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**Anterior plate osteosynthesis
for the treatment of cervical spine disorders**

*(Osteosynteza przednia w leczeniu
chorób odcinka szyjnego kręgosłupa)*

The group of 29 patients with cervical spine disorders due to spine injury in 16 cases and degenerative disease in 13 cases underwent surgical procedure with interbody fusion and anterior plate osteosynthesis. All patients were operated via anterior approach to the cervical spine with Smith-Robinson technique of interbody fusion. The internal osteosynthesis was performed using Caspar plates with bicortical screws and Orion system plates with unicortical locked screws. The patients were examined in short postoperative period and at the time of discharging from the ward. Follow up estimation ranged from 3 to 20 months.

Conclusions:

1. Anterior plate stabilization facilitates and shortens the period of the in-healing

of the graft due to elimination of micromotions in stabilized segments of cervical spine.

2. This method eliminates complications such as graft and vertebral body collapsing, nonunion, instability and kyphotic angulation of the spine.
3. It allows the patients to become mobilized just after surgery without rigid external stabilization.
4. Patients with paralysis and extensive paresis can be started on early rehabilitation.

Anterior plate osteosynthesis with interbody fusion is a method of choice the modern treatment of cervical spine disorders.

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