

## Choosing a spinal surgeon

**Question: Orthopaedic Surgeon or Neurosurgeon?**

**Answer: A competent Spinal Surgeon**

- ◆ Orthopaedic Surgery and Neurosurgery overlap in the spine
- ◆ The important thing is to find a competent 'spinal surgeon' who is a fellow of the Royal College of Surgeons (FRCS)
- ◆ Many surgeons seeing spinal problems can only do the most common procedures on the spine and some have no specialist training in this area and do not do spinal surgery
- ◆ Only a minority of surgeons who do spinal surgery, operate exclusively on the spine in their elective practice
- ◆ In large centres eg major teaching hospitals, specialist spinal surgeons have special interests in particular aspects of spinal surgery eg adult scoliosis, spinal tumours

**The answer to the question**

*"shall I go to an orthopaedic surgeon or a neurosurgeon for my spinal problem?"*

has to be

*"go to the person that treats it best"*

**- and that is someone that is competent and trained in all aspects of spinal surgery – regardless of their background.**

In the UK there are many specialities that overlap with others, because of the nature of the problem treated or the anatomical area eg hand problems are seen by a plastic surgeon or an orthopaedic surgeon. The key is to see a properly trained, competent hand surgeon, regardless of whether they are a plastic surgeon or an orthopaedic one.

The spine is made up of a *bony* vertebral column with the spinal cord and spinal nerves within and this is the reason the crossover occurs. One could, and unfortunately some people still do, state that a neurosurgeon should deal with the 'soft bits' and the orthopaedic surgeon the 'hard bits' but apart from a few exceptions this is quite inaccurate. The two are intrinsically linked and to avoid problems one must have a complete understanding, not just a one-sided view.

### The differences in surgical training

There are many more orthopaedic surgeons than neurosurgeons in the UK but only a few profess to have an interest in the spine and of these only a few exclusively do spinal surgery. An orthopaedic trainee may not do any spinal surgery whatsoever, whereas it is compulsory for a neurosurgeon in training to be able to do a microdiscectomy or decompression (for example). This does not mean that all neurosurgeons can operate on the spine and are familiar with all aspects of spinal surgery - a neurosurgeon may be able to do a microdiscectomy but may be a specialist in brain tumours. Some neurosurgeons do specialise in spinal surgery and are able to deal with most (if not all) aspects of spinal surgery from head to toe but the majority do not. Likewise, most orthopaedic surgeons who do some spinal surgery are not able to assess or treat all aspects of a spinal problem. This may be due to a lack of personal experience or facilities available in the hospital in which he or she works.

The important thing is to find an appropriately trained and well-read spinal surgeon. Too often people describe themselves as being a spinal surgeon because they can treat two or three conditions in the spine. This may be true, and they may do it very well, but do they have a full understanding of the spine and are they able to deal with all the other aspects?

## Where to find surgeons

Regardless of the individual expertise, one also needs the infrastructure in which to practice.

Neurosurgery provision tends to be located in major teaching hospitals away from the district general hospitals where one finds many orthopaedic surgeons. Surgeons based in smaller hospitals may be excellent surgeons but not able to deal with all spinal conditions because the hospital in which they work does not have the necessary infrastructure. In a teaching hospital, neurosurgeons and orthopaedic surgeons co-exist and will ideally work together to provide a comprehensive service – often there will be team of surgeons providing spinal care and each may have a super-specialised interest in one particular aspect of the spine eg spinal tumours or spinal deformity.

Unfortunately a large number of surgeons who see spinal problems have no specific interest or training in the spine and are not able to operate on spinal problems. Those surgeons who perform spinal surgery should be able to perform a microsurgical discectomy or decompression. Those professing to be a spinal surgeon should be able to fuse the spine and perform other procedures such as joint replacement, interspinous spacers, interbody cages and stabilisation, as well as non-operative methods of treatment, if required. Unfortunately this is not always the case and one may see a spinal specialist (orthopaedic or neuro) who cannot do such procedures or has no specialist training. It is absolutely integral to the role of a spinal surgeon to be able to deal with all problems that arise, or be able to foresee them and refer onwards if necessary to someone who has the appropriate expertise. In a large centre with many surgeons this is easily possible whereas in a smaller hospital it requires good communication and established referral pathways.

Traditionally, neurosurgeons have stayed away from complex spinal deformity and orthopaedic surgeons have stayed away from intradural (nerve) surgery and this tends to remain the case with a few exceptions. However, to understand and recognise different spinal problems one must be adequately trained in all aspects. At present surgical trainees that wish to practice spinal surgery will go away to a specialist centre in spinal surgery (often abroad) to specialise at the end of their training to acquire the necessary skills. Surgeons are registered with the GMC as an orthopaedic or a neurosurgeon and no mention is made of special interests. It may therefore require a little more research (eg on the internet) to find out more about that surgeon and what their interests are.

In general, the ideal place to find your spinal surgeon is in a centre that has neurosurgeons and orthopaedic surgeons working closely together in the correct environment with the correct facilities and the correct training.

## How to find a surgeon

The tried and tested methods of finding a surgeon are probably the best – word of mouth, professional recommendation – not entirely different from finding a plumber! You may be able to research your surgeon on the internet or ask people in ‘the know’ but nothing really beats personal recommendation or directly asking the surgeon about their training, expertise, experience and back-up facilities. The only proviso is that one must not forget that what works for one may not work for another and this emphasises the need for an open-minded spinal surgeon who is well trained in all modalities of the speciality.

Finally, the most important thing to emphasise is that you do not see a neurosurgeon or an orthopaedic surgeon but a spinal surgeon who is sensible, has an excellent training, keeps abreast of modern innovations and knows their limitations.

### Relevant Information

BackCare Fact sheets: Spinal Surgery  
BackCare booklets: Should I have spinal surgery?  
Useful websites: British Association of Spinal Surgeons [www.spinesurgeons.ac.uk](http://www.spinesurgeons.ac.uk)  
Dr Foster [www.drfoosterintelligence.co.uk](http://www.drfoosterintelligence.co.uk)