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AJNR Am J Neuroradiol 2009, 30 (10) E155

doi: <https://doi.org/10.3174/ajnr.A1762>

<http://www.ajnr.org/content/30/10/E155>

This information is current as
of August 17, 2025.

BOOK REVIEW

Balloon Kyphoplasty

S. Becker and M. Ogon, eds. New York: Springer Wien; 2008, 165 pages, 80 illustrations, \$139.00.

Balloon Kyphoplasty is 165 pages long and has numerous and appropriate illustrations. It covers the technique for balloon-assisted vertebroplasty or kyphoplasty well and would serve as a good text for someone who wishes to get “how to” information on this procedure; however, I did not find other parts of the book particularly helpful.

Discussions on patient selection are controversial. I recently had the opportunity to hear Dr Becker speak at an international meeting and then to visit with him afterward. The book is much more aggressive in recommending balloon-assisted vertebroplasty than is Dr. Becker's present stance on the procedure. He explained that the book was conceived and written beginning more than 2 years ago, and he has modified his approach to compression fractures in the interim. He now uses predominately standard vertebroplasty most of the time, reserving the balloon-assisted procedure for very acute fractures (less than 2 weeks old) and complex cases such as burst fractures. I would generally agree with this latter position. This is not, however, the position of the book.

I found the biomechanics portion of the book lacking. This is a book specifically about kyphoplasty. The biomechanics section focuses on standard vertebroplasty. It gives no real evaluation of kyphoplasty or a quantitative comparison of the biomechanics of the 2 techniques. Although the book is a 2008 issue, the biomechanics information is old with few references beyond 2004. It does not discuss issues that are more recently reviewed in this area, such as height restoration in standard vertebroplasty versus kyphoplasty (which now seems to be about equivalent in most cases) or lack of durability of height gained in kyphoplasty (height gained seems to be less well

maintained than vertebral height after standard vertebroplasty). There is some unusual focus on a proprietary device that seems more like a commercial than science.

The conclusions of the book include the following: 1) Both kyphoplasty and vertebroplasty are very successful pain-relieving methods; 2) there is no essential difference between the curing properties of the various cements; 3) kyphoplasty is not greatly different from vertebroplasty; and 4) with respect to new fractures, it is still unclear whether there are any differences between the 2 techniques. These conclusions give more clarity to why Dr Becker seems to have modified his practice to use more standard vertebroplasty now than kyphoplasty. It is unfortunate that a reader would be unable to discern that point from the book perspective alone.

The editors have their practice in Europe. The reimbursement issues in the European Union are different from those in the United States. There is no focus on the appropriateness of the use of kyphoplasty with respect to vertebroplasty based on cost. It has long been known that kyphoplasty is many times as expensive as standard vertebroplasty. This book seems to offer no information that would lead the reader to understand why health care providers should choose to spend (or waste) the differential costs on this procedure.

As previously stated, this book offers substantial information on how to perform balloon-assisted vertebroplasty, but it lacks substantial proof of the advantage of the procedure over standard vertebroplasty or why one should choose to use kyphoplasty, except in very limited circumstances.

DOI 10.3174/ajnr.A1762

