Move Your Spine



B CON 2023



12-13 November 2023



Pan Pacific Sonargaon Dhaka Bangladesh



**BANGLADESH SPINE SOCIETY** 







12-13 November 2023 Pan Pacific Sonargaon Dhaka, Bangladesh

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08:00am - 09:22am

### PROGRAM AT A GLANCE

DAY - 1 SUNDAY NOVEMBER 12 2023

07:45am - 07:55am Reception 07:55am - 08:00am Inauguration of Scientific Program 08:00am - 09:45am Scientific Session - 1: Lumbar Degenarative 09:45am - 10:15am Tea Break 10:15am - 10:53am Scientific Session - 2 : Cervical Degenerative 10:53am – 11:45am Scientific Session - 3 : Cranio Cervical Junction Scientific Session - 4: Thoracolumbar Trauma 11:45am - 01:15pm 01:20pm – 02:10pm Prayer Break & Lunch Symposium: Osteoporosis & Fragility Fracture 02:10pm – 02:55pm Scientific Session - 5 : Cervical Trauma 02:55pm - 03:35pm Scientific Session - 6: Lessons learn from mistake 03:35pm - 04:25pm Scientific Session - 7: Video Presentation 04:25pm - 04:45pm Tea Break 04:45pm - 06:25pm Invited Guest Lecture Session (Virtual) 07:00pm - 08:05pm Inaugural Ceremony 08:05pm - 10:30pm BSSCON Night & Dinner

DAY - 2 MONDAY NOVEMBER 13 2023 09:22am – 10:02am Scientific Session - 09 : Meet the Masters: The most challenging case that I faced

10:02am – 10:20am Tea Break

10:20am – 11:00am Scientific Session - 10 : Paediatric Spinal Deformity

11:00am – 11:35am Scientific Session - 11 : Adult Spinal Deformity (ASD)

11:35am – 12:20pm Scientific Session - 12 : Tumor Session

12:20pm – 01:20pm Scientific Session - 13 : Tuberculosis & Infection

11:25pm – 02:15pm Prayer Break, Lunch & Meeting: EC of BSS with Foreign Faculies

12:25pm – 03:00pm Scientific Session - 14 : Complication Session

13:30pm – 04:15pm Scientific Session - 16 : Miscellaneous

15:25pm – 05:30pm Annual General Meeting

Scientific Session - 08: MISS Session





## **INAUGURAL CEREMONY**

12 November 2023	
Pan Pacific Sonargaon Dhaka	Rangladesh

	Pan Pacific Sonargaon Dhaka, Bangladesh
07:00 pm – 07:03 pm 07:03 pm – 07:06 pm 07:06 pm – 07:11 pm 07:11 pm – 07:16 pm	<ul> <li>: Reception of the guests</li> <li>: Guests take their seat</li> <li>: Recitation from Holy Quran and Holy Geeta</li> <li>: Welcome address</li> </ul>
оттории	Prof. Dr. Md. Zahidur Rahman Chairman, Organizing Committee, BSSCON 2023
07:16 pm – 07:21 pm	: Address by Chairman, Reception Committee Prof. Dr. Kh. Abdul Awal Rizvi Chairman, Reception Committee
07:21 pm - 07:28 pm	: Address by Secretary General Prof. Dr. Md. Anowarul Islam Secretary General, Bangladesh Spine Society
07:28 pm – 07:33 pm	: Address by Special Guest Prof. Dr. Md. Jahangir Alam Secretary General, Bangladesh Orthopaedic Society
07:33 pm – 07:38 pm	: Address by Special Guest Prof. Dr. Kazi Shamim Uzzaman Director National Institute of Traumatology and Orthopaedic Rehabilitation (NITOR)
07:38 pm – 07:43 pm	: Address by Special Guest  Prof. Dr. Mohammad Hossain  Dean, Faculty of Surgery  Bangabandhu Sheikh Mujib Medical University
07:43 pm – 07:48 pm	: Address by Special Guest Prof. Dr. Monaim Hossen President, Bangladesh Orthopaedic Society
07:48 pm – 07:55 pm	: Address by Chief Guest Prof. Dr. Md. Sharfuddin Ahmed Honorable Vice Chancellor Bangabandhu Sheikh Mujib Medical University
07:55 – 08:02 pm	: Address by President Prof. Dr. Md. Shah Alam President, Bangladesh Spine Society
08:02- 08:05 pm	: Vote of Thanks Dr. Md. Shahidul Islam Akon

Secretary, Organizing Committee, BSSCON 2023

: BSSCON Night & Dinner



08:05 pm

More Some Spine







Vice-Chancellor

Bangabandhu Sheikh Mujib Medical University
Shahbag, Dhaka

# Message from the Phief Guest

It gives me immense pleasure and exhilaration to write this message on the issue of this 14th International Spine Conference, BSSCON 2023 organized by Bangladesh Spine Society.

Spine surgery is now a days a time demanding, emerging and dynamic super specialty. Bangladesh Spine Society has been at the forefront of disseminating knowledge about the latest technologies in the field of spine. The Government of Honorable Prime Minister Sheikh Hasina is committed to improvise the medical sector in our country to a global standard to reduce medical tourism and to serve the people with quality treatment up to root level. This conference always fosters information exchange among researchers and practitioners of spine surgery. The participants share a common interest in the theory, practice and application of Spine technologies. I would like to praise publicly, and in a very special manner the healthcare being given by the spine surgeons both senior and younger all over the country.

My heartiest thanks to the distinguished faculties and participants from home and abroad taking part in this glorious occasion.

I hope this congress will be a blissful and fruitful scientific summit. I wish every success of 14th International Spine Conference, BSSCON 2023.

Prof. Dr. Md. Sharfuddin Ahmed









President
Bangladesh Spine Society (BSS)

# Message

I along with my executives of Bangladesh Spine Society express great pleasure to host the 14th International Spine Conference BSSCON 2023. I welcome you all from home and abroad on behalf of BSS. This year we invited about 25 foreign faculties and over 300 local delegates who will enlighten this great scientific assembly. This year, we received over 50 scientific submissions. All the submitted papers were subject to peer review by the Conference Editorial Board, consisting of highly qualified panel of experts. All these precious accumulations of educational feasts and technologically innovative arrangements along with cordial hospitality made this occasion a premier international congress.

There is a huge demand of specialized service for spinal ailments in Bangladesh. But scope and facilities of spine surgeries are still limited. So, improvisation of our training ang skill is time demanding. In this regard I would like to call upon Government agencies, universities and hospitals to come forward.

I am grateful to the world-renowned organizations like APSS, AO Spine and SRS for their continuous support in the development of spine surgery in Bangladesh. Sincere thanks to faculties from home and abroad, participants all the members of Bangladesh Spine Society and Bangladesh Orthopaedic Society for their soulful cooperation to make this great event successful.

I wish every success of BSSCON 2023.

Prof. Dr. Md. Shah Alam









# Message from the Special Guest

I am very much honored & grateful to be a part of this great occasion of 14th International Spine Conference BSSCON 2023. BSS is one of the most dynamic super specialty society working with the issues of Spine in Home & Abroad. Their level of work & professionalism is much high and reaching to a global standard gradually. I appreciate their enthusiasm, dynamism & dedications. Arranging such a great scientific event is much challenging. I congratulate the organizing committee for their hard work to make it very attractive. I hope all the participants of home and abroad will enjoy this conference by sharing their updated knowledge and skill.

I am wishing a grand success of BSSCON-2023 with a memorable ending & learning. May Allah keep us all healthy & happy.

Joy Bangla.

Joy Bangabondhu.

Prof. Dr. Monaim Hossen

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## Dean, Faculty of Surgery Bangabandhu Sheikh Mujib Medical University

# Message from the Special Guest

It's my immense pleasure to know that Bangladesh Spine Society is going to organize 14th International Spine Conference "BSSCON 2023" and publish a souvenir as well.

Creating an assembly of spine surgeons from different parts of the world therefore became difficult. A conference is a way to communicate and exchange knowledge among the specialists from home and abroad.

Our Orthopaedic and Spine surgeons working hard to save and rehabilitate the critically ill spinal injury patients. Demand of more research, working skill and developing institutional capacity rising gradually. The envious flourishing of Bangladesh Spine Society during the last couple of years really amazed me with their wide spread international interaction, academic and scientific activity and nationally committed services. With this we have stepped forward to build up different super specialties to fulfill our target of providing standard health service to our people.

I welcome all the participants and distinguished foreign faculties to this scientific summit in spite of all difficulties and wish every success of BSSCON 2023.

Prof. Dr. Mohammad Hossain









# Message from the Special Guest

It is indeed an honor and a privilege to be a part of the 14th International Spine Conference, BSSCON2023, organized by the Bangladesh Spine Society. This assembly of talented individuals and devoted professionals is dedicated to advancing spine care in Bangladesh.

I would like to express my heartfelt gratitude for the warm invitation to join this event as a special guest. It is a true reflection of the collaborative spirit that drives our community towards excellence in spine healthcare.

Our Orthopaedic and Spine surgeons are working hard to save and rehabilitate the critically ill spinal injury patients. Demand of more research, working skill and developing institutional capacity are rising gradually. The envious flourishing of Bangladesh Spine Society during the last couple of years really amazed me with their wide spread international interaction, academic and scientific activity and nationally committed services. Under the magnificent leadership and supervision of our Honorable Prime minister Her Excellency Sheikh Hasina, NITOR has been extended up to thousand bedded specialized institute. For that reason, we have stepped forward to build up different super specialties to fulfill our target of providing standard health service to our people.

This conference is a largest gathering of working spine surgeons in Bangladesh. As we come together to exchange knowledge, share insights, and foster innovation, let us remember the importance of unity in our pursuit of improved patient outcomes and enhanced healthcare systems.

I look forward to engaging in fruitful discussions and forging lasting connections with all of you. Together, we can continue to make remarkable strides in the field of spine care, ultimately benefiting the well-being of our patients.

Thank you for this wonderful opportunity and I welcome all the participants and distinguished foreign faculties to this scientific seminar in spite of all difficulties, wishing BSSCON-2023 a resounding success.

Dr. Kazi Shamimuzzaman











# Message from the Special Guest

Greetings from Bangladesh Orthopaedic Society. It's my immense pleasure to welcome and congratulate all the participants of BSSCON 2023. It happens annually in both festive and instructive gesture. It's indeed a very courageous and challenging initiative by Bangladesh Spine Society to create an assembly of hundreds of spine professionals from home and abroad. I feel very much honoured and grateful to be a part of this great event. BSS always works with a brotherhood relationship with Bangladesh Orthopaedic Society. This type scientific gathering always acts as an enabler and accelerator of globalization of newer technology and education. I believe young spine surgeons of our country will definitively gain much ideas and expertise through this learning process.

I wish a grand success of BSSCON 2023. May Allah keep us healthy and happy.

Joy Bangla

Joy Bangabandhu

Prof. Dr. Md. Jahangir Alam









Chairman, Organizing Committee BSSCON-2023

### Welcome Address

Respected President of Bangladesh Spine Society, Prof. Dr. Md. Shah Alam, Honorable

Chief Guest, Prof. Dr. Md. Sharfuddin Ahmed, Vice Chancellor, Bangabandhu Sheikh Mujib Medical University, Special Guest, Prof. Dr. Monaim Hossen, President, Bangladesh Orthopedic Society, Prof. Dr. Mahammad Hossain, Dean, Faculty of Surgery, BSMMU, Special Guest, Prof. Dr. Md. Jahangir Alam, Secretary General, Bangladesh Orthopedic Society, Prof. Dr. Md. Anowarul Islam, Secretary General of BSS, other dignitaries, members of BSS, participants from home and abroad-Assalamualaikum and very good evening.

The members of the organizing committee and myself are very proud to present the "14th International Spine Conference 2023 under the theme of "Better spine Care".

Today it's a special moment for us to meet all together the local and global Spine Stalwarts.

