


## Editorial



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# Paradigm Shift in Spinal Surgery

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Advancement in medical treatment leads to increase life expectancy and population ageing. The corresponding increase in the incidence of degenerative spinal conditions are top 10 causes of disabilities worldwide.<sup>1</sup> As science advances with new procedures, there is a demand for more advanced technology and surgical techniques in spinal surgery to minimise collateral soft tissue damages to provide improved clinical outcomes with less perioperative morbidities for our patients. This demand gives rise to the evolution of endoscopic spine surgery.<sup>2</sup> Despite the many benefits of spinal endoscopy, there is a steep learning curve in spinal endoscopy.<sup>3</sup> Surgeons who are practising the art of spinal endoscopy should be familiar with open surgical techniques and spinal anatomy. As endoscopic spine surgery is a fast evolving field, it is important for practicing endoscopic surgeon to keep current with the latest literature and updates. Since the previous special edition of Endoscopic Spine Surgery in *Neurospine* in 2020, there is continual development of technology in spinal endoscope in terms of lens clarity, variety of angulation, light transmission, radiofrequency energy systems, spinal endoscopic instruments, and further refinement of surgical techniques by worldwide endoscopic surgeons. This leads to an expansion of clinical indications for endoscopic spine surgery.<sup>4-8</sup> In this special edition, we have articles from uniportal full endoscopic and unilateral biportal endoscopy addressing various conditions in spine with advanced endoscopic techniques involving cervical and thoracic decompression as well as endoscopic spinal fusion techniques.

We are confident this current special issue of Endoscopic Spine Surgery in *Neurospine* will become a core forum for spine scholars who are interested in endoscopic spine surgery. We wish you success in your academic, clinical and endoscopic spine surgical career.

- **Conflict of Interest:** The authors have nothing to disclose.

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