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## Spine expert explains Manning's surgery options

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INDIANAPOLIS - Peyton Manning's season remains an uncertainty because of the neck surgery he had four months ago. But a central Indiana spine expert says the star quarterback had other options.

Dr. Rick Sasso of the Indiana Spine Group says Manning opted for a procedure that is different from what most patients get. He says while most patients do well, Manning is struggling.

Just last week, the Colts quarterback was cleared for limited action after neck surgery in May. But after reporting soreness in his back, he's now out for the season opener in Houston Sunday and is undergoing more tests.

Seeing the slow recovery from cervical disc herniation with nerve dysfunction repair is curious for Sasso.

"I think the biggest issue for those of us who are spine surgeons that do this on a daily basis that this is such a successful operation. Most people do extremely well with this operation. The problem is there are a few patients who don't do well and, unfortunately, we have an incredibly high-profile person here who has not done very well," Sasso said.



Dr. Rick Sasso, a spine expert, says Peyton Manning had other options for neck surgery.



Manning is recovering from surgery in May.

Manning went to Northwestern in Chicago, where Dr. Richard Fessler attempted to relieve the quarterback's pain by approaching a reported herniated disc from the back of his neck. The more common approach is through the front.

Sasso did not examine Manning, but as a leading spinal researcher, he knows the data.

"Those of us that do these operations are familiar with both approaches and, in fact, other approaches to accomplish the same thing. I know his surgeon in Chicago very well, he's a good friend of mine. He's a great guy, he's a very, very good guy," Sasso said. "But this is sort of his thing, he's known for this, but the problem is, when you look at the studies academically, an anterior versus a posterior operation, clearly, anterior operations have a higher success rate."

Sasso says the rear approach cuts through muscle and aims to relieve the nerve. The front approach is a fusion, relieving the nerve and stabilizing the spine.

"The other real significant advantage is, the disc has collapsed significantly, usually before the disc herniates and that narrows the tunnel where the nerve runs out and so we do the operation from the front, we jack that disc back where it belongs, opening the tunnel where the nerve runs out and keep it in that position, put in a little bone graft and a plate," he said. "When we go in through the back, we don't have the ability to do that and, actually, we can have more problems with more bone spurs forming and more instability, actually take part of the joint, which you have to do going in from the back."

However, Sasso says if there is a bone spur on the back of the nerve, that would be one reason for an approach from the back of the neck.

With two neck procedures down and issues remaining, the Colts say, as of now, no additional surgery for Manning is scheduled. If one is, Sasso predicts a frontal fix.