I express my heartiest gratitude and appreciation for your kind presence and participation.

Spine surgery is a rapidly growing super specialty in Orthopaedic surgery and developing newer technologies for the better outcome of the patients. We, the Spine community of Bangladesh cannot move retrograde. Our efforts in holding this scientific conference is to enhance and enrich the skill and knowledge of our participants in managing the spinal disorders.

Bangladesh has numerous patients with spine problems but there is a lack of adequate facility to provide their optimal treatment. It needs comprehensive development of our institutional capacity for better management.

With the participation of all eminent spine surgeons of home and abroad, this scientific seminar will sharpen our skills for facing upcoming challenges.

I would like to express our gratitude and appreciation to our sponsors, who have all given us such enthusiastic support.

Finally, my it's my great obligation to thank everyone who has employed relentless efforts to make the BSSCON 2023 a success.

And once again, welcome to our conference.

Thank you and Allah Hafez.

Prof. Dr. Md. Zahidur Rahman









Secretary General
Bangladesh Spine Society (BSS)

### Address by Secretary General

Ladies and gentlemen, it is with great pleasure and privilege that I extend a warm welcome to all of you on the occasion of the 14th International Spine Conference, BSSCON 2023. We are delighted to have delegates joining us from both home and abroad.

I would like to express my deep gratitude to our Honorable Chief Guest, Prof. Dr. Md. Sharfuddin Ahmed, Vice Chancellor of Bangabandhu Sheikh Mujib Medical University, for gracing the inaugural ceremony of this conference. I would also like to thank the dynamic President of the Bangladesh Orthopaedic Society, Prof. Dr. Monaim Hossen, for being present as our special guest.

In addition, I extend my thanks to Prof. Dr. Mohammad Hossain, Dean of the Faculty of Surgery at Bangabandhu Sheikh Mujib Medical University, and to our other special guests: Professor Dr. Kazi Shamim Uzzaman, Director of NITOR, and my friend, the young and energetic Secretary General of BOS, Prof. Dr. Md. Jahangir Alam, for their gracious presence at this significant scientific event.

In recent decades, the management of spinal disorders has seen remarkable advancements, yet many questions and controversies remain. There is ongoing global research to address the challenges in spine-related issues, highlighting the need for a comprehensive consensus and a team-based approach.

Even during the pandemic when physical meetings were prohibited, we organized numerous virtual scientific webinars with local and international experts. These educational events have been valuable for young spine surgeons, and we are committed to continuing them.

We have worked diligently to fulfill our commitments to educational events. On December 27, 2022, we organized a CME on 'Management of Spinal Disorders - Bangladesh Perspective: Where Do We Stand?' at Mymensingh Medical College, with the participation of eminent spine faculties.

A significant Cadaveric Workshop on 'Thoraco Lumbar and Spino Pelvic Fixation and Fusion' was organized by the Bangladesh Spine Society on March 13, 2023, at Dhaka Medical College. This workshop featured hands-on demonstrations by 4 international and 8 local spine faculties, benefitting 48 young spine surgeons for skill development.

Sharing our experiences on the international stage has always been one of our goals, and we have gained valuable knowledge through these interactions. We were recognized for our excellent work in the field of spine research at the Combined ISSICON-ASCoN 2022 in New Delhi, India.

Under the collaborative efforts of the Bangladesh Spine Society, 35 eminent spine surgeons from Bangladesh presented scientific papers at Spine Week 2023 in Melbourne, Australia, from May 1 to 5, 2023. We also participated in the 40th International Congress of the Korean Society of Spine Surgery in May 2023, strengthening our ties with this esteemed scientific organization.

Furthermore, with the support of the Bangladesh Spine Society, a team of senior spine surgeons from Bangladesh participated in EUROSPINE 2023, held in Frankfurt, Germany, from October 4 to 6. We





also joined the "Sir Ganga Ram Hospital Operative Spine Course 2023" in New Delhi, India, from October 19 to 21, as international faculty members, providing us with a fantastic opportunity to share our knowledge on an international platform.

On October 16, 2023, we celebrated World Spine Day at the prestigious Hotel Intercontinental, Dhaka, as part of our ongoing efforts to raise awareness of spinal disorders and their prevention.

I'm pleased to share that, with the whole-hearted support of the BSS, 33 spine surgeons in our country have achieved life membership in the Asia Pacific Spine Society, enhancing their status within the global spine community.

We are determined to execute our plans and continue expanding scientific and research activities among spine surgeons working in peripheral areas. The Ministry of Health and Family Welfare has created 74 new posts for spine surgeons across the country, including NITOR, which has resulted in promotions for a significant number of spine surgeons to Associate and Assistant Professors in various institutes and medical colleges.

We would like to thanks and gratitude to BOS specially Prof. Dr. Abdul Gani Mollah, Ex-Director, NITOR & President BOS and his associates as well as Prof. Dr. Monaim Hossen, President BOS, Prof. Dr. Syed Shahidul Islam, Ex-Secretary General, Prof. Dr. Md. Wahidur Rahman, Ex-Secretary General, Prof. Dr. Md. Jahangir Alam, Secretary General of BOS and other senior professional leaders for their whole hearted efforts for creation of above post and the sake of our community.

We are moving forward with the introduction of full-fledged Spine fellowships in BSMMU and major government institutions while prioritizing the needs and expertise of our fellows. Our commitment to publishing the official journal of the Bangladesh Spine Society remains unwavering, and we are working diligently to make it a reality.

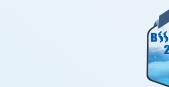
I believe that the scientific discussions by both senior and junior spine surgeons in this conference will broaden our horizons and lead to new innovations in spine care. We encourage young spine fellows to write and present scientific papers on national and international platforms, and our doors are always open for your contributions.

I extend my sincere thanks to all the participants, both from home and abroad. I want to acknowledge the tireless efforts of our dedicated executives Dr. Shahidul Islam Akon, Dr. Provash Chandra Saha, Dr. Sharif Ahmed Jonayed who have made this scientific event a success. We are also grateful to all pharmaceutical companies and allied industrial partners who have supported us in organizing this significant event.

Lastly, I want to express my heartfelt gratitude to all the participants because without your involvement, our endeavors would be meaningless. I wish the BSSCON 2023 every success.

Sincerely,

Prof. Dr. Md. Anowarul Islam











Secretary, Organizing Committee
BSSCON 2023

### Vote of Thanks

Bismillahir Rahmanir Rahim

Honorable President, Chief guest, special guests, other dignitaries from home and abroad, members of Bangladesh Spine Society, and my dear participants.

Assala-mu-alaikum, good evening and welcome you all to the 14th International Spine Conference BSSCON 2023.

I would like to take the opportunity to express depth of gratitude to the Honorable Chief guest Prof. Dr. Md. Sharfuddin Ahmed, Vice Chancellor, Bangabandhu Sheikh Mujib Medical University for gracing the inaugural ceremony of this conference.

It is indeed an honor to be the host of this prestigious scientific summit and I shall make every honest and sincere endeavor to make it a success in all the ways.

The organizing committee, under the valuable guidance of our Honorable President Prof. Dr. Md. Shah Alam and Secretary General Prof. Dr. Md. Anowarul Islam and other executives have employed tremendous efforts to ensure the success of 14th BSSCON.

Respected luminaries on the dais and off the dais, Bangladesh Spine Society is committed to promote Spine service up to a global standard. This annual meeting will provide the perfect forum for both faculty and participants to build up future collaborations.

Dear foreign faculties, as the Organizing Secretary, let me assure you that every effort will be made to make your participation a memorable one.

I extend my appreciation and acknowledgements to the pharmaceutical and implant companies, Raj TV, authority of Pan Pacific Sonargaon Dhaka, all printing and electronic media and allied organizations for their substantial support.

The words 'Thank you' are not enough to express my heartfelt appreciation for the unconditional cooperation to the organizing team Prof. Dr. Md. Zahidur Rahman, Prof. Dr. Abdur Rab, Dr. Provash Chandra Saha, Dr. Sharif Ahmed Jonayed, all EC members and Mr. Ibrahim without whose support the conference might not become an apt scientific event.

Last of all dear participants, the most meticulously organized program will be nothing without your active participation and support. It is our humble and sincere request to you all to come forward with your contributions by way of your presence and cooperation.

The organizing committee has left no stone unturned to ensure that the conference turns out to be an occasion from which all of you carry back with a long-lasting memory of not just scientific excellence but also warm hospitality.

Thanking you. Yours Sincerely

Dr. Md. Shahidul Islam Akon





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Dr. Kamran Farooque India



Dr. Petr Rehousek UK



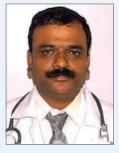
UK



Dr. Faizul Hassan Dr. Ranjith Unnikrishnan India



Dr. Wongthawat Liawrungrueang Thailand



Dr. Abrar Ahmed India



Dr. Chinmay Nath India



Dr. Kiran Kumar Mukhopadhyay India



**Fatah Manovito** Indonesia



Dr. Ayush Sharma India



Dr. Anindya Basu India



Dr. Gurudip Das India



Dr. Amitava Biswas India



Dr. Jawad Saleem Pakistan



### **PREFACE**

It is with great pleasure and enthusiasm that we welcome you to the **14th International Spine Conference**, **BSSCON-2023**. As the Chairman and Secretary of Scientific Committee of this prestigious event, it is an honor to introduce this remarkable gathering of spine specialists, experts, and enthusiasts.

Our conference, organized by the Bangladesh Spine Society (BSS), brings together a distinguished panel of 25 eminent faculties from abroad and 15 accomplished local faculties along with a good number of presenters & participants from home and abroad. Their collective knowledge and experience promise to enrich your understanding of spinal health and advance the field.

The conference is thoughtfully divided into topic-based sessions to cover a wide spectrum of spine-related subjects. We hope this structure allows you to delve into the areas that matter most to you and sparks valuable discussions and collaborations.

The program is meticulously crafted to ensure a diverse and engaging experience. From lectures to case-based discussions, learning from mistakes to exploring the most challenging cases we face, engaging in debates, and delving into video sessions, we have curated sessions that will broaden your horizons. We also invite you to participate in free paper sessions and explore the tips and tricks shared by experts.

BSSCON-2023 is not just about sharing knowledge; it's about forging connections and building a global network of professionals dedicated to improving spine care. I encourage you to take full advantage of this opportunity to interact, learn, and grow.

We extend our gratitude to all the participants, speakers, and sponsors for their invaluable contributions in making this conference possible. Your presence and support are pivotal to our success.

We look forward to two days filled with education, enlightenment, and the exchange of ideas. Let's make BSSCON-2023 an unforgettable event, leaving a lasting impact on spinal healthcare.

Thank you for joining us, and we hope you have a rewarding and inspiring conference.

