

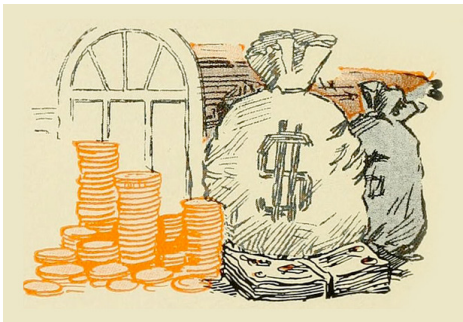
# Orthopedics This Week

## WEEK IN REVIEW

**4 The New Spineology. Patient Conforming, Ultra-MIS, Expandable >>** In strong, non-osteoporotic bone, pedicle screw loosening rates are about 1-15%. In osteoporotic bone those rates soar to more than 60%. Old spines need new ideas. Time for Karma, a better approach for spine fixation when bone quality is suspect.

**8 Stryker Buys Interventional Pain Co. Vertos Medical >>** Stryker's bid to buy Vertos Medical represents a novel and strategic addition to its spine surgery portfolio, expanding its presence among pain practices, ASCs, and outpatient spine clinics. But even more, it reinforces the trend to procedure-based, not implant-based, medicine.

**11 The De Angelis Group Acquires RRY Publications LLC >>** The De Angelis Group, a premier MedTech executive search firm has acquired RRY Publications LLC, the publisher of the highly respected *Orthopedics This Week* and the #1 Orthopedics and Spine publishing platform.



## BREAKING NEWS

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**For all news that is ortho, read on.**

**CLICK HERE TO DOWNLOAD A PDF VERSION OF THIS WEEK'S NEWSLETTER**

# Orthopedic Power Rankings

## Robin Young's Entirely Subjective Ordering of Public Orthopedic Companies

**THIS WEEK:** Deep into earnings season and Wall Street's #1 macro question is: What will Big Banks, whose earnings bear the brunt of the Fed's interest rate machinations, report for Q3? Answer: So far, So good as JP Morgan and Wells Fargo reported decent earnings. So S&P and Dow seem destined to rise into new record territory. For ortho stocks, while a rising equity market certainly sets the stage, investors will be focusing on procedure volumes and profitability for the September quarter. The hypothesis is: Strong economy = higher procedure volume.

RANK	LAST WEEK	COMPANY	TTM OP MARGIN	30-DAY PRICE CHANGE	COMMENT
1	2	Bioventus	4.34%	15.19%	BVS divests its Advanced Rehab business for \$25mm up front and \$25mm in milestone payments. BVS continues its turn around and moves up to #1 on the Power Rankings.
2	3	Medtronic	19.17	(0.32)	We remain impressed with the tone and management team at Medtronic Spine. The deal with Siemens Healthineers is impressive, but even more impactful is this team. Entirely new energy and focus.
3	8	Pacira Biosciences	17.40	24.77	Big news: New Product specific J-Code, reimbursement, for EXPAREL effective January 1st. Then, a week before that, 2-year follow up data for new knee OA analgesic. Very promising.
4	1	ConMed	9.63	(12.44)	5.2% sales growth for Q3, a little light compared to past reports. Earnings up significantly. \$30mm vs \$14mm last year. Investors, however, focused on supply chain woes.
5	6	Globus Medical	18.72	1.88	GMED is expected to report about \$604 million for Q3 sales and \$0.65 EPS vs \$0.57 in earnings per share. Odds of an upside earnings surprise, we think, in the 10-20% range possible.
6	7	Integra LifeSciences	10.98	9.26	IART's price rise just ahead of Q3's sales report is interesting. Analysts expect a 50% drop in earnings and a 2% drop in sales for the September quarter. Maybe too conservative?
7	5	Johnson & Johnson	20.78	(2.04)	Hard to get to excited about JNJ. Wall Street is forecasting down earnings on just 5% sales growth. But, at these prices, JNJ is still a comparatively cheap stock which pays a 3.07% dividend yield.
8	9	Nevro	(23.20)	2.55	Wall Street thinks Q3 will be an ugly quarter, and yet buyers are buying. How ugly? Sales down 10% and a bigger loss than last year's Q3. Could NVRO deliver an upside surprise?
9	NR	Zimmer Biomet	20.70	(1.35)	7th cheapest equity in ortho this week. Wall Street expects \$1.8 billion in Q3 sales, up just 2.70%. Low expectations, nice valuation, high profit margins. Time to buy?
10	NR	Anika	0.38	4.66	ANIK has some of the most exciting biologic products in orthopedics. Wall Street is not expecting much sales growth for Q3. But value investors are buying.

# Robin Young's Orthopedic Universe

## TOP PERFORMERS LAST 30 DAYS

	COMPANY	SYMBOL	PRICE	MKT CAP	30-DAY CHG
1	MicroPort Scientific	O853	\$0.93	\$1,709	58.99%
2	Pacira Biosciences	PCRX	\$16.22	\$748	24.77%
3	Bioventus	BVS	\$12.13	\$982	15.19%
4	AxoGen	AXGN	\$14.71	\$645	10.77%
5	Integra LifeSciences	IART	\$19.23	\$1,492	9.26%
6	Anika Therapeutics	ANIK	\$25.38	\$376	4.66%
7	Aclarion	ACON	\$0.18	\$2	4.26%
8	Aurora Spine	ASG.V	\$0.21	\$16	4.11%
9	Nevro Corp	NVRO	\$4.83	\$180	2.55%
10	Globus Medical	GMED	\$70.57	\$9,552	1.88%

## WORST PERFORMERS LAST 30 DAYS

	COMPANY	SYMBOL	PRICE	MKT CAP	30-DAY CHG
1	Paragon 28	FNA	\$5.72	\$478	-23.32%
2	OrthoPediatrics Corp	KIDS	\$24.61	\$596	-21.12%
3	Dynatronics Corp	DYNT	\$0.13	\$1	-18.75%
4	SI-BONE, Inc	SIBN	\$13.13	\$547	-12.93%
5	ConMed	CNMD	\$64.02	\$1,974	-12.44%
6	Orthofix	OFIX	\$15.58	\$595	-10.46%
7	Smith & Nephew	SNN	\$28.41	\$12,420	-9.05%
8	Alphatec Holdings	ATEC	\$5.15	\$723	-5.50%
9	SINTX Technologies	SINT	\$3.18	\$4	-3.34%
10	Stryker	SYK	\$355.60	\$135,510	-2.72%

## LOWEST PRICE / EARNINGS RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	P/E
1	Pacira Biosciences	PCRX	\$16.22	\$748	12.69
2	Johnson & Johnson	JNJ	\$161.46	\$388,674	20.35
3	Medtronic	MDT	\$89.36	\$114,603	21.52
4	Integra LifeSciences	IART	\$19.23	\$1,492	22.02
5	ConMed	CNMD	\$64.02	\$1,974	22.83

## HIGHEST PRICE / EARNINGS RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	P/E
1	Xtant Medical Hldgs	XTNT	\$0.60	\$83	126.50
2	Globus Medical	GMED	\$70.57	\$9,552	57.97
3	Smith & Nephew	SNN	\$28.41	\$12,420	47.23
4	Medacta	MOVE	\$141.52	\$2,830	46.39
5	Stryker	SYK	\$355.60	\$135,510	35.85

## LOWEST P/E TO GROWTH RATIO (EARNINGS ESTIMATES)

	COMPANY	SYMBOL	PRICE	MKT CAP	PEG
1	Integra LifeSciences	IART	\$19.23	\$1,492	-5.37
2	Pacira Biosciences	PCRX	\$16.22	\$748	1.17
3	ConMed	CNMD	\$64.02	\$1,974	1.19
4	Medacta	MOVE	\$141.52	\$2,830	1.66
5	Johnson & Johnson	JNJ	\$161.46	\$388,674	3.04

