

Driving his 1968 Harley-Davidson golf cart down to his favorite place to fish was a painful experience for Jim Szentesy prior to spine surgery at St. Mary Medical Center. But thanks to the minimally invasive AxiaLIF procedure, he was home in 48 hours and spent his summer convalescing on the lake behind his house.



# getting to the bottom of back. pain

by elise sims

If you've ever hurt your back from lifting incorrectly, poor posture, a sports or work injury or have degenerative disc disease, you know it causes debilitating pain that side-tracks your life. But did you know that there are new approaches offered by Community Hospital in Munster, St. Catherine Hospital in East Chicago and St. Mary Medical Center in Hobart that can offer quicker, more permanent relief?

Relieving the pain of that aching back may include minimally invasive surgical interventions, visits to a pain center or outpatient

exploring your options: surgery, pain management or a therapeutic approach

treatments for physical therapy. To find out which treatment method is right for you, learn about some of the latest techniques here and let the experts of Community Healthcare System guide you to a pain-free future.

### shortcut to relief

In some cases, surgery is the only answer to relieving back pain. Thankfully, surgeons at the hospitals of the Community Healthcare System are increasingly able to offer surgical interventions that are less invasive, and offer quicker recoveries.



Hytham Rifai, M.D., neurosurgeon, shows the area of the spine where the new minimally invasive AxiaLIF procedure is beneficial.

Jim Szentesy of Valparaiso knows about those differences. After years of back pain, he almost learned to live with it. “I was in denial about what needed to be done,” he says. “But I knew another back surgery was in my future. I just dreaded that.”

Szentesy always remembers having back pain. “I used to have regular muscle spasms back in my younger years,” says the 55-year-old millwright. “Then my discs began to deteriorate and the pain became progressively worse.”

After undergoing a microdiscectomy five years ago to relieve pain from a bulging disc, Szentesy knew that if that didn’t work, major

spinal fusion surgery would be his only other option. “I didn’t want that,” he says. “I knew friends and coworkers who had it done, and they were laid-up for three or four months with painful recoveries. I thought I would rather live with my daily back pain than go through that. So when Dr. Rifai told me I needed spinal fusion, I felt like he kicked my feet out from under me. I was very depressed.”

Fortunately for Szentesy, in the five years since his first operation, a new minimally invasive procedure was developed that would redefine his impression of spinal fusion surgery.

### spinal fusion solution

Called AxiaLIF (Axial Lumbar Interbody Fusion), this new minimally invasive alternative to major spinal fusion surgery allows patients to recover much more quickly with much less pain than ever before.

“It’s almost unheard of that someone would be up and walking the next day after back surgery, but that’s what is possible with this procedure,” says Hytham Rifai, M.D., neurological surgeon on staff at St. Mary Medical Center in Hobart. “We make much smaller incisions and avoid cutting through major tissue or nerves than with traditional lumbar fusions.”

With AxiaLIF, surgeons access the lower back through a 1-inch incision next to the tailbone. A small tube is inserted and a channel created through which the procedure is performed. Guided with the use of X-rays, surgeons remove the diseased disc and insert bone growth material in its place. This material helps stimulate bone growth over time, eventually allowing the vertebrae to “fuse.”

To restore and maintain the space between the vertebrae while the fusion takes place, an AxiaLIF implant is inserted, which also helps stabilize the spine. The entire surgery takes only an hour or two, and there is very little blood loss as compared with traditional methods. Patients, such as Szentesy, are usually up and walking within 24 hours and usually home within two or three days.

“Prior to AxiaLIF, we weren’t able to access the L5-S1 or L4-L5 vertebrae without major surgery because they were located behind the pelvic bone,” says Rifai. “By creating a small channel next to the tailbone, and using X-ray to navigate

About **70 to 75 percent** of the patients who come in are seeking relief from chronic lumbar or lower back pain. Many of these patients are sent by spinal surgeons who want to try more conservative options before putting a patient through surgery.

through the spine, we're able to perform this surgery with little disruption to the spine or surrounding tissue."

