

Editorial

Dear Friends

Happy New Year and welcome to 2017!!! I hope you all had a great festive period in December 2016, a time for sharing and thanks giving. This marks my 3rd year as the Editor-in-Chief for the Journal of Spine Surgery (JOSS) and it has been a privilege to serve you and I take this opportunity to thank you all for your support. To me, serving as the Editor-in-Chief is not only an honor but also a responsibility to ensure this journal keeps pace with the rapid changes in the field of spine surgery. It is my great pleasure to report that JOSS has continued to do well in 2016. I would like to thank our editorial board and publisher team and have greatly enjoyed working with them, whose dedication keeps JOSS running efficiently in every issue. I am also grateful to the reviewers who have volunteered their time and expertise to select the good papers. And most importantly, I must thank our authors for submitting their scientific work to JOSS. Our collective efforts have led to excellent outcomes.



In this current edition, I would like to bring to your attention a few key papers that are definitely worth reading. The experience of C1--C2 transarticular screw and C1 lateral mass screw fixation C1--C2 transarticular screw fixation offers maximal rotational stability; it has been shown to be less efficient in resisting flexion and extension forces unless combined with a posterior wire/graft technique. On the contrary, the C1 lateral mass to C2 pars construct has been shown in cadaveric studies to have greater stability in flexion and extension but has less rotational stability compared with the other procedures. The authors have combined two techniques and showed a short term follow-up with good results in cases where C1 arch decompression is needed or if the post elements of C1 and C2 are osteoporotic.

Most surgeons enjoy the comfort of new adjuncts during surgery to improve safety, reduce operative time, and gain superior outcomes. The ultrasonic bone scalpel has been in the market for some time and most spine surgeons are unsure of its use and benefits. The article in this issues gives the authors experience of the use of the ultrasonic bone scalpel. The last paper is regarding a very common problem encountered by spine surgeons, the symptomatic lumbar disc. The authors have very systematically explained that the outcomes of lumbar discectomy depend more on patient's age, level, and type of disk prolapse, factors precipitating disk prolapse, and patient selection than on surgical technique.

With this brief note, I wish you all a prosperous, happy, and successful 2017.

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