REVIEW ARTICLE

Utility of 3D Printing in Byzantine Spinal Surgeries: A Review

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Abstract

3-dimensional printing (3DP) is an unexpectedly developing enterprise. A spread of techniques can be used to print physical models from 3-dimensional renderings based on CAD software, and STL design files. Even as using this technology in medication remains in its infancy, 3DP offers the opportunity of revolutionizing healthcare with its capability to unexpectedly create custom designed shapes from a wide variety of materials. The usage of 3-D printed surgical fashions has been proven to assist shorten operative time, thereby boosting surgical outcomes.3-D published anatomical models had been found to enhance measurement accuracy drastically in neurosurgery, cranio-maxillofacial surgery, orthopedics, cardio-thoracic and vascular surgical operation. The present review focuses on present concepts of 3D printing in complex spinal surgeries and its real world applications.

Keywords: 3D printing, spinal surgery, CAD software

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Introduction

3-dimensional printing (3DP) is an unexpectedly developing enterprise. A spread of techniques can be used to print physical models from 3dimensional renderings based on CAD software, and STL design files. Even as using this technology in medication remains in its infancy, 3DP offers the opportunity of revolutionizing healthcare with its capability to unexpectedly create custom designed shapes from a wide variety of materials.^[1] Because of the complicated anatomy of the spine, as well as the delicate nature of the encompassing structures, any approach that could useful resource surgical planning and procedural accuracy gives the potential to enhance patient results.[2] Low by degenerative disc caused sicknesses, spinal deformities and accidents constitutes a developing hassle in the modern society, affecting over eighty% of the populace global.^[3] Most of the spinal surgical procedures are completed to alleviate decrease returned pain, which has been said to reason lack of mobility and even incapacity in a few sufferers. [4,5] However, regardless increasing clinical statistics, none of the existing

approaches have shown to be completely successful and, on the 24 month comply withup, no significant differences within the clinical outcomes had been determined. [6] Revision surgeries are often required to address bad publish-operative outcomes and they're generally related to even more perioperative headaches than number one strategies, accordingly predisposing sufferers to more prices and usage of sources.^[7] The usage of 3-D printed surgical fashions has been proven to assist shorten operative time, thereby boosting surgical outcomes.[8]

Biomodels had been useful in various branches of surgical operation, particularly whilst the processes require maneuvering around delicate neural systems, vessels and organs, and whilst the appreciation of anatomy may be hard to acquire from second radiographic pix. [9] 3-D published anatomical models had been found to enhance measurement accuracy drastically in neurosurgery, [10-12] cranio-maxillofacial surgery, orthopaedics. cardiothoracic and vascular operation.[13-15] surgical The complicated anatomy of the human body and its man or woman variances make 3-D printing perfectly suited to permit surgeons to prepare for relatively custom designed techniques

custom-designed devices that may lead to higher surgical results discount of charges and operative time. [16] Furthermore, the aggregate of opposite engineered facts from medical imaging with custom designed international anatomical shape lets in the fabrication of implants with virtually no limits at the complexity of the geometry conceivable. [17] Four areas in which presently observed programs: 3DP has developing fashions for surgical making plans and schooling; production custom-tailored drill and screw guide templates; fabricating spinal implants; and developing tissue engineered scaffolds for cartilage restore. reconstruction of the backbone and cranium has a rich and longstanding records, spanning at the least five millennia to consist of attempts in which a number of substances has been used, from fruit shells, to sheep scapulae, to guy-made plastics [18,19]. Clinical packages for 3-D printing are increasing at a fast pace and are anticipated to revolutionize health care. [20] Presently there's innovative research into the programs of 3D printing in several avenues, consisting of manufacturing of anatomical fashions, [21,22] customized prosthetics and implants, and tissue and organ fabrication, as well as drug shipping cars and discovery.^[23] There have been reviews of the software of 3-D printing for preoperative surgical making plans; [21, 22] but, there were few reports on implant design for complex spinal surgical procedure. 3-D-printed gadgets can be used to examine complex cases, to practice tactics, and to train college students and patients. [24] Furthermore, a few present-day surgical approaches are complicated and require steering to avoid adverse important elements of the frame, or to obtain an acceptable esthetic outcome. [25] Moreover, anatomical defects can require custom prosthetics to restore harm as correctly as feasible. [26]