## HIGHEST P/E TO GROWTH RATIO (EARNINGS ESTIMATES)

	COMPANY	SYMBOL	PRICE	MKT CAP	PEG
1	Xtant Medical Hldgs	XTNT	\$0.60	\$83	6.32
2	Medtronic	MDT	\$89.36	\$114,603	3.91
3	Zimmer Biomet	ZBH	\$103.50	\$21,078	3.74
4	Smith & Nephew	SNN	\$28.41	\$12,420	3.50
5	Globus Medical	GMED	\$70.57	\$9,552	3.49

## LOWEST PRICE TO SALES RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	PSR
1	Dynatronics Corp	DYNT	\$0.13	\$1	0.02
2	Nevro Corp	NVRO	\$4.83	\$180	0.42
3	Orthofix	OFIX	\$15.58	\$595	0.80
4	Aurora Spine	ASG.V	\$0.21	\$16	0.83
5	Xtant Medical Hldgs	XTNT	\$0.60	\$83	0.91

## HIGHEST PRICE TO SALES RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	PSR
1	Aclarion	ACON	\$0.18	\$2	23.47
2	Stryker	SYK	\$355.60	\$135,510	6.61
3	Globus Medical	GMED	\$70.57	\$9,552	6.09
4	Medacta	MOVE	\$141.52	\$2,830	5.54
5	Johnson & Johnson	JNJ	\$161.46	\$388,674	4.56

PSR: Aggregate current market capitalization divided by aggregate sales and the calculation excluded the companies for which sales figures are not available.

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Robin Young | robin@ryortho.com



# The New Spineology. Patient Conforming, Ultra-MIS, Expandable

BY TRACEY ROMERO



Courtesy of Spineology Inc.

In a crowded minimally invasive surgery (MIS) lumbar spine surgery market, with literally dozens of expandable cages that enter the body through a small incision and then expand in situ, one company—no hyperbole—stands alone because, unlike all the other available devices, its patient conforming, patient-specific device enters the body through a space the size of a soda straw.

The company is Spineology Inc. The device is OptiMesh®. Spineology's IDE Trial for OptiMesh began in 2013 and was cleared in 2020 and has been used in more than 50,000 cases, but most spine surgeons are not fully aware of how it works, the data from its IDE trial or how it conforms to each patient's unique anatomy.

## New Category of MIS Spine Surgery

MIS spine surgery is an anatomy-conserving strategy that, with such advanced tools as navigation and robotic-assist devices, is available to every spine surgeon and, increasingly, every spine surgery venue from the large downtown hospital to the strip mall surgery center.

For suppliers, instruments and implants evolved to support anatomy-conserving MIS surgery. Today's dominant implant design is an expandable metal cage.

And then there's Spineology's OptiMesh.

It is so unique; it stands in a category all its own: a patient-conforming, patient-specific, expanding in 3-dimensions, versatile lumbar spine implant that can

be placed with an open procedure or through an ultra-MIS approach. One implant is this versatile.

A category of One.

## 50,000 Cases, 20 Clinical Studies and an IDE Study

OptiMesh, which was cleared for commercialization through the FDA's De Novo pathway, came to market on the basis of data from the SCOUT (Spineology Clinical Outcomes Trial) Investigational Device Exemption (IDE) trial. That data was first presented at the Society for Minimally Invasive Spine Surgery Annual Meeting in November 2019.

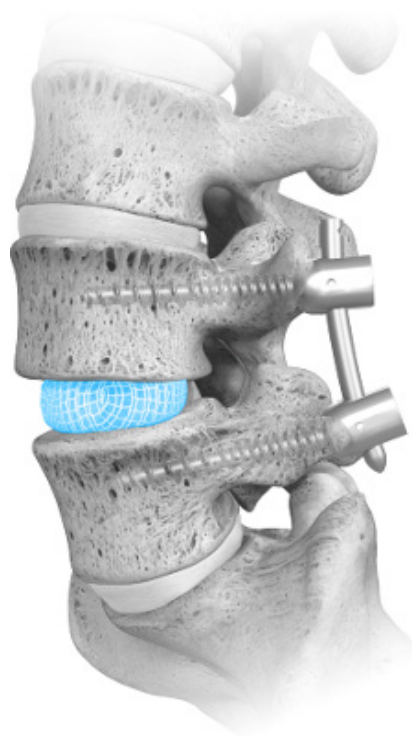
Patients who received Spineology's Optimesh device in the IDE study

reported substantial pain relief and improved functionality at 6-, 12-, and 24-months post-op.

The trial also documented 98% fusion rates at 24 months and approximately 92% “Excellent” or “Good” patient satisfaction scores at 6-, 12- and 24-months post-op: no serious, device-related, adverse events.

One of the IDE investigators, Dr. Stephane Lavoie of Deland, Florida, said in a [statement](#) at the time:

“OptiLIF® is the least invasive lumbar fusion procedure. The unique OptiMesh implant can be inserted through a one-centimeter incision and then expanded to restore anatomy, which provides neural decompression and optimally conforms to a patient’s endplates. As a result, patients recover quickly, and the impact to procedure efficiency is signif-



*OptiMesh, with allograft fill, implanted and conforming to the anatomy of the patient.*



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icant. OptiLIF will have a major impact on the standard of care related to low back and leg pain.”

Over 50,000 patients have been treated with OptiMesh and 20 additional clinical studies have reported excellent patient outcomes, better procedure efficiencies and, most importantly, patient conforming, precise and anatomy conserving treatment.

### The NEW Spineology

Spineology’s was ahead of its time, and its focus has always been on a mesh, not metal, or plastic implant. While the market today is dominated by expanding or motion preserving metal lumbar implants, the mesh approach is the only MIS product that is patient conforming and specific while also preserving anatomy.

Founded by Dr. Stephen Kuslich in 1997, Spineology recently hired an entirely new senior executive team, led by Brian Snider, formerly with NuVasive, Inc. and then Alphatec Spine.

*Orthopedics This Week* had the opportunity to speak with both CEO Brian Snider and Executive Vice President of Marketing Amanda Bloom.

Snider explained why he joined Spineology and the value he found in both the company and its patient-conforming technology. “After Alphatec, I was looking for something [that] was differentiated, addressed an unmet clinical need, and supported with strong data. Once I started due diligence, I realized Spineology was really onto something. They could truly be the future of spine surgery. I went to a number of surgeons who’d used OptiMesh and they

said simply, ‘my patients do better with OptiMesh.’”

For Bloom, the company was also a surprise and a revelation. “As a marketer, I realized very quickly that the OptiMesh implant is such an advanced, unique technology, truly one-of-a-kind, and never really had a voice.”

“For me, Spineology represents the opportunity to bring a clearly underappreciated technology to a wider audience of surgeons and their patients. That made rebranding Spineology one of the first things on my list when I joined.”

Why didn’t Spineology position this technology in this manner earlier? Like, say, 20 years ago? According to Bloom, the original FDA clearance did not allow the company to articulate its value proposition, or train surgeons

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on this unique approach to interbody fusion.

“I have to give the team here a ton of credit, they took the hard road. I remember the first time I saw the technology was in 2008 and I thought this was really compelling technology, but it lacked a clear regulatory path forward. The years the team dedicated to the development of the technology, completing the IDE trial, and obtaining the De Novo grant, paved the way for us now,” Snider said.

### The ONLY Conforming, Patient-Specific Expandable Implant in the World

“OptiMesh stands in a unique category of its own. It is the only patient conforming expandable implant on the market. There’s been such a rush of development around expandable implant technology over the last 10 years, and it really took the market by storm. There are unmet needs in static implants and the hope was that an expandable implant would change that.”

But, Bloom added, “Mechanically expanding implants did meet the full needs of spine surgery. And Spineology’s OptiMesh solution was here the whole time. People just didn’t know it.”

