disc.

Thankfully, these conditions are treatable, often through non-operative means like physical therapy, or simply with rest. A good orthopedic provider can diagnose the issue and provide options for early intervention. And if you're still feeling pain and discomfort, there's an innovative treatment option that more and more patients are choosing to achieve long-lasting relief. Cervical Disc Replacement is the best choice for those suffering from the debilitating effects of cervical disc degeneration. It's a potentially life-changing procedure that offers all the relief of more traditional treatments, without the tradeoffs.

What is Cervical Disc Replacement?

Cervical Disc Replacement (CDR) is a minimally invasive, motion-preserving procedure for people suffering from pain or weakness in the arm and/or neck due to cervical disc degeneration. The damaged disc causing pressure on the nerve roots and spinal canal cord is removed. Then, a small, customized implant made of titanium and sophisticated plastic replaces the disc in the cervical spine alleviating pain and restoring strength while preserving full range of motion in the neck.

Cervical Disk Replacement is a less invasive procedure than Anterior Cervical Discectomy and Fusion (ACDF) and, according to comparative studies, typically results in faster recovery and more complete function.¹ It's the most innovative treatment available, and there's now over 10 years of data from real patients who have had successful outcomes and achieved lasting relief from pain.

BENEFITS OF CDR

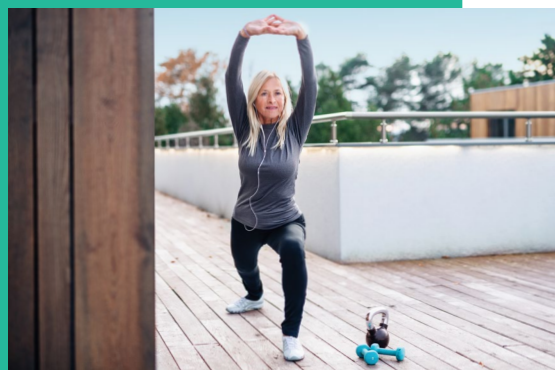
MINIMALLY INVASIVE

OUTPATIENT PROCEDURE

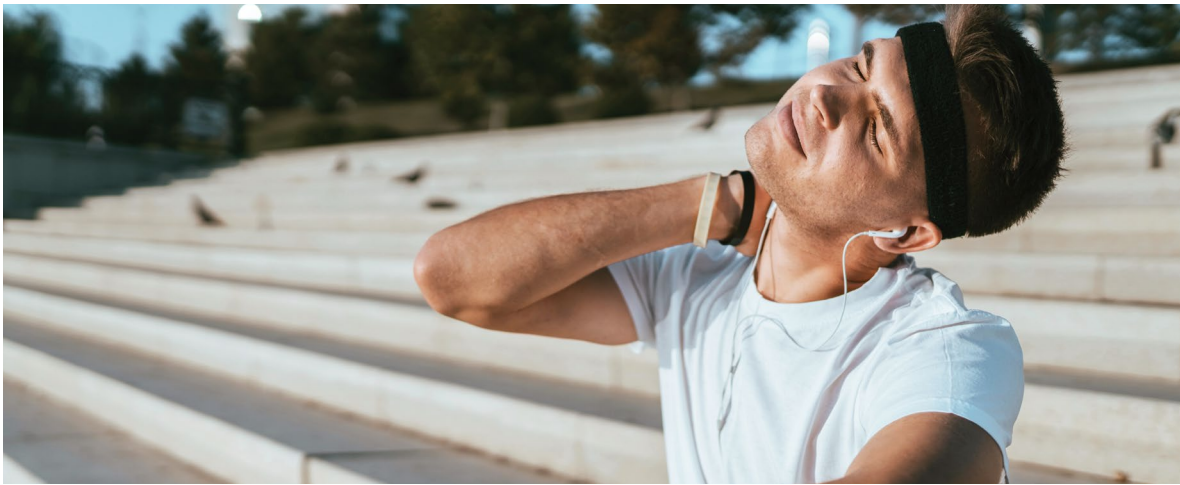
FAST RECOVERY

MOTION PRESERVING

PIONEERED AT MOR



1. Jacob KC, Patel MR, Parsons AW, Prabhu MC, Ribot MA, Pawlowski H, Vanjani NN, Singh K. Level-Specific Perioperative and Clinical Outcome Comparison: Cervical Disc Replacement versus Anterior Cervical Discectomy and Fusion at C5-C6 in Patients with Myeloradiculopathy. J Am Acad Orthop Surg. April 28, 2022



Am I a good candidate for CDR?