It reproduces the morphology of the affected spinal segments from computerized tomography (CT) scans with the resource from image processing software and a speedy prototyping system to supply a tactile version in numerous substances.^[27] Currently, the 3-D printing has been broadly employed to build physical fashions for use in surgical procedures, preoperative planning, customized prosthesis fabrication and other fields.^[28-30] In complicated spinal disorders as scoliosis, the correction

manner is regularly very challenging as unexpected pedicle absence and vertebral rotations may be discovered intraoperatively, posing remarkable chance of neurovascular lesions at some point of the operation [31]

However, few researchers have been performed to examine the use of 3-D printing in this area. clinical applications for 3-D printing are expanding swiftly and are expected to revolutionize health care [32] Medical uses for 3D printing, both real and capacity, can be organized into several broad classes, such as: tissue and organ fabrication; introduction of custom designed prosthetics, implants, and fashions; and pharmaceutical anatomical research concerning drug dosage bureaucracy, transport, and discovery. [16,33,34] It's far crucial two-dimensional notice that radiographic pix, along with x-rays, magnetic resonance imaging (MRI), or computerized tomography (CT) scans, may be converted to virtual 3-D print documents, allowing the advent of complex, custom designed anatomical and systems.[35,36] In clinical medicine, technology has packages in orthopedics, spinal surgical procedure, maxillofacial operation, neurosurgery, and cardiac surgical procedure. amongst numerous other disciplines. [37] Surgical planning encompasses the whole scope of alternatives for envisioning techniques and anatomies concerned in a surgical intervention.[38]

While these assets provide some information beneficial for pre-operative visualization, they're confined of their capacity to depict all facets of a manner, which includes potential complicating elements, and can't offer surgeons tactile interaction with internal structures [39-41]

Aims & Objectives: The objective of this assessment is to summarize the literature concerning the usage of 3-D printing technology for the planning or production of patient-unique implants (PSIs) for the spinal surgical procedure.

Materials and Methods

Literature was searched using the keywords; 3 dimensional, 3D, spinal surgery, fusion in PubMed, Cochrane, Ovid database. A total of 1987 articles were found.

Results

These searches returned a blended 1987 articles, of which 353 duplicates had been eliminated, earlier than the ultimate 1634 articles have been screened by means of identify and abstract for relevancy, leaving 87 articles for full textual content evaluate. Of these, 61 had been included on this assessment.

Discussion

3DP is maximum regularly applied in a spinal surgical procedure in the pre-operative strategy planning stage. A complete-scale, stereoscopic know-how of the pathology allows for unique planning and simulation of the process. [21,22,42-44] Sugimoto et al; [45] reported that the usefulness of 3DP increases with the complexity of the pathology, with the physician's ability to maneuver a version being useful to comprehend affected person's anatomy while not having to mentally reconstruct more than one 2nd snap shots. The advanced visualization and training afforded via the usage of individualized models have scientific benefits, with reduced operation time and perioperative blood loss being most typically suggested. [46-48] Reduction in operation time of 15-20% has been reported in multiple studies [22,49,50] throughout numerous surgical strategies. The primary reasons given for decreased operation time included a greater developed expertise of the pathology, inclusive of the vicinity and surgical method, and the facilitation of pre-operative instrumentation choices. [22, 52-54] Izatt et al; [22] determined that using a 3DPbiomodel stepped forward surgical outcomes in seventy-eight % of cases, although this is contradicted by Li et al; [47] who stated no alternate in hardship quotes or clinical outcomes.

The getting to know curve for the desired familiarity with the software program has also been reported as a barrier. [47,54] As time taken to create the fashions and the associated fees maintain to say no, there must be an increase in the use of this generation in medical practice. In one take a look at [56] anxiety-related pain turned into determined only to be relieved after a patient understood her circumstance with the useful resource of a bio model, suggesting using models in affected person education might also enhance clinical results.

Intra-operative guides, created with patientprecise data, can also have the potential to mitigate the dangers related to these strategies. [57-62]

Using intra-operative imaging will increase dangerous radiation exposure for each doc and patients. [63] 3DP publications can also offer an opportunity as an easy, convenient, low price and complex-equipment free manner to improve the accuracy of pedicle screw placement. [60,64] Several the research tested that the publications assist to lower operation time, with Deng et al; [62] suggesting this could decrease headaches related to operative time (e.g., contamination). Other advantages include reduced intra-operative radiation, the simplicity of use, elimination of procedural subjectivity, enhanced pre-operative planning and mild fee in contrast with different strategies. [60] Rong et al; [65] utilized 3DP to create courses for expansive open-door laminoplasty in cervical myelopathy. authors also prevented iatrogenic Some complications with a customized osteotomy device guiding resection of a large sacral schwannoma. [66-69] The cases completed so far constrained to anatomically uncommon pathologies wherein individualized strategy to repair affected personunique anatomy is a key prognostic component. [59,70] With the aid of presenting a number of sizes of implants, together with parameters consisting of widths, heights, lengths, and angles, spinal instrumentation may be utilized in sufferers at the same time as minimizing complications inclusive of implant migration and pressure-shielding.^[71-73]

