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## The Spine Arthroplasty Society Transition to the International Society for the Advancement of Spine Surgery

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The International Society for the Advancement of Spine Surgery (ISASS) had a truly international beginning. While its roots were academic, the founders had help from a financial source. The Viscogliosi Brothers, a New York City venture capital company, were instrumental in bringing strong personalities together and creating the first meeting in Munich, Germany. They had invested in Prodisc, an early lumbar disc replacement invented in France by Thierry Marnay. True believers in the saying "A rising tide floats all boats," they pushed to have an international meeting devoted solely to spine arthroplasty. The First Annual Spine Arthroplasty Society (SAS) Global Symposium on Motion Preservation Technology took place in Munich, Germany, in May 2001. The first Board of Directors (BOD) meeting was held there and comprised Dr. Charles Ray from the United States, Dr. Thierry Marnay from France, Dr. Stephen Hochschuler from the United States, Dr. Gary Lowery from the United States, Dr. Rudolf Bertagnoli from Germany, and Dr. Michael Mayer, also from Germany. Pascale Davis based in France was hired as the Education Director and Meeting Planner. In 2003, Hansen Yuan, MD, from the United States, and Karin Büttner-Janz, MD, MBA, from Germany, were asked to join the BOD. Dr. Yuan was an early advocate for nucleus replacement. Prof. Dr. Buttner-Janz first attained fame as a female artistic gymnast who won world and Olympic gold medals for East Germany in the early 1970s. After becoming an orthopedic surgeon, together with Prof. Dr. Kurt Schellnack, she was instrumental in the development of the Charité Lumbar Disc Replacement named for Charité Hospital in East Berlin.

By all measures, the initial meeting was an enthusiastic success, as judged in the subsequent annual events: the 2002 meetings in Montpellier, France; the 2003 meeting in Phoenix, Arizona; and the 2004 meeting in Vienna, Austria, which led to the 2005 meeting in New York City, which drew more than 1800 attendees. The exhibit and meeting rooms were overflowing, and the academic and industrial world took notice. In 2005, Hallet Mathews, MD, from the United States, was added to the BOD as an early proponent of the Maverick Lumbar Disc Replacement by Medtronic Corporation. While I missed the first meeting in Munich, I participated in all the subsequent early meetings as an early proponent of disc arthroplasty from the development team of the Flexicore Lumbar Disc as well as the Cervicore Cervical Disc replacements, Stryker Corporation. At the 2006 SAS meeting in Montreal, I was honored to be approached by Prof. Dr. Buttner-Janz and invited to the SAS BOD.

My invitation to the BOD was precipitated by being an early entrepreneur in disc arthroplasty. In 2001, myself, J.P. Errico (my nephew), Bill Cerullo, a longterm spine industry executive, as well as other investors founded SpineCore. The company quickly developed Flexicore, a lumbar disc replacement, and Cervicore, a cervical disc replacement. The lumbar US Food and Drug Administration investigational device exemption (IDE) clinical trials commenced first. In 2004, Stryker Corporation acquired SpineCore and the rights to the two products and quickly started the Cervicore IDE trial. By 2006, FDA clinical trials were in full swing with both lumbar and cervical replacements. Clinical trials enrolled quickly, and participating surgeons were enthusiastic about the results they were seeing in their patients.

Unfortunately, by 2008, despite good clinical results, the momentum for spinal arthroplasty, facing many headwinds, started to wane. First and foremost was the reluctance of insurance companies to approve new devices despite randomized clinical trials demonstrating efficacy. An insurance consultant confidentially told me at the May 2009 ISASS meeting in London that clinical evidence alone would not result in insurance approvals. He stated it was common practice to analyze the anticipated total annual costs of new technology and divide that by the total number of insured lives. If that number was over 25 cents, the companies were not interested. That was very sobering information. Furthermore, reimbursements to surgeons were an additional challenge because surgeon fees for arthroplasty lagged surgeon fees for a traditional fusion. Although the clinical efficacy of both Cervicore and Flexicore devices seemed assured, both trials had to be abandoned due to the negative economic realities of insurance authorization and low surgeon utilization.

During this period, I had the privilege of serving on the BOD from 2007 to 2010 and became president of the organization in 2008. The SAS meeting had become a must-attend meeting. It attracted many highly innovative spine surgeons from around the world, all eager to share their ideas and learn from others. It became widely evident that the society was far more than a spine arthroplasty society or even a motion preservation society. Innovative ideas were shared in cervical arthroplasty, lumbar arthroplasty, lumbar nucleus replacements, interspinous spacers, early work on spine tethering, endoscopic decompression techniques, and more. There were early trial results shared from investigational device exemption studies ongoing in multiple lumbar and cervical disc replacements. These interim reports always brought great interest from the audience because it was unusual to have such high-quality results on brand-new technologies.

During my presidential year in 2008, the topic came up as to whether the name Spine Arthroplasty Society was still appropriate for our evolving, vibrant society. Steve Garfin suggested that the "International Society for the Advancement of Spine Surgery" would be more representative of the wide breath of topics discussed at our meetings. Obviously, other names were discussed, but ISASS made eminent sense to the entire board. This was not a decision to be taken lightly, and there was considerable back and forth over the next year. A good deal of work had already been done to brand upcoming meetings. At the 11th Annual Meeting in 2011, the official change of name was made from Spine Arthroplasty Society to the International Society for the Advancement of Spine Surgery. To keep in sync, the SAS Journal in 2012 had a name change to the International Journal of Spine Surgery.

An innovative spirit prevailed in the organization, enabling nimble changes that led to significant progress during the ensuing decade. The earliest years were made possible by true leaders in spine surgery from both orthopedics and neurosurgery. It was my privilege to participate and bear witness to the society's early developmental years.

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