In addition to Rifai at St. Mary Medical Center, neurosurgeons Marc Levin, M.D., and Yevegniy Khavkin, M.D., perform the procedure at Community Hospital in Munster.

"In a few short years, this will be the standard in spine fusion surgeries," says Levin. But he cautions that while this and many other spinal surgeries are becoming less invasive and allow patients to return to their normal lifestyles more quickly, they should still be considered as a last resort.

"Patients should exhaust all other options to alleviate back pain before committing to surgery," says Levin. "Only when physical therapy, medications or other methods fail to be effective, should surgical solutions be explored."

### finding the source

If you suffer from back pain, but are looking for a more conservative approach to treatment before surgery, you may want to consult with an interventional pain specialist on staff at the hospitals of Community Healthcare System. Pain specialists practice a field of medicine that's evolved in the past 20 years to provide effective relief for arthritis of the spine, degenerative disc disease, acute disc herniation and more.

Because of its relatively new arrival on the medical scene and despite the fact that pain management is covered by most insurance plans and Medicare and Medicaid, pain management has missed the attention of many who could benefit from it.

"Pain specialists are committed to finding relief for their patients and continue to work to find solutions that provide the quality of life our patients deserve," says Shaun Kondamuri, M.D., interventional pain specialist and medical director of the Pain Center at St. Mary Medical

Center in Hobart. "It is important to seek a physician who has had specialized training beyond the field of anesthesiology who dedicates the practice to the diagnosis and treatment of chronic pain and takes a comprehensive approach to pain management."

About 70 to 75 percent of the patients who come in are seeking relief from chronic lumbar or lower back pain, Kondamuri says. Many of these patients are sent by spinal surgeons who want to try more conservative options before putting a patient through surgery. Other back patients are those who already have had back surgery that didn't help—whether through misdiagnosis, poor surgical technique or a surgery that was successful, by all accounts, yet fails to offer relief.

Patients who come to the pain center have a distinct advantage because not only can interventional pain specialists provide a diagnosis, but they also treat specific causes of lower back pain, according to Brian McClenic, M.D., interventional pain specialist and medical director of pain management services at Community Hospital in Munster and St. Mary Medical Center in Hobart.

"Depending upon the cause of their pain, interventions can range from physical therapy to injections to implantable devices," says McClenic. For example, kyphoplasty or vertebroplasty can be helpful for pain due to vertebral body fractures. Both procedures are relatively new minimally invasive options for compression fractures that provide effective relief.

Other diagnostic procedures can include X-ray studies, magnetic resonance imaging and electromyography. Interventions include injection techniques, such as epidurals, selective nerve root blocks, facet joint injections and intrathecal narcotic pumps, says McClenic. >



Shaun Kondamuri, M.D.,  
interventional pain specialist



Brian McClenic, M.D.,  
interventional pain specialist

## “Not all lower back pain is the same, so treatment needs to be customized to each individual.”

The goal of the pain center is to give patients relief from their pain, and more importantly, get them back to activities of daily living, says Kondamuri. We can make life better.

### group approach to relief

A complementary approach to pain management is offered by the Daybreak Center for Behavioral Health at St. Catherine Hospital in East Chicago. Monthly pain management group therapy sessions are held from 9 to 10:30 a.m. every second and fourth Tuesday of the month. Therapy is designed for those with chronic pain and offers an opportunity for participants to learn a wider variety of effective coping skills, lively discussion with others who struggle with chronic pain and alternative techniques for pain control.

### change for the better

Your doctor also may prescribe physical therapy on an outpatient basis as a first line approach

to back pain. The physical therapist will assess your condition by, first, listening to your medical history (your age, your pain level, location of pain, your body mass index, or BMI, previous level of function versus current level of function and if you exercise regularly) and how long your back has been causing pain (if it's an acute or chronic condition). Then, the therapist will look at objective measures—your posture; range of motion of your spine, hips and knee; your spine's mobility; and the strength of the muscles that surround the spine (the back muscles, abdominals and gluteus as well).