Warm regards

Prof. Dr. Abdur Rob
Chairman, Scientific Committee
14th International Spine Conference
BSSCON-2023

Dr. Sharif Ahmed Jonayed
Secretary, Scientific Committee

14th International Spine Conference
BSSCON-2023

### **DAY - 01**

**Date :** Sunday, November 12, 2023 **Venue :** Pan Pacific Sonargaon Dhaka

Bangladesh

### SCIENTIFIC SESSION-1: LUMBAR DEGENARATIVE

Date: Sunday, November 12, 2023

Time: 08:00am – 09:45am Chairpersons : Dr. K.V. Menon

Dr. Kh. Abdul Awal Rizvi

Moderator : Dr. Provash Chandra Saha

	Free Paper			
SI. No	Time	Topic	Speaker & Country	
01	08:00-08:06am	Transforaminal Lumbar Interbody Fusion (TLIF), A Comprehensive Approach to Spinal Fusion Surgery	Dr. Najmul Hasan Bangladesh	
02	08:06-08:12am	Unmasking the Enigma: A Dive into Recurrent PLID Phenomena	Dr. Md. Sarwar Jahan Bangladesh	
03	08:12-08:18am	Surgical Treatment of High-Grade Spondylolisthesis: Our Preliminary Results	Dr. Abdullah Al Mamun Choudhury Bangladesh	
04	08:18-08:24am	Outcome of Caudal Epidural Steroid Injection in Management of Spinal Canal Stenosis: Study of Fifty Cases.	Lt. Col. Mohammad Shahnewaz Hossain Khan Bangladesh	
05	08:24-08:30am	Q & A		

Invited Talk			
SI. No	Time	Topic	Speaker & Country
01	08:30-08:38am	Degenerative L4/5 Canal Stenosis with Grade 1 Listhesis: What Treatment Option Would Be Better?	Dr. Fazlul Hoque Bangladesh
02	08:38-08:44am	Modic change -Is it the Game Changer in Decision Making?	Dr. Chinmay Nath India
03	08:44-08:52am	Adjacent Segment Disease in the Lumbar Spine	Dr. Tariq Sohail Pakistan
04	08:52-09:02am	Anterior Lumbar Interbody Fusion for Isthmic Spondylolisthesis.	Dr. Robert Kuru Australia
05	09:02-09:15am	Q & A	

	Debate: High Grade Listhesis			
SI. No	Time	Topic	Speaker & Country	
01	09:15-09:23am	In Situ Fusion is Sufficient	Dr. Najmus Sakeb Bangladesh	
02	09:23-09:31am	Reduction Provides Optimal Outcome	Dr. Jawad Saleem Pakistan	
03	09:31-09:33am	Chairperson's Comment		

	CASE BASED DISCUSSION			
SI. No	SI. No Time Topic Speaker & Country			
01	09:33-09:45am	Foraminal Stenosis	Dr. Faizul Hasan UK	

**TEA BREAK** 

Day: Sunday, November 12, 2023 Time: 09:45am - 10:15am Abstract 01

# TRANSFORAMINAL LUMBAR INTERBODY FUSION (TLIF), A COMPREHENSIVE APPROACH TO SPINAL FUSION SURGERY

Dr. Najmul Hasan

Consultant Orothopaedic & Spine Surgeon, Kurmitola General Hospital, Dhaka, Bangladesh

Transforaminal Lumbar Interbody Fusion (TLIF) is a comprehensive surgical technique used for spinal fusion surgery in the treatment of various spinal conditions, including degenerative disc disease, spondylolisthesis, and spinal stenosis. TLIF involves the removal of the intervertebral disc, decompression of neural structures, and fusion of adjacent vertebrae. This abstract provides a concise overview of TLIF, highlighting its surgical approach, indications, utcomes, and potential complications. TLIF utilizes a unilateral approach through the intervertebral foramen, combining decompression and fusion. This technique offers advantages over traditional open fusion methods, such as posterior lumbar interbody fusion (PLIF). Advantages include improved disc height restoration, reduced risk of nerve root injury, enhanced biomechanical stability, and decreased surgical morbidity. The TLIF procedure involves several steps: posterior exposure and decompression, discectomy, endplate preparation, interbody graft placement, and posterior instrumentation. Various techniques, such as autograft, allograft, or synthetic cages, can be used for interbody fusion. TLIF also allows for pedicle screw fixation, providing additional stability and promoting successful fusion. Indications for TLIF include symptomatic degenerative disc disease, spondylolisthesis, and spinal stenosis that have not responded to conservative treatment. The goals of TLIF are pain relief, spinal stabilization, and restoration of intervertebral height and alignment. It can be performed at a single level or as a multi-level procedure, depending on the extent of spinal pathology. Clinical studies have demonstrated favorable outcomes following TLIF, with significant improvements in pain scores, functional outcomes, and quality of life measures. TLIF has shown comparable or superior results compared to other fusion techniques, with high fusion rates and low rates of revision

Abstract 02

### UNMASKING THE ENIGMA: A DIVE INTO RECURRENT PLID PHENOMENA

Md. Sarwar Jahan<sup>1</sup>, Md Shah Alam<sup>2</sup>, Sharif Ahmed Jonayed<sup>1</sup>, Abdullah Al Mamun<sup>1</sup>, OZM Dastagir<sup>1</sup>

<sup>1</sup>National Institute of Traumatology & Orthopaedic Rehabilitation (NITOR), Dhaka, Bangladesh, <sup>2</sup>Bangladesh Spine & orthopedic Hospital, Dhaka, Bangladesh

**Introduction:** Recurrent prolapse of the lumbar intervertebral disc is a common complication following primary discectomy, leading to persistent or recurrent symptoms and functional limitations. Surgical intervention for recurrent prolapse involves two main approaches: fusion and non-fusion techniques. This abstract aims to compare the outcomes of fusion versus non-fusion surgeries for recurrent prolapse of the lumbar intervertebral disc.

**Methodology:** A prospective study was designed over 33 patients with recurrent PLID. Study time was March 2019 to August 2023 in NITOR & BSOH, Dhaka. Patients were selected for surgery depending on clinically important & significant pain or neurological symptoms & no sufficient clinical improvement despite conservative care at least for 3 months. Our choice of surgery was revision discectomy & TLIF.

Evaluation was done comparing their pre & post-operative states including clinical evaluation, X-ray showing gradual fusion, CT scan & MRI. 33 patients (Female- 20 & male-13) with average age of 42 years (17-65 yrs) were studied. Follow up time was 2 months to 2 yrs. VAS, ODI score was used for evaluation.

**Result:** The results of both fusion and non-fusion surgeries can provide significant pain relief and functional improvement in patients with recurrent lumbar disc prolapse. Fusion surgeries, such as posterolateral fusion or interbody fusion, have shown superior radiographic stability and fusion rates. However, non-fusion techniques, such as revision discectomy have the advantage of preserving segmental motion and potentially reducing adjacent segment degeneration.

Fusion surgeries were associated with a higher risk of perioperative complications, such as infection and implant-related issues. Non-fusion surgeries had a higher risk of recurrent disc herniation, requiring subsequent revision procedures.

Patient satisfaction rates were generally high for both fusion and non-fusion techniques, with patients reporting significant improvement in pain and function postoperatively.

**Conclusion:** In conclusion, both fusion and non-fusion surgeries can effectively address recurrent PLID. The decision regarding the choice of surgical technique should be based on a comprehensive evaluation of the patient's clinical presentation, radiographic findings, and preferences, along with careful consideration of the associated risks and benefits.

Abstract 03

# SURGICAL TREATMENT OF HIGH-GRADE SPONDYLOLISTHESIS: OUR PRELIMINARY RESULTS

Dr. Abdullah Al Mamun Choudhury

Senior Consultant, NITOR, Dhaka, Bangladesh

**Background:** From in situ fusion to total reduction, surgical therapy of high-grade spondylolisthesis is difficult and contentious. We report the outcomes of our single surgical, three-stage, safe spinal surgery. high-grade spondylolisthesis was identified during a session with eleven patients. Interbody fusion and posterior fixation are efficient treatments for clinical outcomes, reduction, and ossification in high-grade spondylolisthesis.

**Patients and methods:** Patients who participated in this study were reviewed retrospectively. was operated between 2019 and 2023. The procedure used during surgery is specialized installation for pedicle screw fixation, correction of deformity, with a special distraction technique, lumbosacral kyphosis progressive correction of the deformity, decompression, and interbody fusion to maintain the decrease. Patients were examined at 2-, 6-, and 12-month intervals following the operation. Radiological and clinical results from the Visual Analogic Scale (VAS) and the Oswestry Disability Index (ODI) & pelvic parameters were recorded.

**Results:** 5 out of 11 patients with high-grade spondylolisthesis at L5-S1 with a median age of 37, 5 patients in grade III, and 6 patients in grade IV. Follow-up lasted an average of 24 months (12–25 months). At six months, all but one of the patients have fused joints. Radiological markers improve significantly at the final follow-up. No deep infection existed. Median Pain and disability scores on the VAS and ODI improved.

**Conclusion:** This process enables accurate high-grade reduction rates and good clinic-radiological results for spondylolisthesis.

Abstract 04

## OUTCOME OF CAUDAL EPIDURAL STEROID INJECTION IN MANAGEMENT OF SPINAL CANAL STENOSIS: STUDY OF FIFTY CASES

Lt. Col. Mohammad Shahnewaz Hossain Khan<sup>1</sup>, Maj. Khaled Hasan<sup>2</sup>, Smriti Sarker<sup>3</sup>

<sup>1</sup>Classified Orthopaedic Surgeon & Associate professor, Department of Orthopaedics and Trauma Surgery, Army Medical College Cumilla and Combined Military Hospital, Cumilla Cantonment, Bangladesh. <sup>2</sup>Classified Specialist in Surgery & Assistant professor (Surgery), Combined Military Hospital, Cumilla Cantonment. Bangladesh. <sup>3</sup>Medical Officer, Combined Military Hospital, Cumilla Cantonment. Bangladesh.

**Background:** Morbidity associated with chronic low back pain and its associated management is high. The etiology of chronic low back pain remains unclear in many cases. Inflammatory reaction, Disc degeneration, herniation could be responsible for lower backache. The physical, psychological and socioeconomic burden of low back pain is enormous.

In elderly people Lumbar spinal stenosis is a common cause of spine-related disability. Narrowing of the spinal canal and nerve-root compression can cause back and leg pain along with lower-limb numbness and weakness. The treatment of symptomatic lumbar stenosis remains controversial. Canal stenosis is the leading reason for spinal surgery in older adults. Epidural glucocorticoid injections are widely used to treat symptoms of lumbar spinal stenosis. However, enough data are lacking regarding the effectiveness and safety of these injections.

**Objective:** The purpose of this study is to assess the efficacy of steroid via caudal route in terms of pain relief and regain of activity of daily living in lumbar spinal canal stenosis patients.

Study design: Prospective observational study.

**Methods:** A prospective observational study was done in Combined Military Hospital and Moinamoti Cantonment General Hospital, Cumilla cantonment on patients suffering from back pain with radicular symptoms at examination at least for 3 months, they did not respond to medical treatment and physical therapy, they had magnetic resonance imaging (MRI) findings consistent to their clinical condition. Study was conducted from January 2020 and December 2021.

Consecutive 50 patients of low back pain with radiculopathy who received caudal epidural steroid injection were observed over a period of 6 months. They were evaluated and followed up with Japanese Orthopaedic Association (JOA) Score at pre-injection and 01, 03 and 06 month post injection.

**Results:** 50 patients with lumbar canal stenosis treated with epidural steroid injection were examined periodically and data was recorded as per Japanese Orthopaedic Association (JOA) Score. Improvement of JOA score of 80% of the patients were detected at 01-month assessment. At 01-month scores of 20% of the patients were poor. At 3 months follow-up JOA score analysis of the patients showed improvement of 84% and at 6 months 86% of the cases. In our study caudal steroid injection was found to be effective on 06 months follow-up.

**Conclusion:** Caudal epidural steroid injection is a safe and efficient treatment method for the patients who have radicular pain not responding to conservative treatment. Randomized double blind studies are needed to assess its superiority to other conservative methods.