### Rebranding Spineology and OptiMesh

“We are proud of our history. We’re proud of the path we took. But this isn’t the Spineology of yesteryear. We have the only clinically validated interbody fusion technology with IDE clearance,” said Snider.

“That means we stand alone in this category. We will redefine what this technology can do. It’s simple: OptiMesh conforms to you. It conforms to a patient’s anatomical requirements. It conforms to the surgeon’s procedural needs.”

“Regardless of whether a surgeon performs open procedures, or endoscopic procedures, this one implant can help surgeons achieve the goals of surgery and provide better outcomes for their patients.”

“Dr. Kuslich developed an implant that fits through a 6.6 mm portal, expands to the size of an ALIF [anterior lumbar interbody fusion] footprint and conforms to the anatomy.”

Snider explained additional features of the OptiMesh Implant: Nearly the entire implant is comprised of biologics, and it has powerful expansion capabilities to restore disc height, achieve alignment goals and promote robust fusion—all of this with a patient-conforming implant size of an ALIF implant that is designed to avoid the point loading that you see with mechanically expandable implants

Snider added, there are a multitude of ways surgeons can utilize OptiMesh.

1. Traditional open procedure, everything from complex deformity or an open TLIF [transforminal lumbar interbody fusion].
2. TLIF approach, whether it's tubular or a Wiltse approach.
3. Ultra MIS (OptiLif) approach where the surgeon uses fluoroscopy to go through Kambin’s triangle.
4. Endoscopic (OptiLif Endo), the OptiMesh implant is the only implant that will fit through an endoscope.

“Many surgeons don’t know much about Spineology,” Bloom said. “This is our opportunity to reframe the story with accuracy, with fact, with value propositions that compel, and to make a difference for surgeons and their practices.”

The rebrand of the organization, which will include a new brand identity and product positioning with corresponding assets was introduced the 2024 North American Spine Society’s annual meeting on September 25. “Our logo, website, collateral, educational material and booth had a completely different look at NASS,” Bloom said.

“Additionally, had a talk at NASS, in the Red Theater, by Dr. Timothy Wang from Rush University. He’s shared how and why OptiMesh is a core focus in his practice. We’ve revamped our medical education program and are approaching training via a concierge approach,” she said.

“Just like OptiMesh conforms to you, our education programs do the same. We bring the training to the surgeons. We believe this technology is so important to patients and the surgeons who treat them, our goal is to expand access to it.”

### You’ve Tried the Rest, Now Check Out OptiMesh

Sometimes in life and business, it takes a fresh set of eyes to see what is right in front of you.

Looking at OptiMesh within the context of MIS lumbar spine surgery, reveals its value to spine surgeons and their patients.

Compared to the 40 or 50 expandable cages in the market today, OptiMesh’s ability to enter through a space the size of a soda straw, then expand in three dimensions to fully cover each endplate and provide 45 pounds of support using an allograft filler does, in fact, make it truly one of a kind.

To learn more, here is the link to Spineology’s website: [www.spineology.com](http://www.spineology.com). ♦

# Stryker Buys Interventional Pain Co. Vertos Medical

BY ROBIN YOUNG



Source: Wikimedia Commons

**S**tryker Corporation announced on August 22 the pending purchase of Vertos Medical, Inc., a 19-year-old, California-based company that pioneered one of the most minimally invasive procedures for treating lumbar spinal stenosis (LSS) there is. No terms were disclosed.

Adding Vertos’s mild® procedure to its spine surgery portfolio expands, in a novel and strategic way, Stryker’s presence in the world of pain docs, ASCs, and other outpatient spine care providers.

Vertos’s signature product—a procedure brand named ‘mild®’—is an uber-minimally invasive approach for reliev-

ing pain and improving mobility for patients suffering from lumbar spinal stenosis. FDA cleared the mild® procedure in 2006. It is an image-guided treatment for lumbar spinal stenosis which does not require an implant, general anesthesia, stitches, or overnight hospital stay.

Medicare and many private insurers cover the mild® procedure. Well over 30,000 patients have been treated to date. Its safety and efficacy are chronicled in 13 clinical studies, reported in more than 25 publications.

Finally, 14 months ago, Vertos closed a \$26 million financing led by Palo Alto-based Northwest Venture Partners.

## Vertos Medical, Inc.

Dave Solsberg, M.D. and Don Schomer, M.D., radiology partners at the time in Denver, Colorado, founded Vertos in 2005. “We wanted to find a better way of treating patients with lumbar spinal stenosis,” remembers Dr. Solsberg today. Solsberg’s father-in-law, who was suffering from lumbar spinal stenosis, was treated with lumbar laminotomy and decompression—to very poor results. While his surgery was performed well, pre-existing complications undermined his outcome.

Trained in neurosurgery at the University of Toronto, Solsberg was fairly

certain that a better, much less invasive approach to lumbar spinal stenosis was possible.

He began to research the etiology of spinal stenosis and stumbled upon an intriguing European approach to lumbar spinal stenosis—the unilateral mini-laminectomy. Not only did that approach avoid the level of tissue damage inherent in a full laminectomy with decompression, it also appeared to deliver comparable pain relief. Furthermore, the research suggested there was a connection between vascular compression and pain.

“I hypothesized that mitigating claudication and increasing blood flow could reduce pain. Furthermore, I felt that most patients would be fine with 50% pain relief with a much less invasive approach.”

Specifically, Solsberg was thinking about the ligament that runs along the back of the spinal canal, connecting vertebrae and stabilizing the spine. Known as the ligamentum flavum, when stressed and inflamed will thicken, impinging the nerves in the spinal canal.

Maybe, thought Solsberg, less is more. Why go all the way to surgery, a laminectomy with decompression? Just address the bulging ligamentum flavum.

Teaming up with one of his radiology partners, Don Schomer, M.D., Solsberg raised a little money, founded Vertos and hired a machinist to build the first set of tools and a couple of former Kyphon executives to get the company started.

First in man case, a patient with degenerative lumbar spinal stenosis with liga-

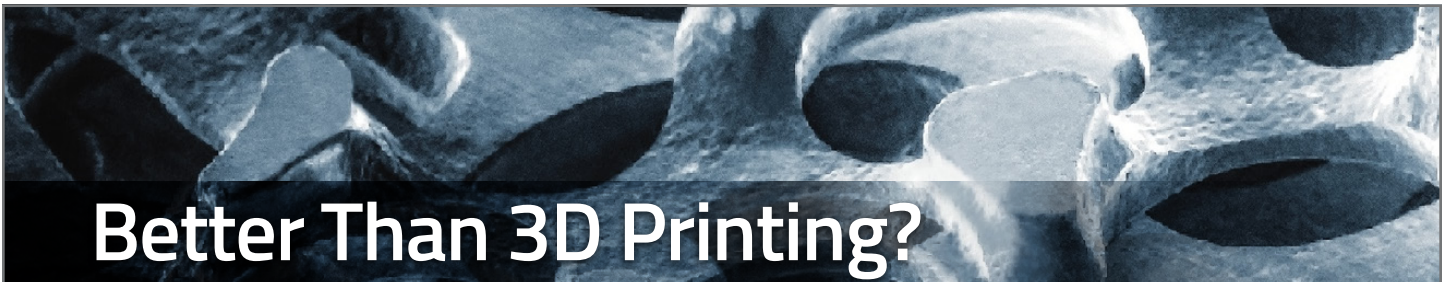
mentum flavum hypertrophy, was performed at the VA Hospital in Denver. The patient had a good outcome.

In 2007, Solsberg and Schomer hired a CEO. Then the ventures firms piled in. As Vertos made the turn from an R&D company to a marketing and commercial enterprise, Solsberg and Schomer found themselves out of the company they founded. According to Solsberg, all original investors significantly diluted and, effectively, wiped out.

Now Stryker Corporation is about to buy the company Solsberg and Schomer started.

