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USE OF ANTIBIOTICS-IMPREGNATED CEMENT SPACERS FOR THE TREATMENT OF POSTOPERATIVE INFECTION FOLLOWING ACDF

Introduction/Aim

We report a case of postoperative infection following ACDF in which antibiotics-impregnated cement spacers placed in the disc space resulted in successful infection control.

Materials and Methods

A 57-year-old man underwent C5-6-7 ACDF for cervical spondylotic myeloradiculopathy. He had a history of neck radiotherapy for the treatment of diffuse large B cell type lymphoma 10 years prior to ACDF. Autogenous iliac tricortical bone grafts were inserted in the disc space and plate and screws were applied. After surgery, patient had surgical site infection with severe soft tissue swelling complicating to mediastinitis. On fifth day after the index operation, reoperation was done. Previously inserted plate and screws along with bone grafts were removed and a spacer made of bone cement mixed with vancomycin and cefotaxim was inserted in each disc space. Systemic vancomycin was administered. Nine days later, the spacers were replaced with new ones, which were removed 14 days later and new autogenous bone grafts were placed.

Results

The infection was successfully controlled without any evidence of persistent infection and myeloradiculopathy symptoms were improved at 6 month follow-up.

Discussion

Antibiotics-impregnated cement spacers maintained disc height, preventing soft tissue contracture in kyphotic posture. And they helped maintain high concentration of local antibiotics in this patient in whom systemic antibiotics might not be effective because of poor circulation following prior radiation therapy.

Conclusions

Antibiotics-impregnated cement spacers are effective and easy-to-use tools for the management of infection following ACDF.