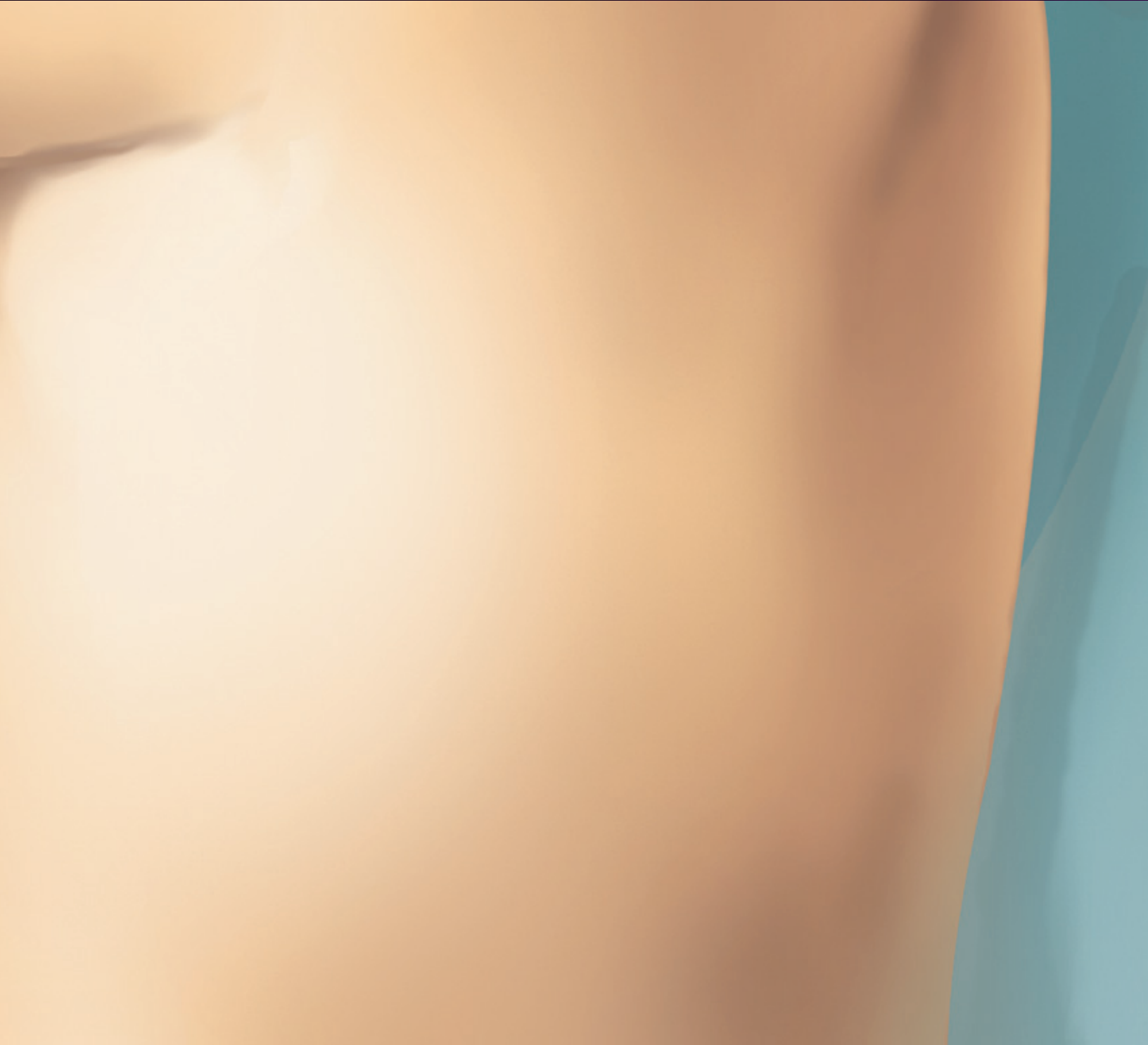




**XLIF**  
CORPECTOMY



# XLIF Corpectomy

## Conventional Surgery. Minimal Disruption.

Introducing XLIF Corpectomy – a safe, reproducible, and minimally disruptive surgical solution for treating tumor and trauma patients.