**Keywords:** Chronic low back pain; Lumbar epidural steroid applications; Lumbar Spinal canal stenosis.

### **INVITED TALK**

# DEGENERATIVE L4/5 CANAL STENOSIS WITH GRADE 1 LISTHESIS: WHAT TREATMENT OPTION WOULD BE BETTER?

Dr. Fazlul Hoque

Consultant Spine Surgeon, Square Hospital Ltd. Bangladesh

## MODIC CHANGE -IS IT THE GAME CHANGER IN DECISION MAKING?

Dr. Chinmay Nath

Consultant Orthopaedic and Spine Surgeon, Apollo Multispecialty Hospital, Kolkata India

#### ADJACENT SEGMENT DISEASE IN THE LUMBAR SPINE

**Dr. Tariq Sohail** 

Consultant Spine Surgeon, Doctor Hospital & Medical Centre, Canal bank, Johan Town, Lahore, Pakistan

### ANTERIOR LUMBAR INTERBODY FUSION FOR ISTHMIC SPON-DYLOLISTHESIS

Dr. Robert Kuru

Consultant Spinal Surgeon, Lake Macquarie Specialist Medical Centre, Gateshead Australia and

President, Spine Society of Australia

### **DEBATE: HIGH GRADE LISTHESIS**

### IN SITU FUSION IS SUFFICIENT

Dr. Najmus Sakeb

Associate Professor, Dhaka Community Medical College, Bangladesh

### **REDUCTION PROVIDES OPTIMAL OUTCOME**

Dr. Jawad Saleem

Assistant Professor, Orthopedic Spine Surgery, Doctors Hospital and Medical Centre, Lahore, Pakistan

### CASE BASED DISCUSSION

### **FORAMINAL STENOSIS**

Dr. Faizul Hasan

Consultant Neuro Spine Surgeon, Royal Orthopaedic Hospital (ROH)

Birmingham, UK

### **SCIENTIFIC SESSION-2: CERVICAL DEGENERATIVE**

**Date :** Sunday, November 12, 2023 **Time:** 10:15am – 10:53am

Chairpersons : Dr. Zamzuri Bin Zakaria Mohammad

Dr. Kazi Shamim Uzzaman

**Moderator** : Dr. Md. Shahidul Islam Khan

SI. No	Time	Торіс	Speaker & Country
01	10:15-10:25am	Decision Making in Cervical Disc Prolapse	Dr. Md. Shah Alam Bangladesh
02	10:25-10:35am	Surgery in Cervical Spondylotic Myelopathy: What, When, When not?	Dr. Faizul Hasan UK
03	10:35-10:41am	Q & A	
		Case based discussion	
01	10:41-10:53am		Dr. Md. Rezaul Karim Bangladesh

### **DECISION MAKING IN CERVICAL DISC PROLAPSE**

Prof. Dr. Md. Shah Alam

Chief Consultant, Bangladesh Spine & Orthopaedic Hospital (BSOH)

Dhaka, Bangladesh

# SURGERY IN CERVICAL SPONDYLOTIC MYELOPATHY: WHAT, WHEN, WHEN NOT?

Dr. Faizul Hasan

Consultant Neuro Spine Surgeon, Royal Orthopaedic Hospital (ROH)
Birmingham, UK

### **CASE BASED DISCUSSION**

Dr. Md. Rezaul Karim

Associate Professor, NITOR, Dhaka, Bangladesh

### **SCIENTIFIC SESSION - 3**

**Date :** Sunday, November 12, 2023 **Time:** 10:53am –11:45am

Chairpersons : Dr. Tariq Sohail

Dr. Md. Anowarul Islam

Moderator : Dr. Md. Yousuf Ali

	Cranio Cervical Junction			
SI. No	Time	Topic	Speaker & Country	
01	10:53-11:03am	AAD /AAI -What to look? When to look for?	Dr. Jawad Saleem Pakistan	
02	11:03-11:11am	C1/C2 Fixation: Harms Versus Transarticular	Dr. Gurudip Das India	
03	11:11-11:19am	Anterior Odontoid Screw Fixation & Technique	Dr. Arif Khan Pakistan	
04	11:19-11:27am	Atlantoaxial Dislocation: Surgical Outcome Following Goel's Technique - An Institutional Experience	Dr. Md. Harun Ur Rashid Bangladesh	
05	11:27-11:35am	Treating the cases of Basilar Invagination: How Do We Perform ?	Dr. K M Atiqul Islam Bangladesh	
06	11:35-11:45am	Q & A		

### AAD /AAI -WHAT TO LOOK? WHEN TO LOOK FOR?

Dr. Jawad Saleem

Assistant Professor, Orthopedic Spine Surgery, Doctors Hospital and Medical Centre, Lahore, Pakistan

### C1/C2 FIXATION: HARMS VERSUS TRANSARTICULAR

Dr. Gurudip Das

Associate Professor, Department of Orthopaedics, AIIMS Bhubaneswar, India

### **ANTERIOR ODONTOID SCREW FIXATION & TECHNIQUE**

Dr. Arif Khan

Head, Department of Orthopaedic and Spine surgery, Khyber Girls Medical College, Hayatabad Medical Complex, Peshawar, Pakistan and Secretary General, APOA & Immediate Past President, Pakistan Orthopaedic Society, Pakistan Abstract 05

# ATLANTOAXIAL DISLOCATION: SURGICAL OUTCOME FOLLOWING GOEL'S TECHNIQUE - AN INSTITUTIONAL EXPERIENCE

Dr. Md. Harun Ur Rashid

Assistant Professor, Neurosurgery Department, Mymensingh Medical College.

**Introduction:** Atlantoaxial dislocation (AAD), often caused by trauma, tumors or congenital malformations, is a challenging disorder of the craniocervical junction. Surgical treatment for patients with symptomatic atlantoaxial dislocation is widely accepted to protect against potential respiratory failure, progressive neurologic symptoms, and death. There are several treatment options for rigid fixation at C1–C2 including Brooks and Gallie type wired fusions, Goel's technique, a construct with C1 lateral mass screws and C2 pedicle screws and C1–2 trans articular screws. The key points of Goel's technique are opening of the atlantoaxial joint, denuding of the articular cartilage, stuffing of bone graft chips into the joint cavity, and direct insertion of screws into the facets of atlas and axis.

**Materials and Method:** From January 2021 to June 2023, a total of 15 cases were admitted to Neurosurgery Department, mymensingh medical college and hospital and diagnosed as AAD from different pathology. All the patients received manual atlantoaxial reduction with the help of intraoperative skull traction and C1-C2 fixation by Goel's technique. Clinical, radiological findings were recorded and surgical outcome was measured by Nurick grade at discharge, 1 month and 3 month's intervals.

**Result:** Maximum numbers of patient were from third decade of life. The male a female ratio was 1.5. Common clinical feature was weakness followed by neck pain and numbness. Radiological anterior AAD was 33% and AAD with odontoid fracture 27%. Most of the patients had improvement in Nurick grade during follow up.

**Conclusion:** Goel's technique of C1-C2 fusion is a very effective technique for stabilizing the atlantoaxial complex. It provides manual reduction, strong bony fusion and fixation of atlantoaxial joints from different pathology. It is safe if the pathological anatomy is clear to surgeon.

Abstract 06

## TREATING THE CASES OF BASILAR INVAGINATION: HOW DO WE PERFORM?

K M Atiqul Islam, M M Ehsanul Hoque, Samsul Arefin, Farhad Ahmed

Assistant professor, Dept of Neurosurgery, National Institute of Neurosciences and Hospital

Basilar invagination is an abnormality at the craniovertebral junction; either congenital or degenerative, resulting in the odontoid prolapsing into the already limited space of the foramen magnum. Due to complex anatomy and neurovascular structures, any surgical intervention in the craniovertebral junction is very challenging. Furthermore, it is more challenging if there are associated anatomical abnormalities. Here we present our experience of type-I basilar invagination. The cases had occipitalised C1 lateral mass. There was absence of posterior arch of C1or it was fused with occipital.In one case there was C2-3 fusion. We corrected one case of basilar invagination by inserting spacer in between occipitalised C1 and C2 along with fixation by occipital keel plate and screws with C2 pedicle screws with rods and fusion by autologous bone chips.Other cases were corrected by C1-C2 fixation with decompression of foramen magnum. We review clinical and radiographic features of the patient, the procedure underwent as well as postoperative outcome.

### SCIENTIFIC SESSION - 4: THORACOLUMBAR TRAUMA

**Date :** Sunday, November 12, 2023 **Time:** 11:45am – 01:10pm

Chairpersons : Dr. Med. Klaus John Schnake

Dr. Syed Shahidul Islam

**Moderator** : Dr. Md. Shahidul Islam Akon

SI. No	Time	Торіс	Speaker & Country
01	11:45-11:55am	Thoraco Lumbar Spine Trauma, Consensus and . Controversies	Dr. Arif Khan Pakistan
02	11:55-12:03pm	Current Treatment for A3 or A4 Thoracolumbar Fractures Without Neurological Deficit: How Should We Treat?	Dr. Zamzuri Bin Zakaria Mohammad Malaysia
03	12:03-12:11pm	Management Strategies for Neglected TL Trauma	Dr. Kamran Farooque India
04	12:11-12:19pm	Prevention of Complications in Ankylosing spondylitis	Dr. Abrar Ahmed India
05	12:19-12:25pm	Outcome of Short Segment Pedicle Screw Fixation Incorporating Fracture Vertebrae in Thoraco-Lumber Spine Injury: Our Observation in NITOR	Dr. Md. Nur Alam Bangladesh
06	12:25-12:31pm	Efficacy, Safety And Reliability of Single Posterior Approach For Unstable Thoracolumbar Burst Fracture Treated With Anterior Reconstruction & Posterior Instrumentation	Dr. Jhuton Chandra Banik Bangladesh
07	12:31-12:37pm	Challenges of surgical treatment of Thoracolumbar Burst fracture in district level hospital;my experience	Dr.Md Mahamudul Hasan Bangladesh
08	12:37-12:50pm	Q & A	

Debate: Management of Thoracolumbar Burst Fracture			
SI. No	Time	Topic	Speaker & Country
01	12:50-12:56pm	Short Segment is Optimum	Dr. Md. Akshad Al Masur Anon Bangladesh
02	12:56-01:02pm	Long segment is Best	Dr. O Z M Dastagir Bangladesh
03	01:02-01:04pm	Chairperson's comment	

	Case Based Discussion		
SI. No	SI. No Time Topic Speaker & Country		
01	01:04-01:15pm	Cervicodorsal Junction Trauma	Dr. Provash Chandra Saha Bangladesh

## THORACO LUMBAR SPINE TRAUMA, CONSENSUS AND CONTROVERSIES.

Dr. Arif Khan

Head, Department of Orthopaedic and Spine surgery, Khyber Girls Medical College, Hayatabad Medical Complex, Peshawar, Pakistan and Secretary General, APOA & Immediate Past President, Pakistan Orthopaedic Society, Pakistan

# CURRENT TREATMENT FOR A3 OR A4 THORACOLUMBAR FRACTURES WITHOUT NEUROLOGICAL DEFICIT: HOW SHOULD WE TREAT?

Dr. Zamzuri Bin Zakaria Mohammad

Consultant Orthopaedic & Spine Surgeon, Department of Orthopaedics, Traumatology & Rehabilitation, Sultan Haji Ahmad Shah Medical Centre and President, Malyasian Spine Society

#### MANAGEMENT STRATEGIES FOR NEGLECTED TL TRAUMA

Dr. Kamran Farooque

Professor of Orthopedics, JPNA Trauma Center, AIIMS, New Delhi, India

## PREVENTION OF COMPLICATIONS IN ANKYLOSING SPONDYLITIS

Dr. Abrar Ahmed

Consultant Spine Surgeon, Apollo Multispecialty Hospital Kolkata and President, West Bengal Spine Society, India Abstract 07

# OUTCOME OF SHORT SEGMENT PEDICLE SCREW FIXATION INCORPORATING FRACTURE VERTEBRAE IN THORACO-LUMBER SPINE INJURY: OUR OBSERVATION IN NITOR

Dr. Md. Nur Alam

Senior consultant, Spine Surgery, NITOR

**Objective:** To evaluate the effect of including the fractured vertebra in the short-segment fixation of thoracolumbar (TL) fractures.

**Methods:** A total of 16 patients with thoraco-lumbar fractures, selected between January 2017 and February 2021, were managed by short-segment fixation with screws at the level of the fracture, and decompression was performed only for patients with neurological deficits. The patients' functional outcome was assessed using the visual analogue scale (VAS) score for pain and the American Spinal Injury Association (ASIA) score for neurological condition. All patients were followed up with radiographs.