### The MOTION Study

Millions of people, globally, endure pain and, often, disability from lumbar spinal stenosis. Among the 13 clinical



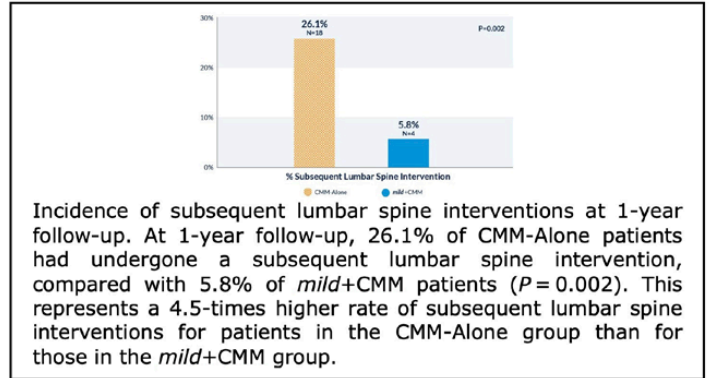
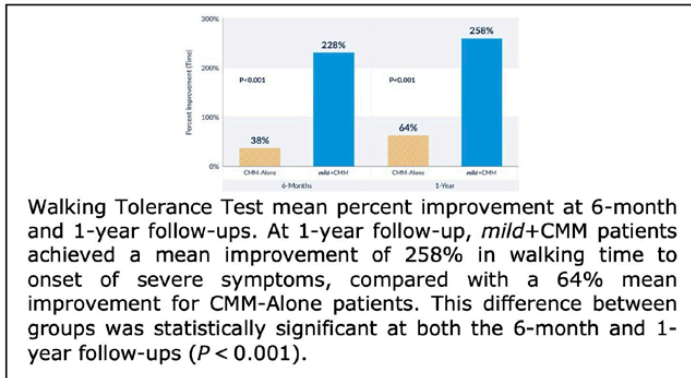
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Source: Pain Pract 2024 Jan;24(1):109-119. doi: 10.1111/papr.13293. Epub 2023 Sep 3. <https://pubmed.ncbi.nlm.nih.gov/37661347/>

studies which tested Solsberg’s hypothesis are these two.

The MOTION study, designed by researchers Timothy Deer, Shrif Costandi, Edward Washabaugh, Timothy Chafin, Sayed Wahezi, Navdeep Jassal and Dawood Sayed, measured, in a prospective, randomized way, the Vertos approach. The study, named MOTION, employed BOTH objective and patient-reported outcomes to compare Vertos’s mild® procedure with conventional medical management of lumbar spinal stenosis.

The control arm (n=67) was conventional medical management, and the testing arm (n=64) was Vertos’s mild® approach plus conventional medical management.

Two years after treatment, the differences between the two groups was stark, with the mild® group showing statistically significantly better outcomes. Every outcome measure (Oswestry Disability Index, Numeric Pain Rating Scale, and Zurich Claudication Questionnaire, validated Walking Tolerance

Test, rate of subsequent lumbar spine interventions, and safety data) favored Vertos’s mild® procedure. There were no adverse events in either group.

Quoting from the 2022 study, which was published in the online journal *Pain Practice*, “The durability of mild + conventional medical management (CMM) for this patient population was demonstrated for all efficacy outcomes through 2 years. Improvements in walking time from baseline to 2 years for patients treated with mild + CMM were significant and substantial. The lack of reported device or procedure-related adverse events reinforces the strong safety profile of the mild procedure. These results provide support for early interventional treatment of symptomatic LSS with the mild procedure”.

Here are two charts from the study which show the extent to which mild® exceeded conventional medical management outcomes.

The mild® procedure, which typically takes less than an hour, entails:

- No large incision
- No general anesthesia
- No implants
- No steroids or opioids
- Patients can shower the next day (just don’t scrub the incision site).

### Stryker Corporation and Vertos Medical, Inc.

Stryker’s purchase of Vertos hasn’t closed yet; it’s subject to the usual due diligence and other closing conditions. The two companies continue to operate independently.

But this deal is happening. For Stryker, it’s a notable strategic acquisition and will expand Stryker’s presence in a fast-growing spine care segment.

But it’s also another sign that the practice of orthopedics and spine care is transitioning to a procedure dominant profession—image guided, navigated, robot assisted, pre-planned—and certainly minimally invasive. ♦

# The De Angelis Group Acquires RRY Publications LLC

BY ROBIN YOUNG



Source: Shutterstock, De Angelis Group and RRY Publications LLC

[Scottsdale, AZ] — [August 29, 2024] — In a strategic move, The De Angelis Group, a premier executive search firm trusted for its expertise in the MedTech sector, is thrilled to announce its acquisition of RRY Publications LLC, ([www.ryortho.com](http://www.ryortho.com)) the publisher of the highly respected *Orthopedics This Week*. This acquisition brings together two powerhouses in the orthopedics and spine industry and demonstrates a commitment to continuing the legacy of *Orthopedics This Week* with industry news and strategic insights.

## A Synergistic Union

The De Angelis Group and RRY Publications have long served as pillars of the musculoskeletal community, serv-

ing many of the same companies, each bringing unique strengths to the table. The De Angelis Group, founded in 2000 by Drue De Angelis, has established itself as the leading source of executive talent search for innovative companies across the medical device landscape. RRY Publications, through its flagship publication *Orthopedics This Week*, has become the indispensable source of education, news, and information for the entire orthopedics and spine community.

**Drue De Angelis, Managing Partner of The De Angelis Group**, commented on the acquisition: "I have long been a loyal reader of Robin Young's *Orthopedics This Week*. When Robin and I discussed a potential purchase and part-

nership, I immediately recognized the opportunity to preserve and enhance this invaluable industry resource. *Orthopedics This Week* is a must-read for surgeons and company executives alike, and I am committed to ensuring it maintains its focus and continues to deliver unparalleled value under our stewardship."

**Robin R. Young, founder and CEO of RRY Publications LLC**, shared his enthusiasm: "I could not imagine a better owner and partner for the publication I founded almost 20 years ago. Drue, as the #1 talent recruiter and independent advisor to many young and innovative medical companies, is a synergistic match for RRY Publica-

tions. Most importantly, Drue's commitment to excellence and desire for continued growth for the orthopedic and spine industry is second to none. This union promises to deliver even greater value to our readers and the broader MedTech community."

**RRY Publications and *Orthopedics This Week*** will maintain their editorial independence and commitment to excellence, benefiting from increased resources and expanded reach under The De Angelis Group's ownership. The acquisition by The De Angelis Group represents a transformative opportunity for RRY Publications. Leveraging The De Angelis Group's strategic vision and investment, *Orthopedics This Week* will be empowered to broaden its scope, deepen its analysis,

and provide even greater value to its readers. This partnership will accelerate innovation in content delivery, expand market reach, and solidify *Orthopedics This Week's* position as the premier source of musculoskeletal industry intelligence.

#### About The De Angelis Group

For 25 years, The De Angelis Group has been a leading executive search firm specializing in the MedTech industry with an emphasis in orthopedics and spine. The De Angelis Group values the importance of guiding clients to the right talent at the right time. They partner with each client to ensure their teams are positioned for success, offering a level of strategic insight and industry expertise that sets them apart.