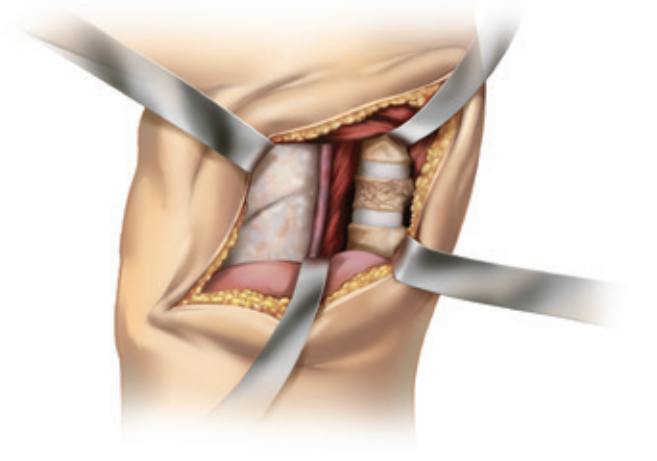
NVJJB/M5 intraoperative monitoring, MaXcess Access system, X-CORE Expandable VBR, conventional instruments, multiple fixation options, and biologics are seamlessly integrated to provide anterior column reconstruction with minimal exposure-related morbidity.

XLIF Corpectomy is a revolutionary, yet conventional, alternative to traditional open thoracotomy procedures.

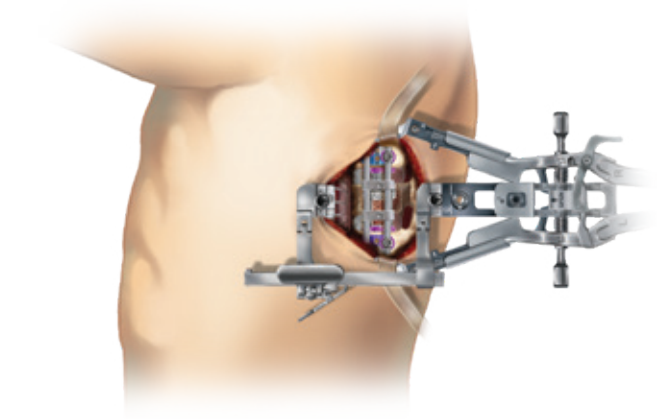
### XLIF CORPECTOMY

- Conventional surgery through a less-disruptive approach
- Minimizes exposure-related patient morbidity
- Seamlessly integrated instrument, implant, and fixation platforms
- Maximum anterior column stability with X-CORE Expandable VBR Surgeon-driven neuromonitoring with NVJJB/M5

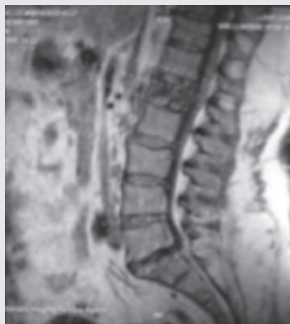
### TRADITIONAL APPROACH



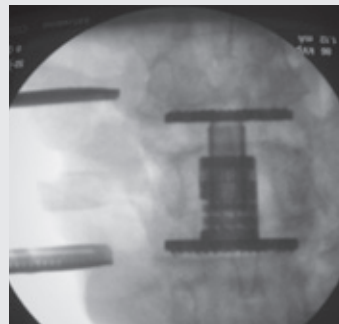
### XLIF APPROACH



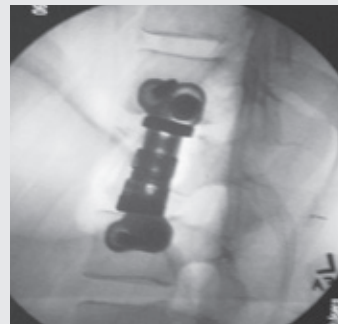
## Case Examples



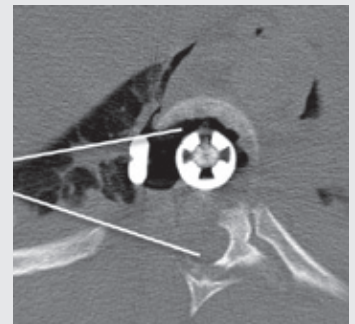
**Fig. 1a.** 64-year-old male with metastatic tumor at L1. Patient experienced increasing back pain and neurological symptoms.