**Results:** Patients with complete neurologic deficits (n = 3) did not show any neurologic recovery. All ASIA B patients improved to ASIA C. Two ASIA C patients improved to ASIA E. The remaining three ASIA C patients improved to ASIA D. All ASIA D patients improved to ASIA E. At the final follow-up examination, the mean anterior vertebral height was 18  $\pm$  5 mm, indicating no significant height loss during the follow-up period.

**Conclusion:** Short-segment fixation of TL fractures with inclusion of the fracture level into the construct offers good correction of segmental kyphosis, vertebral wedging, and vertebral height loss.

Abstract 08

# EFFICACY, SAFETY AND RELIABILITY OF SINGLE POSTERIOR APPROACH FOR UNSTABLE THORACOLUMBAR BURST FRACTURE TREATED WITH ANTERIOR RECONSTRUCTION & POSTERIOR INSTRUMENTATION

Dr. Jhuton Chandra Banik

RS, Dhaka Medical College Hospital, Dhaka, Bangladesh

**Introduction:** Management of unstable thoracolumbar burst fracture is still a controversial issue. Fracture morphology, neurologic status, and surgeon preference play major roles in deciding the appropriate approach. Though the combined anterior and posterior instrumentation provides the most stable repair, but optimizing neural decompression & stable internal fixation using a single approach over the least number of spinal segments is the goal. Moreover, the use of both approaches on a trauma patient may increase morbidity. Anterior reconstruction of spine through only one approach can provide an effective outcome.

**Aims & objectives:** The purpose of this study is to evaluate neurological, functional and radiological outcome of the anterior reconstruction of spine by single posterior approach in cases of unstable thoracolumbar burst fractures.

**Methods:** Eight patients with acute unstable thoracolumbar burst fractures (T-11 to L-4) with neurological deficit in the age group of 16-60 years with McCormack's score six or more and thoracolumbar injury severity score (TLISS) five or more were included. Neurological status, visual analogue scale (VAS), angle of kyphotic deformity, McCormack's score and TLISS score were evaluated.

**Results:** The mean duration of surgery was 255 minutes. The mean blood loss was 440 ml. Mean improvement of ASIA scale was 1.67 in a patient with incomplete spinal injury whereas patient with complete spinal injury remain same at last 6 months' follow-up. The mean preoperative kyphotic angle was improved from 25 degrees to 5 degrees postoperatively. Visual analogue score improved from 6.1 to 1.7.

**Conclusions:** Single posterior approach is a safe, cost effective and reliable surgical approach for reconstruction of all the columns of spine. It reduces the operative time, blood loss, the morbidity associated with combined approach with a good outcome

**Keywords:** Anterior reconstruction, Posterior approach, Unstable, Burst fracture, Titanium cage

Abstract 09

### CHALLENGES OF SURGICAL TREATMENT OF THORACOLUM-BAR BURST FRACTURE IN DISTRICT LEVEL HOSPITAL; MY EXPERIENCE

#### Dr.Md Mahamudul Hasan

Assistant Professor (spine surgery), Satkhira Medical College, Bangladesh

**Background:** Approximately 90% of all spinal fractures occur in the thoracic or lumbar spine .Burst fracture comprises 14% of all spinal injuries. Thoraco lumbar Burst fracture impart significant morbidity with long lasting effect on quality of life.

**Method:** This is a prospective observational study conducted in district level hospital from January 2022 July 2023. Total number of patient 13. Patient was selected on the basis of inclusion, exclusion criteria and TLICS Score. Outcome was evaluated in ASIA score.

**Conclusion:** Surgical treatment gives better correction of kyphotic deformity, greater initial stability and opportunity to perform direct or indirect decompression of neural elements, decrease requirement of external immobilization and early return to work.

## LUNCH SYMPOSIUM: OSTEOPOROSIS & FRAGILITY FRACTURE

**Date :** Sunday, November 12, 2023 **Time:** 01:20pm – 02:10pm

Chairpersons : Dr. Chinmay Nath

Dr. Md. Golam Sarwar

Moderator : Dr. Md. Saiful Islam

SI. No	Time	Topic	Speaker & Country
01	01:20-01:35pm	Classification and Treatment of Osteoporotic Thoracolumbar Fractures	Dr. Med. Klaus Schnake Germany
02	01:35-01:50pm	Surgery for OVCF: When, What & When not? How to Monitor Anti Osteoporotic Therapy?	Dr. Syed Shahidul Islam Bangladesh
03	01:50-02:10pm	Q & A	

### CLASSIFICATION AND TREATMENT OF OSTEOPOROTIC THO-RACOLUMBAR FRACTURES

Dr. Med. Klaus Jhon Schnake

Head, Center for Spinal and Scoliosis Surgery, Malteser Waldkrankenhaus St.
Marien, Erlangen, Germany and
Chair, Spine Section, German Orthopedic and Trauma Society

## SURGERY FOR OVCF: WHEN, WHAT & WHEN NOT? HOW TO MONITOR ANTI OSTEOPOROTIC THERAPY?

Prof. Syed Shahidul Islam

Ex-Proessor, NITOR, Bangladesh

## **SCIENTIFIC SESSION - 5 : CERVICAL TRAUMA**

**Date :** Sunday, November 12, 2023 **Time:** 02:10pm – 02:55pm

Chairpersons : Dr. Kamran Farooque

Dr. Md. Wahidur Rahman

Moderator : Dr. Md. Asraf Ul Matin (Sagor)

SI. No	Time	Торіс	Speaker & Country
01	02:10-02:18pm	Timing of Cervical Decompression: Gold Standard Versus Delayed Surgery	Dr. Ranjith Unnikrishnan India
02	02:18-02:26pm	Central cord syndrome: How it is different?	Dr. Sharif Ahmed Jonayed Bangladesh
03	02:26-02:34pm	Cervical Facet Dislocation: Management Controversies	Dr. Kiran Kumar Mukhopadhyay India
04	02:34-02:42pm	Outcome of Management of Adult Traumatic Brachial Plexus Injury	Dr. Krishna Priya Das Bangladesh
05	02:42-02:47pm	Subaxial Cervical Spine Injury Fixation by ACDF Procedure - Our Early Experience	Dr. Md. Alauddin Bangladesh
06	02:47-02:52pm	Vertebral Artery Injury in Cervical Spine Fracture Dislocation: Our Observation in Indian Spinal Injuries Center.	Dr. Md. Ziaul Hasan Bangladesh
06	02:52-02:55pm	Q & A	

## TIMING OF CERVICAL DECOMPRESSION: GOLD STANDARD VERSUS DELAYED SURGERY

Dr. Ranjith Unnikrishnan

Consultant, Orthopaedic Spine Surgeon, Kerala Institute of Medical Science, Trivandrum, Kerala, India

#### CENTRAL CORD SYNDROME: HOW IT IS DIFFERENT?

Dr. Sharif Ahmed Jonayed

Assistant Proiessor (Spine Surgery), NITOR, Bangladesh

### CERVICAL FACET DISLOCATION: MANAGEMENT CONTROVERSIES

Dr. Kiran Kumar Mukhopadhyay

Professor & Head, Dept of Orthopedic Surgery, N R S Medical College Kolkata

### OUTCOME OF MANAGEMENT OF ADULT TRAUMATIC BRACHI-AL PLEXUS INJURY

**Prof. Krishna Priya Das** 

Professor, BSMMU, Dhaka, Bangladesh

Abstract 10

## SUBAXIAL CERVICAL SPINE INJURY FIXATION BY ACDF PROCEDURE - OUR EARLY EXPERIENCE

Md. Alauddin<sup>1</sup>, Md. Rezaul Karim<sup>2</sup>, Md.Ruhul Quddus<sup>1</sup>, Md. Muazzem Hossain<sup>3</sup>, Md. Daniel Alam<sup>4</sup>, Riad Mazid<sup>4</sup>, Md. Shorfuddin<sup>4</sup>, Shawon Datta<sup>4</sup>

<sup>1</sup>Assistant professor (Orthopaedic surgery), NITOR, <sup>2</sup>Associate professor (Orhopaedic surgery), NITOR, <sup>3</sup>Junior Consultant (Orthopaedic Surgery), NITOR, <sup>4</sup>Assistant Registrar (Orthopaedic Surgery), NITOR, Dhaka

**Introduction:** The subaxial region of cervical spine accounts for about 65% of all cervical spine injuries and most cervical spinal cord injury. The optimal management often not clear from existing medical literature. Our study evaluate the efficacy and pitfall of Anterior cervical Discectomy and Fusion (ACDF) procedure for managing unstable cervical spine injury with incomplete neurological deficit.

**Material and Method:** A prospective observational study was conducted from july'2019 to december'2022 at NITOR and some other hospital, Dhaka. Patients with incomplete spinal cord injuries who underwent ACDF surgery were included in the study. Total 18 patients were included in the study. Assessments were done with ASIA impairment Scale, VAS scale, ODI scale, imaging and modified Macnab criteria. Follow up period was from 6-12 months.

**Results:** the mean age was 34.7±11.91 yeears. Most common level of injury was C5-C6 level (8 case, 44%). 12 cases (66%) presented with ASIA grade C but in last follow up most of the patients were in ASIA E (10 cases, 55%). Per operative period in most cases were uneventful, except in 2 cases had mild haemorrhage. Early pos operative complication were dysphagia (3 cases) and neck pain (4 cases). Commonest late post operative complications were donor site pain (3 cases) and neck pain (2 cases). Pre operative VAS score was 8.83±1.04 comparing the post operative VAS score at last follow up 3.05±.93. the p value is < 0.001. The pre operative ODI score was 39.5±3.18 which reduced to 9.83±2.35 at last follow up wit p value < 0.001. At final follow up 6(33%) were excellent, 6 (33%) were good, 4 were fair and 2 cass were found poor outcome according to Macnab criteria.

Conclusion: ACDF is an effective procedure for unstable single level cervical spine injury.



# VERTEBRAL ARTERY INJURY IN CERVICAL SPINE FRACTURE DISLOCATION: OUR OBSERVATION IN INDIAN SPINAL INJURIES CENTER

Dr. Md. Ziaul Hasan

IMO, NITOR, Study place: Indian Spinal Injuries Center, New Delhi, India

**Background:** Incidence of traumatic vertebral artery injury (VAI) associated with cervical spine trauma varies widely in published trauma series. The purpose of this study was to determine the frequency of traumatic vertebral artery injury in patients with cervical spine trauma by using routine MR imaging and identify associations with Age, Sex, Mechanism of injury, level of injury and severity of neurologic injury. Vertebral Artery Injury is mostly asymptomatic but serious complication like Cerebro vascular event or even death can occur when it occurs in dominant side or bilateral.

**Materials and Method:** A retrospective review of 96 patients with cervical spine fracture dislocation with or without an associated spinal cord injury (SCI) who were admitted in Indian Spinal Injuries Center

in last 10 years was performed. Cervical MR imaging was used to diagnose vertebral artery injury. Patient's age, sex, cervical injury level, mechanism of injury, neurologic level of injury, and American Spinal Injury Association (ASIA) grade and clinical sequel of vertebral artery injury were recorded.

**Result:** In this study, 96 patients met the inclusion criteria, 18 (18%) of whom had VAI on the admission MR imaging. All of VAI patients had an associated SCI. VAI was significantly more common in motor-complete patients (ASIA A 61% and B 22%) where no VAT in neurologically intact cervical spine injured patients. VAI incidence was significantly high in Flexion distraction type of injury (12, 66%).

Most common level associated with VAI was C4/5 and C6/7 (22%). 27% of VAI was associated with Foraminal fracture, 72% of VAI was associated with Facet dislocation among the 44% bi facetal and 28% uni facetal dislocation.

