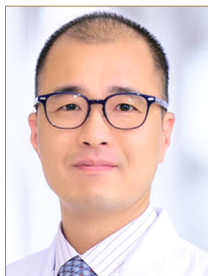




Editorial

Surgical Timing in Lumbar Disc Herniation Surgery



Corresponding Author

Chi Heon Kim

E-mail: chiheon1@snu.ac.kr

<https://orcid.org/0000-0003-0497-1130>

Department of Neurosurgery, Seoul National University Hospital, Seoul National University College of Medicine, Seoul, Korea

See the article "Timing of Surgery in Tubular Microdiscectomy for Lumbar Disc Herniation and Its Effect on Functional Impairment Outcomes" via <https://doi.org/10.14245/ns.1938448.224>.



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In response to article titled "Timing of Surgery in Tubular Microdiscectomy for Lumbar Disc Herniation and Its Effect on Functional Impairment Outcomes,"¹ lumbar disc herniation (LDH) is a major spinal degenerative disease. The treatments are largely categorized as exercise, medication, intervention and surgery. Pain is the major symptom in most cases and it could be controlled with relevant treatments. Nonsurgical treatment is successful for majority of patients, but surgery is required for medically intractable cases. The treatment strategy looks simple. However, it is not straightforward. Surgeons operate LDH when non-surgical treatment fails or major neurological symptom persisted over 6 weeks and the surgical outcomes are satisfactory in more than 90% of cases.² However, 6 weeks of conservative period is subject to make misunderstanding among health care providers, physicians and patients and limits physician (surgeon)'s discretionary decision.

The surgical techniques could be broken down into standard open discectomy, tubular retractor assisted discectomy or endoscopic surgery and the surgical outcomes of those techniques did not seem to be different based on previous studies.³⁻⁶ However, the efficacy of surgery may be mostly evident only for a short-term follow-up period (< 2 years).⁷ This may be one of major reasons for the patients to be reluctant to get surgery when it is really necessary. However, more often than not, we encounter patients ended up in suffering from a chronic pain, even after successful removal of LDH by surgery. There are many factors influencing on the outcomes, such as duration of symptom, accompanying neurological deficit, psychological factor, occupation, and so on.⁸ If we failed to address LDH in a timely manner, the chance for a successful outcome would go down either with surgery or non-surgical treatment.⁹ Therefore, we have to figure out how to address LDH relevantly, especially with surgery.^{2,7} In this regards, this study is meaningful in adding information regarding the issue of "When should we operate on LDH?" I appreciate the authors' effort. However, the evidence level of this study would be level IV, considering retrospective subgroup analysis for prospectively collected data. In addition, the method to assess duration of symptom may subject to recall bias. I hope the readers to acknowledge the limitations of this study.

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Title: Paul, the artist's son, ten years' old
Artist: Pablo Picasso
Year: 1923
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