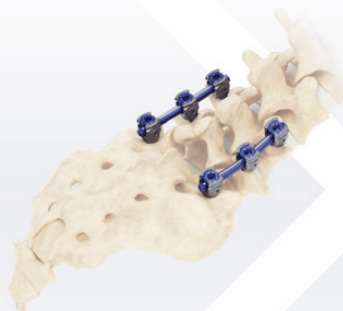
#### About RRY Publications LLC

Four-time winner of the AAOS MORE award for editorial excellence, RRY Publications and its flagship newsletter, *Orthopedics This Week*, have grown to become the #1 publishing platform in orthopedics and spine with approximately 50,000 monthly readers, 40,000 visitors to its website, and 25,000 social media followers. Founded in 2005 by former Wall Street research and market analyst, Robin R. Young, RRY Publications has become the indispensable source of education, news, and information for the entire orthopedics and spine community. ♦

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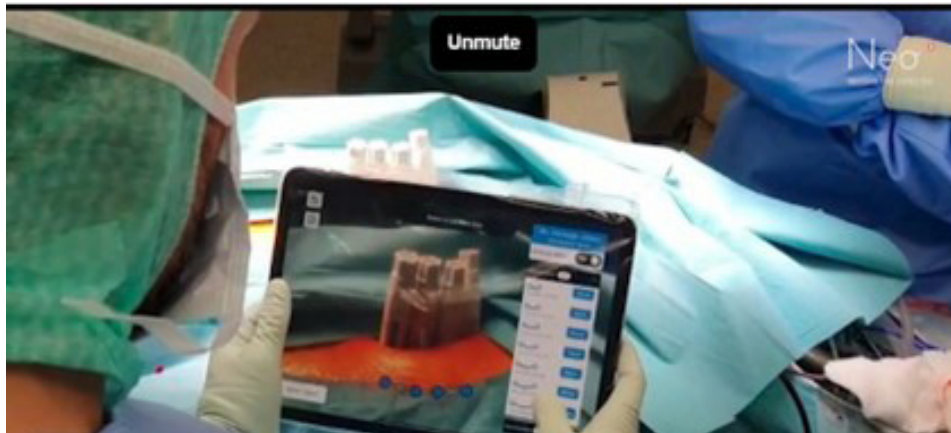
COMPANY

## Swiss Spine Surgery Company Raises \$68M

Swiss spine surgery company Neo Medical SA has completed a successful Series B financing round, raising \$68 million.

The round included the conversion of existing shareholder loans. Gyrus Capital led the financing round. Other investors include Neo Medical Founders Vincent Lefauconnier and Jonas Larsson. According to the company's press release, this is a "landmark round" and "one of the most significant in the spine industry in the last decade."

The funding will go towards funding three major objectives of the company:



Courtesy of Neo Medical SA

1. increasing "Neo's market share in key regions with an immediate focus on expanding the U.S. business"
2. "deploying new, complementary, and disruptive products."
3. developing the capabilities of ADVISE™.

According to the company, ADVISE is "an intraoperative, AI-driven augmented reality platform that shows spine surgeons what they can't see." ADVISE is part of the company's surgical technologies portfolio which is represented as Neo Universal™.

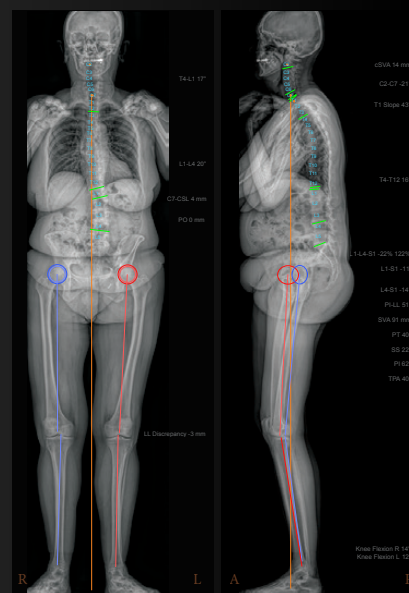
Neo Medical CEO and Co-Founder Lefauconnier commented, "Thoraco-



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lumbar spine surgery is a large market that has lacked disruptive innovation for decades—the spine sector needs innovation to improve patient outcomes and drive positive change for all stakeholders.”

Lefauconnier continued, “This is precisely what we have set out to achieve with Neo Universal™—a platform introducing new technological and structural approaches to create real value both inside and outside the operating theatre. After successfully entering key markets, we are ready to scale. This funding will enable us to grow and push the boundaries of what is possible in spine surgery, bringing our solutions to more healthcare providers and, most importantly, improving outcomes for patients.”

Around 36,000 patients have already been treated with Neo Medical’s tech-

nologies since the 2016 commercial launch.

Furthermore, according to the company, studies have “shown Neo’s products can cut implant failure rates by up to three-times, infection risk by half, and time spent in surgery by up to 29%, reducing the need for revisionary surgery by as much as 50%.”

Lefauconnier also commented, “This raise is the next step in solidifying Neo Universal™ as one of the premier solutions on the market. Intended to treat thoracolumbar patients in inpatient and outpatient settings, it supports both MIS and open approaches. Launching extended capabilities for complex surgery will soon optimize our platform coverage from ambulatory surgery to ever more complex trauma and deformity.” — KD

## OTW Editor Robin Young Keynotes NYC Spine Society Meeting

After years of shaping the content and conversations you check daily, *Orthopedics This Week* (OTW) Founder



OTW editor emeritus Robin Young will present key findings from its *State of Spine Companies and Technology Outlook* as the keynote speaker at the inaugural New York Spine Society Meeting on October 24 / Courtesy of Robin Young



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and Editor Emeritus Robin Young will take to the stage as the keynote speaker at the inaugural New York Spine Society Meeting (NYSS).

NYSS, to be held October 24 in New York City, will bring together New York-based orthopedic and neurological spine surgeons. The free, but limited, event promises education, networking and collaboration in an “informal setting.”

During the keynote presentation, Young will present its State of Spine Companies and Technology Outlook.

The event will begin with a networking reception at 6:30 p.m. ET at the offices of Smith & Wollensky—on the second floor of 797 Third Ave—followed by the program and dinner.

The deadline to RSVP for the event is Oct. 9. Click [this link](#) to visit the RSVP page.

New York University’s Jeffrey Goldstein, M.D., organized the event. He is a clinical professor of orthopedic surgery and neurosurgery at NYU Grossman School of Medicine, as well as the director of spine service education and the spine surgery fellowship at NYU Langone Orthopedics.

### About the Speaker

Robin Young is a subject matter expert within the orthopedics industry, having analyzed the field of spine surgery and reported on developments in orthopedics technology since he founded *Orthopedics This Week (OTW)*. OTW is

one of the most widely read sources of orthopedics news with more than 180,000 monthly readers.

Young was named “Best on the Street” by the *Wall Street Journal* and was identified as one of the top ten analysts in the United States by *Institutional Investor Magazine*.

He has authored more than 1,000 research reports and six books on subjects such as surgical biomaterial, the spinal implant industry and the stock market. He also hosted the New York Stem Cell Summit for nine years.

Prior to founding OTW, Young spent 25 years as a Wall Street medical technology analyst. — VB

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## FDA Approves Arthroscopic Knee Cartilage Repair

The U.S. Food and Drug Administration (FDA) has approved a request for a supplemental Biologics License Application for the repair of knee cartilage defects using arthroscopic delivery of the autologous cultured chondrocytes on a porcine collagen membrane.

The request was submitted in October of last year under section 351(a) of the Public Health Service Act. The autologous cultured chondrocytes on porcine collagen membrane are marketed under the brand name MACI®.

According to the company that submitted the request, Vericel Corporation, a biopharmaceutical company based in Cambridge, Massachusetts, MACI is “an autologous cellularized scaffold product indicated for the repair of single or multiple symptomatic, full-thickness cartilage defects of the knee with or without bone involvement in adults.” It “applies the process of tissue engineering to grow cells on scaffolds using healthy cartilage tissue from the patient’s own knee.”

Furthermore, said the company, the supplemental approval will allow the “arthroscopic delivery of MACI to repair symptomatic single or multiple full-thickness cartilage defects of the knee up to 4 cm<sup>2</sup> in size.”