**Conclusion:** Incidence of traumatic vertebral artery is not very Uncommon and need careful and meticulous screening and management. Otherwise, complications can happen. Mostly it is associated with high velocity injury and higher neurologically injure patient. MRI can be used as a good screening tool which can be confirmed by CT angiogram or Digital subtraction angiography (DSA). Proper pre-operative evaluation of vascular injury in cervical spine fracture dislocation is very much important for patient management as well as patient counselling.

## SCIENTIFIC SESSION - 06 : LESSONS LEARN FROM MISTAKE

**Date :** Sunday, November 12, 2023 **Time:** 02:55pm – 03:35pm

Chairpersons : Dr. Arif Khan

Dr. Monaim Hossen

Moderator : Dr. O. Z. M. Dastagir

SI. No	Time	Case	Speaker & Country
01	02:55-03:05pm		Dr. Ranjith Unnikrishnan India
02	03:05-03:15pm		Dr. Abrar Ahmed India/
03	03:15-03:25pm		Dr. Petr Rehousek UK/
04	03:25-03:35pm	Q & A	

## **SCIENTIFIC SESSION -7: VIDEO PRESENTATION**

**Date :** Sunday, November 12, 2023 **Time:** 03:35pm – 04:25pm

Chairpersons: Dr. Wongthawat Liawrungrueang

Dr. Md. Zahidur Rahman

**Moderator** : Dr. Md. Akshad Al Masur Anon

SI. No	Time	Case	Speaker & Country
01	03:35-03:45pm	Microdisectomy	Dr. Md. Anowarul Islam Bangladesh
02	03:45-03:55pm	OLIF	Dr. Ayus Sharma India
03	03:55-04:05pm	Over the Top Decompression for Lumbar Canal Stenosis	Dr. Anindya Basu India
04	04:05-04:15pm	S2 alar-iliac (S2AI) screw fixation technique	Dr. Ranjith Unnikrishnan India
05	04:15-04:25pm	Q & A	

### **TEA BREAK**

Day: Sunday, November 12, 2023 Time: 04:25pm – 04:45pm

#### **MICRODISECTOMY**

Prof. Md. Anowarul Islam

Professor (Spine Surgery), BSMMU, Dhaka, Bangladesh

### **OLIF**

### Dr. Ayus Sharma

Chief Spine Surgeon & Unit Head, Department of Orthopaedic and Spine Surgery,
Dr. Babasaheb Ambedkar Central Railway Hospital. India

## OVER THE TOP DECOMPRESSION FOR LUMBAR CANAL STENOSIS

Dr. Anindya Basu

Institute of Neurosciences, Kolkata, India

### S2 ALAR-ILIAC (S2AI) SCREW FIXATION TECHNIQUE

Dr. Ranjith Unnikrishnan

Consultant, Orthopaedic Spine Surgeon, Kerala Institute of Medical Science, Trivandrum, Kerala, India

## **INVITED GUEST LECTURE SESSION (VIRTUAL)**

Date: Sunday, November 12, 2023

Time : 04:45pm – 06:25pm (BST\*) \*Bangladesh Standard Time 04:15pm-5:55pm (IST\*\*) \*\*Indian Standard Time

**Chairpersons**: Dr. Petr Rehousek

Dr. Md. Shah Alam

Moderator : Dr. Sharif Ahmed Jonayed

SI. No	Time	Topics	Speaker & Country
01	04:45-05:00pm (BST) 04:15-04:30pm (IST) 05:45-06:00am (EST)	Controversies in the Management of Spinal Trauma	Dr. Alexander R. Vaccaro USA
02	05:00-05:15pm (BST) 04:30-04:45pm (IST) 06:00-06:15am (EST)	Pathophysiology and Management of Degenerative Cervical Myelopathy: State of the Art and Future Directions	Dr. Michael Fehlings Canada
03	05:15-05:30pm (BST) 04:45-05:00pm (IST) 06:15-06:30am (EST)	Principal of Management of Adult Spinal Deformity (ASD): Role of Osteotomy, Instrumentation and Fusion level	Dr. Stephen Lewis Canada
04	05:30-05:45pm (BST) 05:00-05:15pm (IST) 06:30-06:45am (EST)	Q & A	
05	05:45-06:00pm (BST) 05:15-05:30pm (IST) 06:45-07:00am (EST)	A Kyphosis Classification to Guide Management and Surgery.	Dr. S. Rajasekaran India
06	06:00-06:15pm (BST) 05:30-06:45pm (IST) 07:00-07:15am (EST)	A New Classification of Adult Idiopathic Scoliosis with an Eye Towards Treatment	Dr. Lawrence G. Lenke USA
07	06:15-06:25pm (BST) 05:45-05:55pm (IST) 07:15-07:25am (EST)	Q & A	

### **INAUGURAL CEREMONY**

Day: Sunday, November 12, 2023 Time: 07:00pm – 08:05pm

### **BSSCON NIGHT & DINNER**

Day: Sunday, November 12, 2023 Time: 08:05pm - 10:30pm

### CONTROVERSIES IN THE MANAGEMENT OF SPINAL TRAUMA

Prof. Alexander R. Vaccaro

President of Rothman Institute, Chairman of the department of Orthopaedic Surgery, Co-Director of the Regional Spinal Cord Injury Center of the Delaware Valley and Co-Director of Spine Surgery and the Spine Fellowship program at Thomas Jefferson University Hospital

### PATHOPHYSIOLOGY AND MANAGEMENT OF DEGENERATIVE CERVI-CAL MYELOPATHY: STATE OF THE ART AND FUTURE DIRECTIONS

Dr. Michael Fehlings

Professor of Neurosurgery, Vice Chair Research, Department of Surgery, Gerry and Tootsie Halbert Chair in Neural Repair and Regeneration, Co-Director, Spine Program, McLaughlin Scholar in Molecular Medicine, University of Toronto

## PRINCIPAL OF MANAGEMENT OF ADULT SPINAL DEFORMITY (ASD): ROLE OF OSTEOTOMY, INSTRUMENTATION AND FUSION LEVEL

Dr. Stephen Lewis

Associate Professor, University of Toronto, Canada and Paediatric Orthopaedic Spine Surgeon, Hospital for Sick Children (SickKids)

## A KYPHOSIS CLASSIFICATION TO GUIDE MANAGEMENT AND SURGERY

Dr. S. Rajasekaran

Chairman, Dept of Orthopaedics, Trauma & Spine Surgery, Ganga Hospital, Coimbatore, India & President, Asia Pacific Spine Society (APSS)

## A NEW CLASSIFICATION OF ADULT IDIOPATHIC SCOLIOSIS WITH AN EYE TOWARDS TREATMENT

Dr. Lawrence G. Lenke

Surgeon-in-Chief, NewYork-Presbyterian Och Spine Hospital
Professor of Orthopedic Surgery (in Neurological Surgery), Chief of Spinal Surgery
Chief of Spinal Deformity Surgery, Co-Director, Adult and Pediatric Comprehensive
Spine Surgery Fellowship, Columbia Univ. Dept. of Orthopedic Surgery

## **DAY - 02**

**Date :** Monday, November 13, 2023 **Venue :** Pan Pacific Sonargaon Dhaka

Bangladesh

## SCIENTIFIC SESSION-08: MISS SESSION

**Date**: Monday, November 13, 2023 **Time**: 08:00am – 09:22am

Chairpersons : Dr. Robert Kuru

Dr. Md. Abdul Awal Bhuiyan

Moderator : Dr. Md. Rezaul Karim

	MISS Session			
SI. No	Time	Topic	Speaker & Country	
01	08:00-08:08am	MISS: When to do? What to do? Why to do? When not to do?	Dr. Anindya Basu India	
02	08:08-08:16am	Adopting Endoscopy as a future of Spine Surgery.	Dr. Wongthawat Liawrungrueang Thailand	
03	08:16-08:24am	Inter laminar approach of Endoscopic spine surgery - How is it different?	Dr. Arif Khan Pakistan	
04	08:24-08:32am	Robotics in spinal surgery	Dr. Med. Klaus John Schnake Germany	
05	08:32-08:40am	Percutaneous Transforaminal Endoscopic Lumbar Discectomy under Local Anesthesia: A truly minimally invasive procedure and gold standard for disc surgery.	Dr. Nuruzzaman Khan Bangladesh	
06	08:40-08:46am	Surgical Outcome of Percutaneous Endoscopic Interlaminar Lumber Discectomy Technique in our Perspective	Dr Jibananda Halder Bangladesh	
07	08:46-08:52am	Minimally Invasive Technique for Spine fixation (MISS)	Dr Mohammad Mahbubur Rahman Khan Bangladesh	
08	08:52-09:06am	Q & A		
		Debate: Tubular Vs Endoscopy		
09	09:06-09:13am	Tubular is better	Dr. Ayus Sharma India	
10	09:13-09:20am	Endoscopy is superior	Dr. Anindya Basu India	
11	09:20-09:22am	Chairperson's comment		

## MISS: WHEN TO DO? WHAT TO DO? WHY TO DO? WHEN NOT TO DO?

Dr. Anindya Basu

Consultant Spine Surgeon, Institute of Neuroscience, Kolkata, India

### ADOPTING ENDOSCOPY AS A FUTURE OF SPINE SURGERY.

Dr. Wongthawat Liawrungrueang

Chair of The Spine Division and Head of the Orthopaedics Department at the University of Phayao, Thailand

## INTER LAMINAR APPROACH OF ENDOSCOPIC SPINE SURGERY - HOW IS IT DIFFERENT?

Dr. Arif Khan

Head, Department of Orthopaedic and Spine surgery, Khyber Girls Medical College, Hayatabad Medical Complex, Peshawar, Pakistan and Secretary General, APOA & Immediate Past President, Pakistan Orthopaedic Society, Pakistan

### **ROBOTICS IN SPINAL SURGERY**

Dr. Med. Klaus Johan Schnake

Head, Center for Spinal and Scoliosis Surgery, Malteser Waldkrankenhaus St.

Marien, Erlangen, Germany and

Chair, Spine Section, German Orthopedic and Trauma Society

Abstract 12

### PERCUTANEOUS TRANSFORAMINAL ENDOSCOPIC LUMBAR DIS-CECTOMY UNDER LOCAL ANESTHESIA: A TRULY MINIMALLY INVASIVE PROCEDURE AND GOLD STANDARD FOR DISC SURGERY

M. Nuruzzaman Khan

Asst. Prof. of Neurosurgery, Shahid Sarwerdi Medical College, Dhaka

Lumbar intervertebral disc herniation is a major cause of back pain and sciatica. The surgical management of lumbar disc prolapse has evolved from exploratory laminectomy to percutaneous endoscopic discectomy. Minimally invasive percutaneous transforaminal endoscopic discectomy (PTED) under local anesthesia was started in the late 20th century. As the procedure requires a skin incision of only 8 mm, it is the least invasive procedure at present, and owing to advances in instruments and optics, the use of this technique has gradually spread.

Percutaneous transforaminal endoscopic lumbar discectomy is a safe and effective procedure in lumbar disc prolapse. It has the advantage that it can be performed under local anesthesia with less damage to muscular and ligamentous structures allowing faster rehabilitation, shorter hospital stay and earlier return to function. And there is also significantly less mean blood loss, no complications related to surgical approach, such as dural tear and/or nerve root injury and less postoperative discomfort. The low complication rate makes it the gold standard of disc surgery.

Abstract 13

# SURGICAL OUTCOME OF PERCUTANEOUS ENDOSCOPIC INTERLAMINAR LUMBER DISCECTOMY TECHNIQUE IN OUR PERSPECTIVE

Jibananda Halder<sup>1</sup>, Dipankar Chandra Bonik<sup>2</sup>, Ripan Gosh<sup>3</sup>

<sup>1</sup>Asst Prof of Orthopaedic Surgery,NITOR, <sup>2</sup>Senior Consultant, NITOR, <sup>3</sup>Junior Consultant, NITOR

**Back ground:** Minimally invasive lumber spinal surgeries are becoming more popular and a routin around the world. Although good surgical outcomes have been reported for the endoscopic approach to treat lumber disc herniation. The procedure still appears to be relatively difficult. So operative failures and complications may occur.

