

Minimally invasive spinal surgery

In surgery, the concept of “first do no harm” has led to procedural advances to reduce collateral tissue damage during surgical procedures. While in spine surgery, specifically, this thought is not a particularly new one, we remain behind the curve in adoption of minimally invasive techniques.

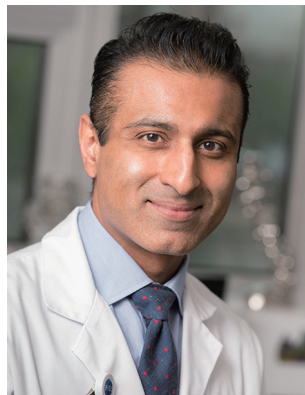
For years, what had held us back was the lack of appropriate surgical technology, fiberoptic illumination, and intraoperative imaging. With the current advances in minimally invasive surgical technologies, it is now on spine surgeons to help future advances.

In this issue, we present the current state of minimally invasive spine surgery and review techniques, complications, and economic and societal considerations in minimally invasive spine surgery. We have carefully selected surgeon leaders in the field of minimally invasive spine surgery from a variety of settings to provide a balanced view.

We hope this focused issue on minimally invasive spine surgery provides readers with information that will not only be new, but also practical, so that they can adopt some of what is within the pages ahead into their practices.

Acknowledgments

None.



Sheeraz Qureshi

Sheeraz Qureshi, MD, MBA

Associate Professor, Orthopaedic Surgery, Minimally Invasive Spinal Surgery, Hospital for Special Surgery, Weill Cornell Medical College, New York, NY, USA.

(Email: qureshis@hss.edu)

doi: 10.21037/jss.2019.06.02

Conflicts of Interest: The author has no conflicts of interest to declare.

View this article at: <http://dx.doi.org/10.21037/jss.2019.06.02>

Cite this article as: Qureshi S. Minimally invasive spinal surgery. J Spine Surg 2019;5(Suppl 1):S1. doi: 10.21037/jss.2019.06.02