Vericel’s CEO Nick Colangelo said, “The approval of MACI Arthro repre-



Product illustration

MACI® / Source: Vericel Corporation

sents another significant milestone in our strategy to provide innovative solutions for patients suffering from pain and dysfunction caused by cartilage defects in the knee.”

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Colangelo continued, “MACI Arthro provides orthopedic surgeons and their patients with a less invasive option for MACI administration, which we believe has the potential to significantly increase penetration into the largest segment of the MACI addressable market and will support sustained top-tier revenue growth for the Company in the years ahead.”

The recently approved MACI Arthro is touted as a less invasive technique when compared to the current method of administration. According to Vericel, MACI Arthro allows “surgeons to evaluate and prepare the defect site as well as deliver the MACI implant through small incisions using custom-designed MACI Arthro instruments.” It is also unique as it is currently the “only restorative biologic cartilage repair product approved for arthroscopic administration.” — KD

SPINE

**Major Journal Study:  
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What is “it”? It is such mind-body therapies as tai chi, qigong, and/or meditation.

The new multi-center study, titled “[A Tai Chi and Qigong Mind-Body Program for Low Back Pain: A Virtually Delivered Randomized Control Trial](#),” appears in the September 24, 2024 edition of *The North American Spine Society Journal*.

“In our multidisciplinary spine center we are always looking for the best way to treat patients effectively,” stated co-author Roger Härtl, M.D., the Hansen-MacDonald Professor of Neurological Surgery and director of Spinal Surgery at Weill Cornell Medicine in New York City.

“Only a small fraction of patients require surgery, so it is important to be able to offer those who are not surgical candidates successful treatment options. We have worked with Master Yang Yang for many years and have always been impressed by the results.”

In this randomized controlled trial, the researchers compared those who did tai chi, qigong, and meditation (n = 175) to a waitlist control (n = 175) over 12 weeks. (The waitlist control group was offered the option to participate in the free program one week after the final study follow-up.)

The team found that when compared to the control group, patients in the treatment group reported statistically and clinically significant improvement in the Oswestry Disability Index score by -4.7, -6.42, and -8.14 points at weeks 8,

12, and 16, respectively. The treatment group also experienced statistically significant improvement at all time points in the other outcomes.

Dr. Härtl: “Covid taught us how to teach and communicate remotely via ZOOM. The possibility to do the sessions via ZOOM really was one of the keys to success. For me stillness is an important way to listen to my inner self and calm down and relax, I am happy we could bring this into the way we treat patients.”

“Going forward we want to see how this treatment affects the use of pain medication and opioids, and even the success of surgery. For me as a surgeon it would be interesting to see if patients after surgery recover faster or better with tai chi.”

Also co-author on the study was Yang Yang, Ph.D., (University of Illinois) a leading tai chi and qigong educator and researcher. He explained the genesis of this program with Weill Cornell Medicine to OTW, “The program is an outgrowth of my personal recovery journey and my extensive tai chi expertise. After a 2014 bike accident, I spent three years



Courtesy of Master Yang Yang, Ph.D.

overcoming severe back pain using tai chi. My personal experience became the foundation for this program.”

“In 2019, the pandemic forced me to cancel in-person classes, so I began offering them on Zoom. A few years later, Dr. Härtl and I began studying the effectiveness of virtual classes.”

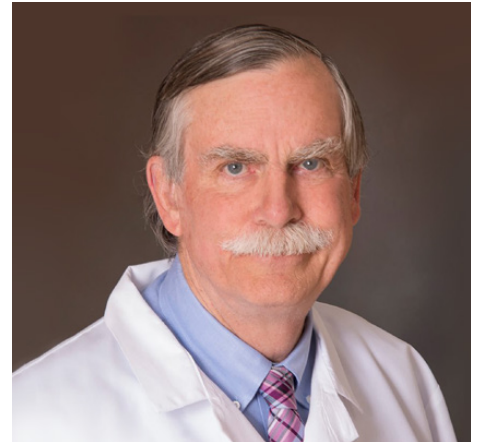
“My background includes training under top tai chi grandmasters in China, where I became a martial arts champion before bringing my expertise to the U.S. I later earned a doctorate in kinesiology at the University of Illinois at Urbana-Champaign to study the health benefits and mechanisms of tai chi. This deepened my understanding of its healing power. My own recovery inspired my passion to help others with chronic pain by sharing this ancient healing art.” — EH

PEOPLE

### Charles E. Johnston, M.D. Wins SRS Lifetime Achievement Award

Charles E. Johnston, M.D., assistant chief of staff emeritus at Texas Scottish Rite Hospital for Children, has been honored with the Lifetime Achievement Award by the the Scoliosis Research Society (SRS) at the organization’s recent annual meeting in Barcelona, Spain.

According to the Scoliosis Research Society, its Lifetime Achievement Award honors a member for distinguished service to the organization, as well as significant contributions to spinal deformity care.



Charles E. Johnston, M.D. / Courtesy of Texas Scottish Rite Hospital for Children

After attending Yale University for his undergraduate years, Charles Johnston went on to earn his M.D. at the Columbia University College of Physicians and Surgeons. He then undertook an internship at the University of Texas Health Science Center at San Antonio

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Bexar County Hospital Surgery. Dr. Johnston did his orthopedic surgery residency at the University of Virginia Medical Center, followed by a fellowship at the Scottish Rite for Children Harrington Fellowship of Pediatric Orthopaedics and Scoliosis.

A professor in the Department of Orthopaedic Surgery at the University of Texas Southwestern Medical Center at Dallas, Dr. Johnston is a reviewer for *The Journal of Bone and Joint Surgery* and the *Journal of Children's Orthopaedics*. He is a fellow in the American Academy of Orthopaedic Surgeons and serves on the executive committee of the Pediatric Spine Study Group and Foundation.

He is also a member of the Pediatric Orthopedic Society of North America, receiving its Humanitarian Award in

2020; the European Pediatric Orthopaedic Society; and the Texas Orthopedic Association. Dr. Johnston has published over 150 papers in peer-reviewed journals and approximately 30 book chapters.

Dr. Johnston told OTW, "I am most proud of the number of pediatric orthopedic fellows I have trained, mentored or in some way positively affected their careers....at last count it is around 180. This is the most important part of my career—passing along what I have learned."

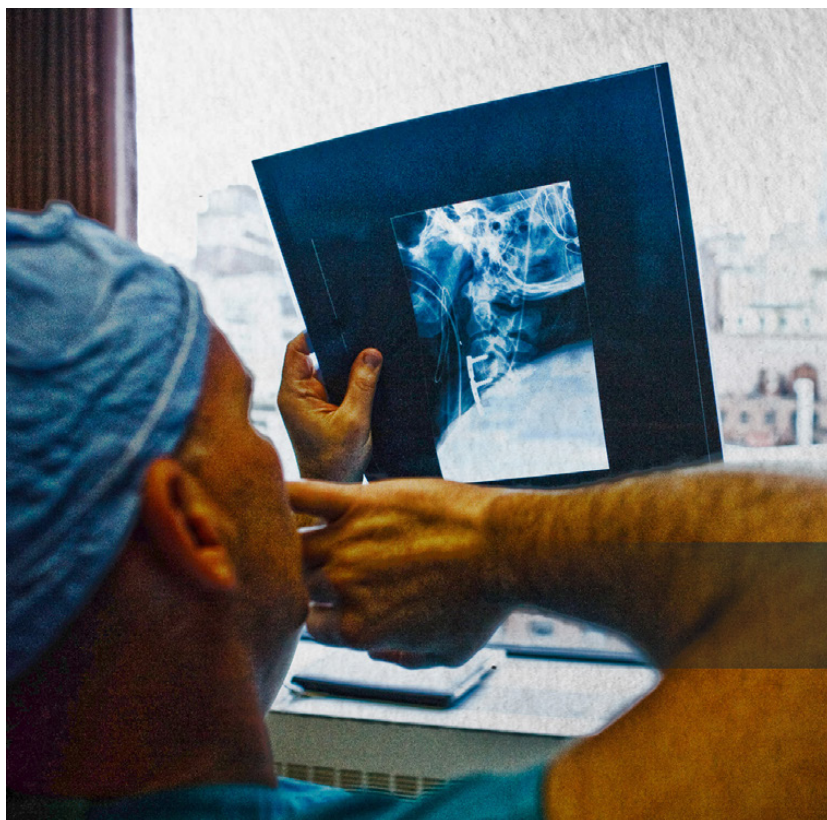
"The Lifetime Achievement Award is a stunning and gratifying recognition by my colleagues and peers of the value they place on my clinical expertise and academic advancement of our specialty's mission, providing optimal care for patients with spinal deformity." — EH

## Addisu Mesfin Receives the NASS Henry Farfan Award

Addisu Mesfin, M.D., is the 2024 recipient of the North American Spine Society's Henry Farfan Award which recognizes outstanding contributions in spine-related basic science research.



