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### **Incidence of Dysphagia of Zero-Profile Spacer versus Cage-Plate after Anterior Cervical Discectomy and Fusion: A meta-analysis**

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**Background:** The purpose of this study is to evaluate the rate of Dysphagia between Zero Profile Spacer versus Cage-Plate for the treatment of multilevel Cervical Spondylotic Myelopathy (CSM).

**Methods:** The authors searched electronic databases for relevant studies that compared the clinical effectiveness of Zero Profile Spacer versus Cage-Plate for the treatment of patients with multilevel CSM. The following outcome measures were extracted: the Japanese Orthopaedic Association (JOA) scores, Neck Disability Index (NDI) score and fusion rate, dysphagia rate, adjacent segment degeneration, and cervical lordosis. Newcastle-Ottawa Quality Assessment Scale was used to evaluate the quality of each study. Data extraction and quality assessment were conducted, and RevMan 5.2 was used for data analysis.

**Results:** A total of 10 studies were included in our meta-analysis. Our pooled data revealed that Zero-Profile Spacer was associated with decreased Dysphagia rate at postoperatively 1, 3, and 6 months, and the final follow-up when compared with Cage-Plate group. No significant difference was observed in terms of postoperative JOA score, NDI score, and fusion rate. Compared with Zero-Profile Spacer, the postoperative adjacent segment degeneration was significantly higher in Cage-Plate. Pooled data from the relevant studies revealed that Cervical Lordosis was significantly lower in Zero-Profile Spacer compared with Cage-Plate.

**Conclusions:** Our meta-analysis reveals Zero-Profile Spacer is better than the Cage-Plate in terms of Dysphagia. This suggests Zero-Profile Spacer is a superior alternative invention for the treatment of multilevel CSM to reduce the risk of Dysphagia.

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