**Fig. 1b.** Patient was treated with an L1 corpectomy and X-CORE Expandable VBR (vertebral body replacement).



**Fig. 1c.** Through the same lateral approach, the Travers anterior fixation system was used for supplemental fixation.



**Fig. 2.** The MaXcess retractor provided direct access to the pertinent pathology, and allowed for cord manipulation and decompression. The extent of the anterior/lateral resection is depicted on the axial fluoro image.

# MAS Platform – Seamlessly integrated to provide safe and reproducible XLIF Corpectomy



## MAXCESS ACCESS SYSTEM

- Optimal exposure for anterior column reconstruction
- Superior visualization
- Split-blade design allows for maximum instrument angulation



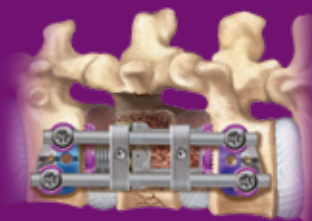
## TRAVERSE PLATE

- Compression and Fixed Plate options
- Integrated screw locking mechanism
- Instrumentation designed for easy implantation



## NVJB/M5

- *Stimulated EMG* – Dynamic monitoring with both real-time nerve proximity and directionality
- *Free Run EMG* – Assists in avoiding nerve root irritation
- *Motor Evoked Potentials* – Rapid assessment of spinal cord motor function and integrity
- *Somatosensory Evoked Potentials* – Detection of potential neural and vascular compromise via sensory pathways



## SPHERX II ANTERIOR DUAL ROD SYSTEM

- Contoured Staples require minimal real estate
- Low-profile, single-step locking cross connectors
- MaXcess exposure-compatible instrumentation



## X-CORE EXPANDABLE VBR

- The first VBR optimized for the XLIF approach
- Customizable core and endcap options designed to maximize anterior column stabilization
- Superior instrumentation for unparalleled safety and ease of use



## OSTEOCEL PLUS

- Advanced allograft bone matrix, containing viable osteopotent cells, including mesenchymal stem cells and osteoprogenitor cells
- Provides three physiological components required for fusion – osteogenesis, osteoinduction, and osteoconduction

## DIRECT ACCESS TO PATHOLOGY

*“XLIF Corpectomy offers the most direct access to the majority of pathology and an optimal exposure for cord manipulation. The platform provides maximum anterior column stabilization with X-CORE Expandable VBR that spans the ring apophysis, along with anterior fixation options that are designed to fit through the retractor. This is truly a seamlessly integrated system from start to finish.”*

*William D. Smith, M.D.*

Western Regional Center for Brain & Spine Surgery  
Chief of Neurosurgery at University Medical Center  
Las Vegas, NV

## TUMOR PATIENTS

*“XLIF Corpectomy allows me to effectively excise tumors, decompress the spinal cord, and restore anterior column stability. This revolutionary approach has reduced my patients’ exposure-related morbidity, which allows them to recover faster and to continue other cancer treatments.”*

*William Taylor, M.D.*

Clinical Professor of Surgery  
Division of Neurological Surgery  
University of California San Diego  
San Diego, CA

## TRAUMA PATIENTS

*“XLIF Corpectomy significantly reduces the exposure-related morbidity of my trauma patients. The MaXcess retractor provides the access required to directly visualize the pertinent anatomy, decompress the spinal cord, and stabilize anteriorly, all through a minimally disruptive exposure.”*

*Christopher R. Brown, M.D.*

Assistant Professor  
Orthopaedic Surgery  
Duke University  
Durham, NC

## CONVENTIONAL TECHNIQUE


*“The access provided through the MaXcess Access system allows me to stabilize the anterior column and decompress the spinal cord using conventional instruments and conventional technique. While my surgical goals are achieved, the exposure-related morbidity is greatly reduced and my patients recover faster.”*


*Luiz Pimenta, M.D., Ph.D.*

Instituto de Patologia da Coluna  
São Paulo, Brazil



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