Addisu Mesfin, M.D. / Source: North American Spine Society



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Dr. Mesfin has been a member of the North American Spine Society for 15 years. He has received two best paper nominations and as served the society in many capacities including as an Annual Meeting abstract reviewer and as a member of the Section on Spine Oncology, Research Project Management Committee and Patient Safety Committee.

“Dr. Mesfin has demonstrated himself to be a dedicated researcher toward the advancement of our field in the setting of basic science research as demonstrated by his accomplishments,” said Peter Passias, M.D. in a statement.

“This complements his clinical and outcomes-based contributions to our field. We are excited to have him receive this recognition and appreciate his dedication to our society.”

Dr. Mesfin is the Vice Chair of Research and Professor of Orthopaedics at Medstar Orthopaedic Institute/Georgetown University School of Medicine. He has contributed more than 200 peer-reviewed publications and over 300 presentations at national and international meetings.

He received his medical degree from Drexel University School of Medicine and completed his orthopedic residency at the Johns Hopkins Hospital and his spine surgery fellowship at Washington University in St. Louis. Dr. Mesfin also did spine oncology training at Kanazawa University in Japan and at Rizzoli Orthopaedic Institute in Italy.

He began his career at the University of Rochester where he served as Chief of Spine Surgery, Spine Fellowship Director, and Professor.

He is also the cofounder of Jotlogs, which uses AI to provide data-driven insights to surgical teams to improve techniques, technologies, and approaches.

In an interview with *Orthopedics This Week*, Dr. Mesfin discussed the importance of NASS and the areas of spine care that draws his interest the most.

“NASS is unique because of its multidisciplinary approach to spine care. It truly captures the patient’s full journey. It is also a good forum for learning about the latest research and technology,” he explained.

On what initially drew him to spine surgery, he said he became interested in spine surgery after performing scoliosis surgeries and seeing the immediate improvements in the patient’s conditions. He was

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also inspired by his many mentors throughout his career.

As a researcher, the areas of spine care that interest him the most are improving outcomes in spinal oncology and spine trauma.

Currently, Dr. Mesfin is involved in research on decreasing complications after spinal tumor surgery as well as decreasing disparities in treating cauda equina syndrome which is a compression of multiple nerve roots caused by a herniated lumbar disk, infection, fracture, lumbar spinal stenosis, epidural hematomas, tumors and other complications.

If left untreated, it can lead to sexual dysfunction, loss of bladder or bowel control, and weakness of the legs. Most patients come from the ER and there are a lot of opportunities for disparities in treatment based on many factors, including socioeconomic factors and race/ethnicity.

On what he sees for the future of spine care, Dr. Mesfin said, “We need to focus on personalized medicine to foster a better understanding of why certain patients do well and others don’t. We also need to take a more holistic approach to deciding on what surgeries to offer each patient.”

The North American Spine Society is a medical society for health care professionals who specialize in spine care. The mission of the society, which was founded in 1985, is to promote evidence-based and ethical spine care.

NASS honors five outstanding figures in the field of spine every year. Three of the awards are named for founding members of the NASS who not only made key contributions to the field, but who have played a role in the success of the society. — TR

## Inaugural Arnold I. Caplan Award: Call for Applications

The American Academy of Orthopaedic Surgeons (AAOS) is calling for applications for the inaugural Arnold I. Caplan Award for Distinguished Research in Orthobiologics, a new award program which recognizes and honors significant contributions to advancing biologics solutions for musculoskeletal injuries or pathologies.

“Dr. Caplan was often called the ‘godfather of Medicinal Signaling Cells’—a critical thinker and scientist who spent decades exploring ways to translate stem cell biology to the clinic,” said AAOS Committee on Devices, Biologics and Technology Chair Jason L. Dragoo, M.D. “It is a pleasure to work with the Caplan family to honor his unwavering dedication to scientific advancement. This award will recognize those who embody Dr. Caplan’s spirit of innovation and excellence, and we are confident it will continue to fuel the future of orthobiologics.”

This award was created through the generosity of the Caplan family with funding overseen by the Orthopaedic Research and Education Foundation. All applications will be reviewed for scientific merit by the AAOS Committee on Devices, Biologics and Technology. The first Caplan Award recipient will be recognized at the AAOS 2025 Annual Meeting in San Diego and will receive a desktop award in addition to a cash prize of \$10,000.

“Dr. Caplan spent decades exploring ways to translate

stem cell biology to the clinic,” said Dr. Dragoo to OTW. “I think one of the highlights of his work is the description of the Medicinal Signaling Cells also known as MSCs. Applicants should know that Dr. Caplan was a pioneer in biologics. Many of his discoveries have led to patient treatments being used today. It is a pleasure to work with the Caplan family to create an award that honors his unwavering dedication to scientific advancement. Dr. Caplan was a wonderful man—a very positive and a cherished colleague to all.”

“The Caplan family is incredibly pleased to honor Arnold’s scientific legacy by bestowing this award on behalf of someone who has spent a lifetime advancing the field and recognizing the next generation of scientific explorers,” said Bonita Caplan, Arnold’s wife of 58 years.

To view the award criteria or submit an application, [click here](#). *Nomination deadline: November 3, 2024.* — EH



Arnold I. Caplan, Ph.D. / Courtesy of Case Western Reserve University

## Charles Reitman, M.D.: 2024 Winner of NASS's David Selby Award

Charles Alan Reitman, M.D., a member of the North American Spine



Charles Alan Reitman, M.D. / Courtesy of North American Spine Society

Society (NASS) since 2001, has been honored with the 2024 David Selby Award for his contributions to the practice of spine surgery, both nationally and internationally.

The David Selby award is named in honor of David K. Selby, a pioneer in spinal medicine and surgery. The award is presented to spine surgeons and researchers who have made significant contributions to the science, art, and practice of spine care.

### A Pillar of NASS

Reitman is professor and vice chairman of the department of orthopedics at Medical University of South Carolina, and co-director of the MUSC Spine Center in Charleston, South Carolina.

During his NASS membership, he has served on the Board of Directors from

2009 and 2022 and has fulfilled several administrative roles including Evidence Compilation and Analysis Chair, Research Council Director, Administrative Council Director and Education Council Director.

He also has served on the NASS Guidelines Committee, the Nominating Committee, Coverage Policy, and Payer Policy Review, and served as a program director for the NASS Annual Meeting and for the Spine Across the Sea and as program chair for the first International Annual Meeting in Bangkok.

“Charles Reitman is the quintessential surgeon and professor. He is extremely thoughtful and his dedication to promoting and advancing high quality spine care is a model for others to follow,” Christopher Kauffman, M.D., said in a statement.