“Not all lower back pain is the same, so treatment needs to be customized to each individual,” says Jan Duncker, DPT, MPA, supervisor of outpatient physical therapy at Community Hospital in Munster. “We can help you decrease your immediate pain and provide education on improving your body mechanics, posture



Pain management group therapy sessions are held semimonthly at the Daybreak Center for Behavioral Health at St. Catherine Hospital. Daybreak Coordinator Carmen Rodriguez, ACSW, LCSW (center) facilitates the group where participants learn a variety of coping skills, alternative techniques for pain control and can relate to others who struggle with chronic pain.

and making lifestyle changes, such as initiating exercise, to lower your BMI and reduce risk of reoccurrence.”

Treatment options are tailored to individual needs and may include flexibility and stretching exercises, strengthening exercises, spine stabilization training, soft tissue and joint mobilization, biofeedback, movement and positioning strategies or aerobic/cardiovascular conditioning.

“After the pain is gone, some people don’t think they need to continue to practice preventive measures,” Duncker says. “But, it’s permanent behavior modification that gets the overall best results.”

## spine specialists

LifeSpine™ and its newer component, ArthritiSpine™ for arthritis of the spine, are offered at the Outpatient Rehabilitation Center of St. Mary Medical Center in Hobart. Both programs also provide relief through evaluation, customization and education.

LifeSpine educates people on how to prevent injury and protect the spine during daily activities. Programs focus on the lower spine or upper spine and are designed specifically to help those with back pain understand the reasons for their disorder, customize treatment and provide education to prevent injury and protect the spine.

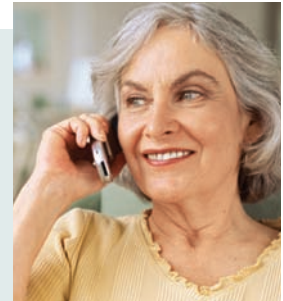
“Often, we retrain people how to do the little things that get them through their everyday activities. Whether it’s how you swivel to answer the phone at work, or the way you lift your grandchildren, you need to be careful and practice the proper way to do things,” says Frank Kilian, MBA, P.T., director of outpatient rehabilitative services, St. Mary Medical Center in Hobart.

## education is key

Not only is the message of proper body mechanics taught to individuals within the physical therapy departments of all three hospitals, but it’s also taken out into the community in the form of preventive education. Besides physical therapy outpatient treatment, Community Healthcare System therapists provide education for groups at increased risk of back pain, such as truck drivers, transcriptionists, patient caregivers and even their own co-workers.


## no pain, your gain

Patients seeking relief for their back pain may benefit from consultation with an interventional pain medicine physician. Not only can interventional pain specialists provide a diagnosis, but they also treat specific causes of back pain, finding a solution that is custom designed to improve quality of life. For a board-certified pain specialist on staff at the hospitals of Community Healthcare System—Community Hospital in Munster, St. Catherine Hospital in East Chicago or St. Mary Medical Center in Hobart—visit our website, [www.comhs.org](http://www.comhs.org) or call **219-836-3477** or toll-free **866-836-3477**.



“At the hospital, we provide education right from the start,” says Maria Oar, P.T., supervisor of physical and occupational therapy at St. Catherine Hospital in East Chicago. “At employee orientation, we discuss body mechanics, go over the anatomy of the spine, posture and sitting and lifting techniques. And, to take it a step further for our nurses and patient care techs, we provide a lab session and ongoing training on lifting and bending.”

Out in the community, physical therapists, as consultants to local businesses, will meet with employers and employees to assess on-the-job risks to the worker. They look at how they can modify three variables—the workers, the work and the workstation—to come back with additional information that provides solutions and leads to better back care and less lost workdays.

We also provide free, educational presentations to the public, Oar says. 

## learn more

Specialized physical therapy is available through the hospitals of Community Healthcare System by physician referral. For more information on upcoming educational programs on back and spine care, call **219-836-3477** or toll-free **866-836-3477**.

call