Reply to the letter to the editor of R. Q. Knight concerning “Does minimally invasive lumbar disc surgery result in less muscle injury than conventional surgery? A randomized controlled trial” by M. Arts, R. Brand, et al. (2011) Eur Spine J 20(1):51–57. doi:10.1007/s00586-012-2491-9

Mark P. Arts

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The rationale of minimal invasive lumbar disc surgery was less muscle damage, less back pain, shorter hospitalisation, and faster recovery and resumption of daily activities. Based on our study, however, microtubular discectomy (MTD) did neither result in reduced muscle damage and low back pain nor faster speed of recovery compared to the conventional discectomy. In both procedures the nerve root was decompressed with consequent similar relief of radicular leg pain. Interestingly, patients treated with MTD reported higher scores of low back pain during the follow-

up period compared to patients treated with conventional discectomy. Therefore, we agree that MTD should not replace conventional discectomy in patients with lumbar disc herniation. Possibly, minimal invasive surgery is superior to conventional open surgery in patients with instrumented spinal fusion, although it should be evaluated in large randomised controlled trials prior to implantation on a large scale.

Conflict of interest None.

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M. P. Arts (✉)
Department of Neurosurgery, Medical Center Haaglanden,
PO Box 432, 2501 CK The Hague, The Netherlands
e-mail: m.arts@mchaaglanden.nl