Patients suffering from pain due to disc herniation or spinal stenosis are the primary candidates for CDR. Ideal candidates will have already tried non-operative treatments — like medications, activity modification, physical therapy, chiropractic care, or epidural injections — with unsuccessful results. The minimally invasive nature of the procedure, as well as the wide range of implants available to fit various types of spinal conditions, make CDR the preferred treatment option for anyone who wants to maintain an active lifestyle.

CDR vs Fusion: What's the difference?

Anterior Cervical Discectomy and Fusion (ACDF) is the other primary treatment option for the chronic neck and arm pain caused by disc herniation or degeneration. The ACDF procedure involves removing the damaged disc and inserting a bone graft to create a spinal fusion. The graft is then fixed in place between the vertebrae using metal plates and screws. Although patients typically experience successful long-term outcomes for their neck and arm pain, ACDF can significantly reduce range of motion due to the plate and screws.

CDR, alternatively, is less invasive, more customizable to each individual patient, and requires no metal plate or screws. Through a small incision, the surgeon replaces the damaged disc with an artificial disc implant. Once inserted, this device made of titanium endplates and advanced plastics stimulates the patient's native disc, allowing the head and neck to freely turn and bend forward, backward, and side to side.

In studies comparing ACDF and CDR results, **CDR patients spent significantly less time in surgery, experienced less pain after the procedure, required shorter postoperative stays, and reported lower rates of revision surgery.**¹ This procedure is the surest, fastest way back to an active, pain-free life with full range of motion.

1. Jacob KC, Patel MR, Parsons AW, Prabhu MC, Ribot MA, Pawlowski, H, Vanjani NN, Singh K. Level-Specific Perioperative and Clinical Outcome Comparison: Cervical Disc Replacement versus Anterior Cervical Discectomy and Fusion at C5-C6 in Patients with Myeloradiculopathy. J Am Acad Orthop Surg. April 28, 2022



Why choose Midwest Orthopaedics at Rush for CDR?

The spine, back, and neck surgeons at Midwest Orthopaedics at Rush (MOR) have been instrumental in developing the pioneering techniques and technologies for Cervical Disc Replacement. Many of our specialists were intimately involved in the clinical trials that led to the FDA approval of the implant device, and our research continues year after year as the technology evolves. This deep familiarity and a decade of experience with the procedure enable MOR surgeons to confidently diagnose each patient's condition and select the CDR implant ideally suited to their unique spinal anatomy.

With the right implant and the best surgical techniques, you can expect the best outcome. And thanks to MOR's advancements in patient recovery, you can also expect a streamlined experience that's minimally disruptive to your life. In fact, most of our CDR procedures are performed in an outpatient setting, meaning you can return home hours after surgery, with minimal pain. In our clinical research and our everyday patient population, the success stories have been nothing short of remarkable.

"I now have incredible relief. Almost immediately, my arm was fully functioning, and I didn't wake up every 30-45 minutes at night anymore. The best part is, I have no discomfort at work, and I can play ball with all my grandchildren."

Bob Leja, CDR patient at MOR

TO BE YOUR BEST, SEE THE BEST.

Want to learn more about CDR?

If you've already been diagnosed with cervical disc degeneration, schedule a consultation today with a spine specialist at MOR to learn more about this life-changing procedure. Visit RushOrtho.com/CDR

Ready to talk to an expert about your pain?

If you're experiencing symptoms and want a professional opinion, take the first step and see an expert at MOR. Early intervention is always better, so don't wait. Visit RushOrtho.com/Neck



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