But, numerous research has proven that they are significantly extra high-priced to fabricate in comparison to the older types of vertebral frame replacements and that the biomechanical stability of newly advanced expandable cages is set equal to that of both non-expandable cages. [74,75] The rapid-prototype model is in the long run put up-processed. Whilst quite a number three-D structures were developed for commercial use; stereolithography (SLA), multijet modeling (MJM), selective laser sintering (SLS) and fused deposition modeling (FDM) are the principle techniques which have explored for packages. [76,77] However, it's miles extensively greater labor intensive and costly in assessment with different three-D printing strategies.^[78-80] MJM techniques permit excessive decision similar to laser-based structures; but, printing materials used by jetting-based techniques are restricted and the high price of these printers make this technology greater suitable for huge-scale manufacturing.^[81-83]

3-D printing for spinal applications: With the purpose of increasing the accuracy of screw placement at some point of spinal surgical procedures, research has been a focus on improving instrumentation by means of using affected person-precise screw guides. Currently, 3-D printing of patient-unique guide templates for screw insertion and fixation in the course of spinal surgery methods had been suggested. Several clinical and cadaveric studies have been concerned with the assessment of the location accuracy of intraoperative screws inserted via 3d printed drill manual templates. [84,85] In 2 studies [86,87] 3 styles of templates for specific multistep steering had been fabricated via a polyjet technology with a patient-particular technique to specially designed in shape and lock templates.

Spinal implants: 3-D printing era is these days rising as a subject of interest in production spinal cages for interbody fusion surgery and vertebral frame replacement (vbr) as well as disc implants for overall disc replacement (TDR). For this reason, with the reason of decreasing stiffness at the same time as increasing osteointegration, Lin et al; [85] evolved a porous Ti-6Al-4V most reliable-shape fusion cage fabricated by using SLM process with consistent mechanical residences. In recent research, optimally designed biodegradable intervertebral fusion cages had been fabricated in poly (e-(PCL) combined caprolactone) Hydroxyapatite (HA) the usage of a selective laser sintering (SLS) stable freeform fabrication machine.[88, 89]

Spetzger et al; [87] completed a pilot venture of the primary implantation with an anterolateral trendy technique of a custom-designed cervical titanium cage, made of trabecular titanium and synthetic with direct steel printing. 3-D printing era has been these days explored as an excessive potential method to fabricate accurate affected person-precise self-stabilizing artificial vertebral

our bodies for tumor resection and bony reconstruction at the top cervical backbone. [88,89] Attempts to create a custom-designed conformal intervertebral disc the use of additive manufacturing technologies were conducted with the aid of de beer et al. [89] Domanski et al; [90] have recently performed a preliminary research of applicability and diploma of the suitability of three-D printing techniques for the manufacturing of intervertebral disc implants.

Conclusion

3DP technologies area critical device in spinal research, and have proven promise in scientific packages including making plans, improving accuracies, and presenting patient-unique instrumentations. But, there are handiest few reports associated with the packages of personalized 3-D revealed spinal implants for interbody fusion, vertebral frame replacement or total disc alternative. However, current cartilage tissue engineering techniques are not but able to generating new tissue indistinguishable from local IVD. In addition, investigative paintings are needed to replacement nucleus polposus and annulus fibrosus tissues for intervertebral disc repair and to beautify cost-effectiveness of the clinical intervention.

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References

- 1. Ventola C. Medical Applications for 3D Printing: Current and Projected uses. P T. 2014; 39(10):704-11.
- Tack P, Victor J, Gemmel P, et al. 3D-printing techniques in a medical setting: a systematic literature review. Biomed Eng Online. 2016; 15:115.
- Furtado R, Ribeiro L, de A, et al. Nonspecific low back pain in young adults: Associated risk factors. RevistaBrasileira de Reumatologia (English Edition). 2014; 54: 371-77.
- 4. Berg S, Tropp H, Leivseth G. Disc height and motion patterns in the lumbar spine in patients operated with total disc replacement or fusion for discogenic back pain. Results from a randomized controlled trial. Spine J. 2011; 11: 991-98.
- Walczynska D, Baron S. The biomechanical and functional relationship between temporomandibular dysfunction and cervical spine pain. Acta of bioengineering and biomechanics / WroclawUniversity of Technology, 2011; 13: 93-98.
- Shichang L, Yueming S, Limin L, et al. Clinical and radiologic comparison of dynamic cervical implant arthroplasty and cervical total disc replacement for single-level cervical degenerative disc disease. Journal of clinical Neuroscience. 2016; 27:102-09.
- Kalakoti P, Missios S, Maiti T, et al. Inpatient Outcomes and Postoperative Complications After Primary Versus Revision Lumbar Spinal Fusion Surgeries for Degenerative Lumbar Disc Disease: A National (Nationwide) Inpatient Sample Analysis, 2002–2011. World Neurosurgery. 2016; 85: 114-24.