**Objective:** To assess the outcome of lumber spinal endoscopic discectomy by H.S.Kim technique as minimally invasive approach in my experience.

Patients and method: Eight consecutive patients proved to have lumber disc prolapse were treated with percutaneous endoscopic lumber discectomy through interlaminar approach discectomy by H.S.Kim technique from July 23 to September 23. All patients included in this study have lumber disc prolapse fulfilled the following criteria. Unilateral radicular pain correlated with MRI findings. Failure of conservative measures for at least 6 wks and the disc prolapse was central or paracentral. Follow up for 3 months postoperative and clinical outcomes were assessed by using VAS score and ODI scale. Patients' satisfaction measured by Modified Macnob Criteria. 3 months post oprative time of return to work.

**Results:** The mean age was 37.5 years, the mean operative time was 2 hrs and the mean length of follow up was 2 months, the mean hospital stay for endoscopic discectomy was 36 hrs. There was a

significant reduction in the severity of back pain and lower limb symptoms measured by VAS, ODI in 87% (6 patients) at 3 months. The recurrence rate was 8.5%, one patient and persistent symptoms without improvement occurred in 5.7% (I patient) who underwent revision surgery. Most patients returned to their previous occupation after surgery at a mean time of 35 days.

**Conclusion:** Endoscopic discectomy by H.S. Kim technique for lumber disc prolapse in properly selected patients were safe and minimally invasive technique.

**Key words:** Endoscopic spine, endoscopic technique, interlaminar approach, lumber discectomy minimally invasive.

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### MINIMALLY INVASIVE TECHNIQUE FOR SPINE FIXATION (MISS)

1Mohammad Mahbubur Rahman Khan, Sarwar Jahan, Kamruzzaman

Dept of Orthopedics & Spine Surgery, National Institute of Traumatology & Orthopedic Rehabilitation (NITOR), Dhaka, Bangladesh.

**Introduction:** Over the past few decades, interest in minimally invasive spine surgery (MISS) has increased tremendously due to its core principle of minimizing approach-related injury while providing outcomes similar to traditional open spine procedures. With technical & technological advancements, MISS has expanded its utility not only to simple spinal stenosis, but also complex spinal pathologies such as metastasis, trauma or adult spinal deformity. In this series we have reviewed techniques, technology & indications of MISS & outline the results in comparison with traditional open spinal surgeries.

**Material and Methods:** In this prospective observational study, a total 24 cases were included from January 2022 to August 2023 through non randomized purposive sampling. All the patients were between 15 to 60 years of age and operated within 10 days of fracture by MISS techniques; short-segment pedicle screw fixation including the fractured vertebral body. Postoperative functional outcome was assessed both clinically by ODI, VAS, ASIA, Denis's work scale and radiologically by Cob's kyphotic angle, kyphotic deformation, Beck index, Bridwell criteria. Postoperative follow up was conducted at 6th week, 3 month & 6 months.

**Results:** The mean age found in 31.42±11.2 years with male predominant (74.19%). Most of the cases were manual workers (51.61%). FFH was the most common cause of injury 80.65%) and L1 was the most common level of injury (54.84%). The mean duration between injury and operation time was 5.45±2.34 days. None of cases deteriorated.

**Conclusion:** The main goal of MISS is to minimize approach-related soft tissue injury and to preserve normal anatomy, which permit a better quality of life through faster postoperative recovery. Over the past few decades, significant technological and technical advancements have made this goal possible.

Chairpersons:

## SCIENTIFIC SESSION - 09 MEET THE MASTERS: THE MOST CHALLENGING CASE THAT I FACED

**Date :** Monday, November 13, 2023 **Time:** 09:22am – 10:02am

Chairpersons: Dr. Ayus Sharma

Dr. Fazlul Hoque

**Moderator** : Dr. Purnendu Biswas

SI. No	Time	Case	Speaker & Country
01	09:22-09:32am		Dr. Ayus Sharma, India/
02	09:32-09:42am		Dr. Robert Kuru Australia
03	09:42-09:52am		Dr. Gabriel Lieu Singapore/
04	09:52-10:02am		Dr. Faizul Hasan UK/

### **TEA BREAK**

Day: Monday, November 13, 2023 Time: 10:02am – 10:20am

## SCIENTIFIC SESSION -10 : PAEDIATRIC SPINAL DEFORMITY

**Date :** Monday, November 13, 2023 **Time:** 10:20am – 11:00am

Chairpersons: Dr. Ranjith Unnikrishnan

Dr. Abdur Rob

Moderator : Dr. Najmus Sakeb

SI. No	Time	Topics	Speaker & Country
01	10:20-10:28am	Osteotomy & Fusion Level in Congenital Scoliosis	Dr. Md. Anowarul Islam Bangladesh
02	10:28-10:40am	Treatment Strategy of Early Onset Scoliosis	Dr. Gabriel Lieu Singapore
03	10:40-10:52am	How I Dealt with AIS?	Dr. K.V. Menon India
04	10:52-11:00am	Q & A	

### **OSTEOTOMY & FUSION LEVEL IN CONGENITAL SCOLIOSIS**

Prof. Md. Anowarul Islam

Professor & Division Head of Spine Surgery
Dept. of Orthopaedics, BSMMU, Dhaka, Bangladesh

### TREATMENT STRATEGY OF EARLY ONSET SCOLIOSIS

Dr. Gabriel Lieu

Head of National University Spine Institute (NUSI), President, CSRS-AP, President, Spine Society of Singapore (SSS)

### **HOW I DEALT WITH AIS?**

Dr. K.V. Menon

Professor, Dept of Orthopaedics, Bharati Vidyapeeth Medical College Hospital Pune, India

## SCIENTIFIC SESSION -11 : ADULT SPINAL DEFORMITY (ASD)

**Date**: Monday, November 13, 2023 **Time**: 11:00am – 11:35am

Chairpersons : Dr. Anindya Basu

Dr. Md. Kamrul Ahsan

Moderator : Dr. K M Rafiqul Islam

	Adult Spinal Deformity (ASD)			
SI. No	Time	Case	Speaker & Country	
01	11:00-11:12am	Adult Spinal Deformity (ASD): When to Operate? How to Operate? When not to Operate?	Dr. Gabriel Lieu Singapore	
02	11:12-11:22am	Treatment strategy for multilevel LCS with Degenerative Scoliosis (In adult deformity session)	Dr. Ranjith Unnikrishnan India	
03	11:22-11:28am	One-stage Corrective Anterior Fusion Only for Cervical Kyphotic Deformity (CKD) in Young Patient: A Case Report	Dr. Fatah Manovito Indonesia	
04	11:28-11:35am	Q & A		

## ADULT SPINAL DEFORMITY (ASD): WHEN TO OPERATE? HOW TO OPERATE? WHEN NOT TO OPERATE?

Dr. Gabriel Lieu

Head of National University Spine Institute (NUSI), President, CSRS-AP, President, Spine Society of Singapore (SSS)

## TREATMENT STRATEGY FOR MULTILEVEL LCS WITH DEGEN-ERATIVE SCOLIOSIS (IN ADULT DEFORMITY SESSION)

Dr. Ranjith Unnikrishnan

Consultant, Orthopaedic Spine Surgeon, Kerala Institute of Medical Science, Trivandrum, Kerala, India

## SURGICAL PLANNING FOR GLOBAL SAGITTAL IMBALANCE CORRECTION IN ANKYLOSING SPONDYLITIS

Dr. Gurudip Das

Associate Professor, Department of Orthopaedics, AIIMS Bhubaneswar, India

## ONE-STAGE CORRECTIVE ANTERIOR FUSION ONLY FOR CER-VICAL KYPHOTIC DEFORMITY (CKD) IN YOUNG PATIENT: A CASE REPORT

Dr. Fatah Manovito

(Department of Orthopaedic Spine Surgery, Ahmad Yani Hospital, Metro, Lampung, Indonesia)

## SCIENTIFIC SESSION -12: TUMOR SESSION

**Date :** Monday, November 13, 2023 **Time:** 11:35am – 12:20pm

Chairpersons : Dr. Chinmay Nath

Dr. Md. Monjurul Hoque Akonda Chowdhury

**Moderator** : Dr. Abdullah Al Mamun Chowdhury

	Tumor Session				
SI. No	Time	Case	Speaker & Country		
01	11:35-11:47am	Management of Primary Bone Tumours in Spine	Dr. Petr Rehousek UK		
02	11:47-11:55am	Solitary Spinal Metastasis: Approach of Management	Dr. Md. Shahidul Islam Akon Bangladesh		
03	11:55-12:07pm	Current trends in Management of Spinal Metastasis	Dr. Petr Rehousek UK		
04	12:07-12:13pm	Diagnostic Dilemma Between Telangiectatic Osteosarcoma (TOS) & Aneurysmal Bone Cyst	Dr. Shahidul Islam Bangladesh		
05	12:13-12:20pm	Q & A			

### MANAGEMENT OF PRIMARY BONE TUMOURS IN SPINE

Dr. Petr Rehousek

Consultant Spine Surgeon, Royal Orthopaedic Hospital (ROH) NHS Trust Birmingham, UK

## SOLITARY SPINAL METASTASIS: APPROACH OF MANAGEMENT

Dr. Md. Shahidul Islam Akon

Associate Professor (Spine Surgery) Dhaka Medical College Hospital Dhaka, Bangladesh

### **CURRENT TRENDS IN MANAGEMENT OF SPINAL METASTASIS**

Dr. Petr Rehousek

Consultant Spine Surgeon, Royal Orthopaedic Hospital (ROH) NHS Trust Birmingham, UK



## DIAGNOSTIC DILEMMA BETWEEN TELANGIECTATIC OSTEOSARCOMA (TOS) & ANEURYSMAL BONE CYST

#### Shahidul Islam

Ad-din Medical College Hospital, Department of Orthopedics & Spine, Dhaka, Bangladesh

**Introduction:** Telangiectatic osteosarcoma (TOS) of the spine is rare accounting only 0.086% of all primary osteosarcoma. In Bangladesh there is no case report of TOS, we describe the clinical, radiological and pathological features and discuss the treatment option of Telangiectatic osteosarcoma (TOS). It was misdiagnosed as Aneurysmal Bone Cyst due to its very similarity in histology.

**Aim of the study:** To present such a rare case like Telangiectatic osteosarcoma (TOS) and making awareness about its diagnostic dilemmas.

Patient and Method: It is an observational study. The study was conducted in Department of orthopedics and Spine Surgery in Ad-din Women's Medical College & Hospital during the period of August2014 to August2019. We done X-RAY, MR Imaging of lumber spine & CT angiogram & biochemical test .MR Imaging reveals – Aneurysmal bone cyst. Then we operated the patient & tissue histology reports is in favour of ABC. But after 6 month of surgery patient came back with recurrence of symptoms. Then we done X-ray & X-ray reveals radiological feature like Sunburst appearance. Then we again took the tissue for biopsy and this report reveals –Osteosarcoma (Telangiectatic osteosarcoma of spine) Then the patient is treated under the guidance of oncologist and got the treatment like chemotherapy & radiotherapy. Patient was survived for 5 years.

**Result:** Though we passed through the roads of diagnostic difficulties at last we reached the correct diagnosis through which patient got the available treatment.

**Conclusion:** The dilemmas associated with the diagnosis of TOS has been emphasized in literature. In particular as ABC is almost indistinguishable from TOS on radiograph. Hence the correct diagnosis rest on a careful histological examination.