“His commitment and contributions to NASS both nationally and internation-

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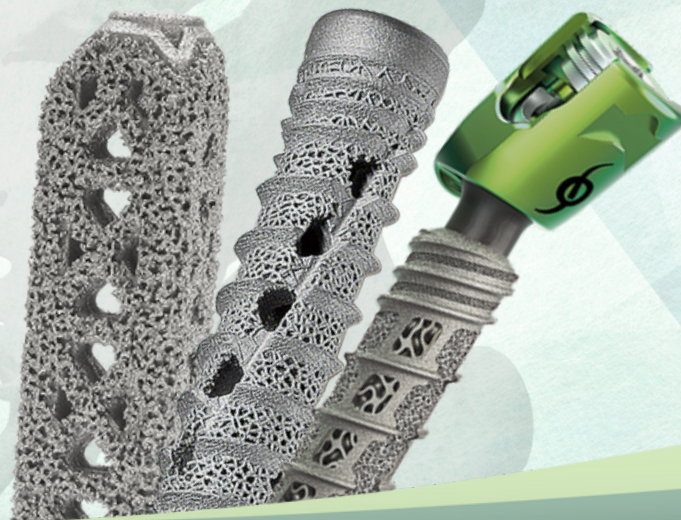
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ally make him one of the pillars of which NASS will continue to build upon. We owe him many thanks and gratitude for his volunteerism and mentorship.”

On why NASS is such an important society, Reitman told *Orthopedics This Week*, “Different societies play different roles. In my opinion, NASS is the premier spine society. It does a lot more for practitioners and providers, including advocacy, policy perspective, and insurance coverage, things providers struggle with in daily practice.”

### From PT to Spine Surgery

Reitman has a unique perspective into the world of spine surgery because of his background. He actually started out as a physical therapist before going back to school to become a spine surgeon.

He had his own physical therapy (PT) practice in California for 12 years after receiving his undergraduate degree from the University of California Davis, and many of his patients came to him with spine issues.

“A large part of my physical therapy practice was spine. I felt limited in what I could do as a PT,” he explained.

He decided to go back to school and earn his medical degree from the Baylor College of Medicine in the Texas Medical Center where he also completed his residency and fellowship. After graduating, he stayed on to teach and also served as the director of residency education for 11 years before moving to Charleston in 2015.

During his time in Houston, he served at the chief of orthopedic surgery at Ben Taub Hospital and as the department’s interim chairman for two years.

On looking back on the milestones in his long career, he said, “I always feel

like I can do better. I just try to do my best. It is all about contributing to the profession, and how we treat patients.”

He added, “Training and mentoring young doctors is also very important. You have a greater impact because not only are you touching their lives, but also the lives of their patients as well as the young doctors they go on to mentor.”

Reitman said that while he has been taking on more administrative roles in recent years, he has been involved in developing appropriate use criteria for NASS.

“We have done a good job getting it launched and with succession planning.”

At MUSC, he worked with Helix on a project which looks into how a person’s DNA affects their health. Helix is a leading population genomics company.

He has also worked with Medical Matrix Inc. (MMI), which specializes in clinical image analysis and interpretation for clinical trials, research studies and post-market initiatives. They are working on better understanding the stability and instability of spine.

MMI focuses on motion preserving technologies, including total disc replacement, disc repair, and dynamic stabilization therapies.

“Predictive analysis is very important. Spine surgery is always effective if we do [the] right procedure in [the] right patient. All these massive data should make us smarter—know better the patient selection and diagnosis. Decision-making should get better. We have always been very good at tech but continue to have difficulty in understanding the problem and the right treatment,” Reitman explained.

Reitman’s clinical experience includes treating a broad range of spinal disorders,

including degenerative disease and deformities like scoliosis and kyphosis as well as spine tumors, fractures, and other injuries.

He has had his research published over 100 times and was the Deputy Editor for *Clinical Orthopaedics and Related Research* and *The Spine Journal*.

The North American Spine Society is a medical society for health care professionals who specialize in spine care. The mission of the society, which was founded in 1985, is to promote evidence-based and ethical spine care.

The 2024 NASS 39th Annual Meeting took place September 25 through September 28 in Chicago at the McCormick Place, West Building. — TR

## Philip L. Schneider, M.D. Receives NASS’ 2024 Spine Advocacy Award

Philip L. Schneider, M.D., F.A.A.O.S. is the 2024 recipient of the North American Spine Society’s (NASS) Spine Advocacy Award.



Philip L. Schneider, M.D., F.A.A.O.S. / Courtesy of North American Spine Society

“I am very happy to be recognized for my work done in advocacy over the years,” he told *Orthopedics This Week*.

Schneider joined NASS as a fellow in 1989 and became a full member in 1990. His work with NASS has always been very important to him. “Physician societies need to represent the interest of patients. No one knows what our patients need like we do, not insurance companies or the government. We need to advocate for the best patient care,” he said.

### Advocate for Spine Care

For 33 years, Dr. Schneider has been a NASS member and, since 2018, served as NASS’ Advocacy Council Chair. He also served on NASS’ Board of Directors, many of its committees and as past president of the National Association of Spine Specialists.

“Phil has worked as a tireless advocate for us as spine professionals in his work as recent Advocacy Chair,” Heidi Hullinger, M.D., chair of NASS’ Legislative Sub-Committee, said in a statement.

“His enthusiasm for advocacy work is infectious, helping motivate others to be more involved. During a time of significant change at NASS as the organizational structure became more streamlined, he has worked to ensure that advocacy continues to be relevant within the NASS organization. He has spent countless hours meeting with legislators and also conveying any relevant information about health care policies back to NASS members.”

Schneider serves orthopedic surgery patients in Chevy Chase, Maryland,

where he is vice president of The Centers for Advanced Orthopaedics—Montgomery Orthopaedics Division. With more than 400 providers, the Center is the leading orthopedic practice in the Virginia-D.C.-Maryland region.

Schneider is also a strong advocate of spine care through his work in the American Medical Association (AMA) House of Delegates and as co-chair of Medicare’s Expert Panel on spinal fusions.

The House of Delegates is the legislative arm of the American Medical Association. State medical associations, national medical specialty societies, AMA sections, national societies and the federal services are all represented.

Schneider believes that the focus in spine care should be on preventing disabilities in spine and letting people live full active lives. We need to keep doing spine surgery safely and less invasive, he said.

### A Top Doctor

Schneider decided to train in spine surgery after performing scoliosis surgery as a resident. “I enjoyed getting kids back in shape and then translated to adults.” His expertise includes minimally invasive spine surgery, artificial disc replacement, outpatient spine surgery as well as general orthopedic surgery.

Schneider is credited with over 60 publications and major research presentations. He is also a member of the University of Maryland Board of Trustees and serves on the Board of Directors of the Terrapin Club.

He is recognized annually as a Top Doctor by the *Washingtonian Magazine* since 2003. And since 2002, he has been recognized as a Top Surgeon by *Consumer Reports*, *Consumer Checkbook*, and the Consumer Research Council.

Schneider earned his undergraduate degree from the University of Maryland and his medical degree from Howard University College of Medicine in Washington, D.C. His fellowships were with the American College of Surgeons, American Academy of Orthopaedic Surgeons and a fellowship in spine surgery at the Hospital for Joint Diseases in New York.

He is affiliated with Holy Cross Hospital and Suburban Hospitals. He is also the founder and director of the Holy Cross Hospital Spine Center, the first accredited Spine Center of Excellence in the Washington, D.C. area.

### North American Spine Society

The North American Spine Society is a medical society for health care professionals who specialize in spine care. The mission of the society, which was founded in 1985, is to promote evidence-based and ethical spine care.

NASS honors five outstanding figures in the field of spine every year. Three of the awards are named for founding members of the NASS who not only made key contributions to the field, but who have played a role in the success of the society.

The 2024 NASS 39th Annual Meeting was held September 25 through September 28 in Chicago at the McCormick Place, West Building. — TR



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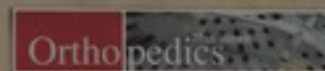
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