- Shafiee A, Atala A. Printing Technologies for Medical Applications. Trends in Molecular Medicine. 2016; 22(3):254-65.
- Malik H, Darwood A, Shaunak S, et al. Three-dimensional printing in surgery: a review of current surgical applications. Journal of Surgical Research. 2015; 199: 512-22.
- Ryan J, Almefty K, Nakaji P et al. Cerebral Aneurysm Clipping Surgery Simulation Using Patient-specific 3D Printing and Silicone Casting. World Neurosurgery. 2016; 88:175-81.
- Anderson J, Thompson W, Alkattan A, et al. Threedimensional printing of anatomically accurate, patientspecific intracranial aneurysm models. Journal of Neurointerventional surgery. 2016; 8(5):517-20.
- Weinstock P, Prabhu S, Flynn K, et al. Optimizing cerebrovascular surgical and endovascular procedures in children via personalized 3D printing. Journal of Neurosurgery Pediatrics. 2015; 33:1-6.
- Mottl-Link, Hubler M, Kuhne T, et al. Physical models aiding in complex congenital heart surgery. The Annals of thoracic surgery. 2008; 86: 273-77.
- Schmauss D, Haeberle S, Hagl C et al. Three-dimensional printing in cardiac surgery and interventional cardiology: a single-center experience. European journal of cardio-thoracic surgery: official journal of the European Association for Cardio-thoracic Surgery. 2015; 47: 1044-52.
- Ripley B, Kelil T, Cheezum M, et al. 3D printing based on cardiac CT assists anatomic visualization prior to transcatheter aortic valve replacement. Journal of Cardiovascular Computed Tomography. 2016; 10(2): 28-36.
- Klein G, Lu Y, Wang M. 3D printing and neurosurgeryready for prime time? World Neurosurgery. 2013; 80(3-4):233-35.
- Ramin E, Harris R. Advanced computer-aided design for bone tissue-engineering scaffolds. Proceedings of the Institution of Mechanical Engineers, Part H: Journal of Engineering in Medicine. 2009; 223(7):289-01.
- Sanan A. Repairing holes in the head: a history of cranioplasty. Neurosurgery. 1997;40(3):588-603.
- Tan E, Ling J, Dinesh S. The feasibility of producing patientspecific acrylic cranioplasty implants with a low-cost 3D printer. J Neurosurg. 2016; 124(5):1531-7.
- Schubert C, van L, Donoso L. Innovations in 3D printing: a 3D overview from optics to organs. Br J Ophthalmol., 2014; 98:159–161.
- D'Urso P, Askin G, Earwaker J, et al: Spinal biomodeling. Spine. 1999; 24:1247–51.
- Izatt M, Thorpe P, Thompson R, et al: The use of physical biomodelling in complex spinal surgery. Eur Spine J. 2007; 16:1507–18.
- Wurm G, Tomancok B, Pogady P, et al. Cerebrovascular stereolithographic biomodeling for aneurysm surgery. J Neurosurg. 2004; 100(1):139–45.
- D'Urso P, Thompson R, Atkinson R, et al. Cerebrovascular biomodelling: a technical note. Surg Neurol. 1999; 52(5):490–500.
- D'Urso P, Earwaker W, Barker T, et al. Custom cranioplasty using stereolithography and acrylic. Br J Plast Surg. 2000; 53(3):200-04.
- Lohfeld S, Barron V, McHugh P. Biomodels of bone: a review. Ann Biomed Eng. 2005; 33:1295-1311.
- Bagaria V, Deshpande S, Rasalkar D, et al. Use of rapid prototyping and three-dimensional reconstruction modeling in the management of complex fractures. Eur J Radiol. 2011; 80:814-20.
- Benum P, Aamodt A, Nordsletten L. Customised femoral stems in osteopetrosis and the development of a guiding system for the preparation of an intramedullary cavity: a report of two cases. J Bone J Surg Br. 2010; 92:1303-1305.
- Cui X, Breitenkamp K, Finn MG, et al. Direct human cartilage repair using three-dimensional bioprinting technology. Tissue Eng Part A. 2012; 18:1304-1312.