## **SCIENTIFIC SESSION -13: TUBERCULOSIS & INFECTION**

**Date**: Monday, November 13, 2023 **Time**: 12:20pm – 01:25pm

Chairpersons: Dr. Gabriel Lieu

Dr. Md. Jahangir Alam

**Moderator** : Dr. Muhammad Sieful Islam

	Tuberculosis & Infection			
SI. No	Time	Case	Speaker & Country	
01	12:20-12:28pm	Current Concept of Management of Tuberculosis.	Dr. Kh. Abdul Awal Rizvi Bangladesh	
02	12:28-12:36pm	Pott's Paraplegia: Neurological Recovery and Prognostic Factors	Dr. Ery Satriawan Indonesia	
03	12:36-12:44pm	Paediatic Caries Spine. Current Understanding and Where We Are Now.	Dr. Amitava Biswas India	
04	12:44-12:52pm	Management Controversies in Denovo Spondylodiscitis	Dr. Md. Rezaul Karim Bangladesh	
05	12:52-01:00pm	Post-Operative Discitis: Recent Update of Management	Dr. Md. Kamrul Ahsan Bangladesh	
06	01:00-01:06pm	Tuberculous Spondylitis in Aceh, Indonesia: Challenges and Strategies to Improve Diagnosis and Management	Dr. Teuku Nanta Aulia Indonesia	
07	01:06-01:12pm	Transpedicular Percutaneous Biopsy of Vertebral Body Lesions: A Safe and Cost-Effective Procedure	Dr. Subrata Saha Bangladesh	
08	01:12-01:25pm	Q & A		

Prayer Break and Lunch
Meeting: EC of BSS with Foreign Faculies

Time: 01:25pm-02:15pm

### **CURRENT CONCEPT OF MANAGEMENT OF TUBERCULOSIS**

Prof. Dr. Kh. Abdul Awal Rizvi

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## POTT'S PARAPLEGIA: NEUROLOGICAL RECOVERY AND PROGNOSTIC FACTORS

Dr. Ery Satriawan

Spine division, Orthopaedic and Traumatology Department, Saiful Anwar General Hospital Faculty of Medicine Brawijaya University – Malang – Indonesia

## PAEDIATIC CARIES SPINE. CURRENT UNDERSTANDING AND WHERE WE ARE NOW.

**Dr. Amitava Biswas** 

Consultant Spine Surgeon, Park Clinic, Kolkata, India

## MANAGEMENT CONTROVERSIES IN DENOVO SPONDYLODISCITIS

Dr. Md. Rezaul Karim

Associate Professor, NITOR, Dhaka, Bangladesh

## POST-OPERATIVE DISCITIS: RECENT UPDATE OF MANAGEMENT

Dr. Md. Kamrul Ahsan

Professor of Spine Surgery, BSMMU, Bangladesh

Abstract 16

## TUBERCULOUS SPONDYLITIS IN ACEH, INDONESIA: CHAL-LENGES AND STRATEGIES TO IMPROVE DIAGNOSIS AND MANAGEMENT

Dr. Teuku Nanta Aulia

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Tuberculous Spondylitis is a significant public health concern in rural areas, posing unique challenges for diagnosis, treatment, and management. This paper presents an overview of the challenges, and potential strategies for addressing tuberculous spondylitis in Aceh, Indonesia. The prevalence of tuberculous spondylitis is notably higher in rural areas due to socioeconomic factors, limited healthcare access, and inadequate awareness about the disease. Delays in diagnosis and treatment initiation are common, exacerbating the disease burden and causing severe morbidity and disability. The challenges in rural healthcare infrastructure, lack of skilled healthcare personnel, limited diagnostic facilities, and low awareness levels underscore the urgency for targeted interventions. Improved surveillance systems, community health education, early detection, and accessibility to diagnostic tools and treatment are vital components for effective management of tuberculous spondylitis in rural areas. Collaborative efforts involving healthcare providers, policymakers, and community stakeholders are essential to reduce the prevalence and impact of tuberculous spondylitis in rural communities, ultimately improving overall health outcomes and quality of life.

**Keyword:** Tuberculous Spondylitis, Pott Disease, Spinal Tuberculosis, Diagnosis, Management, Aceh-Indonesia

Abstract 17

## TRANSPEDICULAR PERCUTANEOUS BIOPSY OF VERTEBRAL BODY LESIONS: A SAFE AND COST-EFFECTIVE PROCEDURE

Dr. Subrata Saha

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**Background:** An open biopsy has minimal sampling error but is a major procedure with its inherent complication and morbidity. Needle biopsy has a high incidence of false negative especially for tumours. Percutaneous biopsy is suitable for histopathologic and bacteriologic evaluation of vertebral lesions, as it is a quick and minimally invasive technique to obtain a specimen from deep structures. The versatility of this efficacious, safe and cost-effective technique is further enhanced by the possibility of using local anaesthesia, with fluoroscopic guidance. Better knowledge of vertebral pedicle morphometry has led to the development of transpedicular fixation techniques in spinal surgery. After experience with these techniques, we have been performing percutaneous transpedicular vertebral body.

**Objective:** To describe the technique of percutaneous transpedicular biopsy carried out under local anesthesia under C-arm fluoroscopy and to evaluate the effectiveness of this method. Methods: Patients who underwent transpedicular biopsy from D 12 to L5 vertebral body lesions were evaluated. Biopsy specimens were obtained by passing a self-designed 1-mm disc ranger instrument through the pedicle into the diseased vertebrae using C-arm fluoroscopy. Specimens were sent for histological and bacteriologic analyses. Results: Biopsy was carried out for vertebral lesions of 50 percent men and 50 % women. 25% lesions were seen in thoracic spine, 75% in lumbar. The pathologic examinations revealed infections in 50%, metastasis in 25 % and non-specific inflammation in 25%.

**Conclusion:** Percutaneous transpedicular vertebral biopsy under local anesthesia is an excellent tool to evaluate the vertebral body lesions, especially in older population and can be performed with minimal morbidity and high diagnostic yield as an outpatient procedure.

Dr. Subrata Saha

## **SCIENTIFIC SESSION-14: COMPLICATION SESSION**

**Date :** Monday, November 13, 2023 **Time:** 02:15pm – 03:00pm

Chairpersons : Dr. Faizul Hasan

Dr. Md. Shah Alam

**Moderator** : Dr. Shagor Kumar Sarker

Complication Session				
SI. No	Time	Topics	Speaker & Country	
01	02:15-02:25pm	Dural Tear -How I Manage it?	Dr. Robert Kuru Australia	
02	02:25-02:33pm	Foot Drops Immediately After Lumbar Decompression & Instrumented Fusion: What to Do?	Dr. Md. Zahidur Rahman Bangladesh	
03	02:33-02:41pm	Postoperative Neurological Deterioration Following ACDF: What's Next?	Dr. Chinmay Nath India	
04	02:41-02:51pm	Signal Loss in NM in a Deformity Correction Surgery: Approach- Step by Step	Dr. K.V. Menon India	
05	02:51-03:00pm	Q & A		

### **DURAL TEAR -HOW I MANAGE IT?**

Dr. Robert Kuru

Consultant Spinal Surgeon, Lake Macquarie Specialist Medical Centre, Gateshead Australia and
President, Spine Society of Australia

## FOOT DROPS IMMEDIATELY AFTER LUMBAR DECOMPRESSION & INSTRUMENTED FUSION: WHAT TO DO?

Prof. Dr. Md. Zahidur Rahman

Ex-Professor, Dhaka Medical College Hospital, Dhaka, Bangladesh

## POSTOPERATIVE NEUROLOGICAL DETERIORATION FOLLOWING ACDF: WHAT'S NEXT?

Dr. Chinmay Nath

Consultant Orthopaedic and Spine, Apollo Multispecialty Hospitals, Kolkata-700054, India

## SIGNAL LOSS IN NM IN A DEFORMITY CORRECTION SUR-GERY: APPROACH- STEP BY STEP

Dr. K.V. Menon

Professor, Dept of Orthopaedics, Bharati Vidyapeeth Medical College Hospital
Pune, India

## SCIENTIFIC SESSION -15 : TIPS & TRICKS SESSION

**Date :** Monday, November 13, 2023 **Time:** 03:00pm-03:30pm

Chairpersons: Kiran Kumar Mukhopadhyay

Dr. Md. Anowarul Islam

Moderator : Dr. Nirmal Kanti Biswas

SI. No	Time	Topic	Speaker & Country
01	03:00-03:10pm	High Grade Lysthesis Management	Dr. K.V. Menon India
02	03:10-03:18pm	Kurokawa Laminoplasty	Dr. Tariq Sohail Pakistan
03	03:18-03:24pm	Free Hand Pedicle Screw Insertion	Dr. Ranjith Unnikrishnan India
04	03:24-03:30pm	Q & A	

### HIGH GRADE LYSTHESIS MANAGEMENT

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### **KUROKAWA LAMINOPLASTY**

Dr. Tariq Sohail

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### FREE HAND PEDICLE SCREW INSERTION

Dr. Ranjith Unnikrishnan

Consultant, Orthopaedic Spine Surgeon, Kerala Institute of Medical Science, Trivandrum, Kerala, India

## SCIENTIFIC SESSION -16: MISCELLANEOUS

**Date :** Monday, November 13, 2023 **Time:** 03:30pm – 04:15pm

Chairpersons : Dr. Gurudip Das

Prof. Mir Hamidur Rahman

**Moderator** : Dr. Md. Sarwar Jahan

SI. No	Time	Topic	Speaker & Country
01	03:30-03:38pm	Surgical Planning for Global Sagittal Imbalance Correction in Ankylosing Spondylitis	Dr. Gurudip Das India
02	03:38-03:46pm	Role of Halo Vest Application in Different Spinal Pathologies	Dr. Amitava Biswas India
03	03:46-03:52pm	Artificial Intelligence in Spine Surgery	Dr. Wongthawat Liawrungrueang Thailand
04	03:52-04:00pm	SSWB-BSS Spine Fellowship Program : My Experience	Dr. Md. Aminul Islam Bangladesh
05	04:00-04:15pm	Q & A	

### **CLOSING REMARKS**

Day: Monday, November 13, 2023 Time: 04:15pm - 04:25pm

ANNUAL GENERAL MEETING
Day: Monday, November 13, 2023
04:25pm - 05:30pm

## SURGICAL PLANNING FOR GLOBAL SAGITTAL IMBALANCE CORRECTION IN ANKYLOSING SPONDYLITIS

Dr. Gurudip Das

Associate Professor, Department of Orthopaedics, AIIMS Bhubaneswar, India

## ROLE OF HALO VEST APPLICATION IN DIFFERENT SPINAL PATHOLOGIES

Dr. Amitava Biswas

Consultant (Spine Surgeon), Kolkata, India

### ARTIFICIAL INTELLIGENCE IN SPINE SURGERY

Dr. Wongthawat Liawrungrueang

Chair of The Spine Division and Head of the Orthopaedics Department at the University of Phayao, Thailand

### SSWB-BSS SPINE FELLOWSHIP PROGRAM: MY EXPERIENCE

Dr. Md. Aminul Islam

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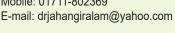
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LM - 62

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LM - 59

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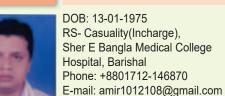
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#### LM - 150



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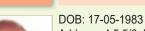
LM - 151



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## **BSSCON 2022**



Inaugural ceremony



**Executive Committee Meeting** 



AGM



Let's have fun with rhythm and dance



**Ending** evaluation



Speech by President





## **BSSCON 2022**



SMAI

Gallery of eminent

Raffle magic

# BSS Cadaveric Workshop, DMC-2023



Assembly of participants



With the chief guest and special guests



Cadaveric demonstration by foreign faculty



Certificate giving ceremony





# BSS Cadaveric Workshop, DMC-2023



Together we move forward



Learning is endless

## **CME**, Mymensing



With Director, MMCH



Crest Handover



Floral Reception



**Boat Tour** 





## Handing over to new committee



With Immediate past president



Inspiration

# **World Spine Day 2023**



Rally and procession at BSMMU



Awareness and motivational speech by Secretery BSS



Speech by Chief Guest



Speech by President





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