- Hedequist D. Surgical treatment of congenital scoliosis. Orthop Clin North Am. 2007; 38:497-509.
- Schubert C, van Langeveld MC, Donoso LA. Innovations in 3D printing: a 3D overview from optics to organs. Br J Ophthalmol2014; 98(2):159–61.
- 32. Banks J. Adding value in additive manufacturing: Researchers in the United Kingdom and Europe look to 3D printing for customization. IEEE Pulse 2013;4(6):22–26.
- Mertz L. Dream it, design it, print it in 3-D: What can 3-D printing do for you? IEEE Pulse 2013; 4(6):15–21.
- Ursan I, Chiu L, Pierce A. Three-dimensional drug printing: a structured review. J Am Pharm Assoc2013; 53(2):136–44.
- Cui X, Boland T, D'Lima DD, Lotz MK. Thermal inkjet printing in tissue engineering and regenerative medicine. Recent Pat Drug DelivFormul2012; 6(2):149–55.
- Philip Tack, Jan Victor, Paul Gemmel and LievenAnnemans.
 3D-printing techniques in a medical setting: a systematic literature review.BioMedEngOnLine (2016) 15:115.
- Kim GB et al. Three-Dimensional Printing: Basic Principles and Applications in Medicine and Radiology. Korean J Radiol. 2016; 17(2): 182-97.
- Matsumoto JS et al. Three-dimensional Physical Modeling: Applications and Experience at Mayo Clinic. Radiographics. 2015;35(7):1989-06.
- Alali A, et al. Three-Dimensional Printing Surgical Applications. Eplasty. 2015; 15: e37.
- Objet500 and Objet350 Connex3. Retrieved July 11, 2016, from http://www.stratasys.com/3d-printers/production-series/connex3-systems
- Mao K, Wang Y, Xiao S, et al. Clinical application of computer-designed polystyrene models in complex severe spinal deformities: a pilot study. Eur Spine J 2010; 19:797-802.
- Wang Y, Yang X, Yan B, et al. Clinical application of threedimensional printing in the personalized treatment of complex spinal disorders. Chin J Traumatol 2016; 19:31-4.
- Wu A, Shao Z, Wang J, et al. The accuracy of a method for printing three-dimensional spinal models. PLoS One 2015; 10:e0124291.
- D'Urso P, Williamson O, Thompson R. Biomodeling as an aid to spinal instrumentation. Spine. 2005; 30:2841-5.
- Sugimoto Y, Tanaka M, Nakahara R, et al. Surgical treatment for congenital kyphosis correction using both spinal navigation and a 3-dimensional model. Acta Med Okayama. 2012; 66:499-502.
- Guarino J, Tennyson S, McCain G, et al. Rapid prototyping technology for surgeries of the pediatric spine and pelvis: benefits analysis. J Pediatr Orthop. 2007; 27:955-60.
- Li C, Yang M, Xie Y, et al. Application of the polystyrene model made by 3-D printing rapid prototyping technology for operation planning in revision lumbar discectomy. J Orthop Sci. 2015; 20:475-80.
- 48. Yang M, Li C, Li Y, et al. Application of 3D rapid prototyping technology in posterior corrective surgery for adolescent idiopathic scoliosis patients. Medicine (Baltimore). 2015; 94:e582.
- D'Urso P, Barker T, Earwaker W, et al. Stereolithographic biomodelling in cranio-maxillofacial surgery: a prospective trial. J Craniomaxillofac Surg. 1999; 27:30-7.
- Mizutani J, Matsubara T, Fukuoka M, et al. Application of full-scale three-dimensional models in patients with a rheumatoid cervical spine. Eur Spine J. 2008; 17:644-49.
- Baskaran V, Štrkalj G, Štrkalj M, et al. Current Applications and Future Perspectives of the Use of 3D Printing in Anatomical Training and Neurosurgery. Front Neuroanat. 2016; 10:69.
- Guo F, Dai J, Zhang J, et al. Individualized 3D printing navigation template for pedicle screw fixation in an upper cervical spine. PLoS One. 2017; 12:e0171509.

- Liew Y, Beveridge E, Demetriades A, et al. 3D printing of patient-specific anatomy: A tool to improve patient consent and enhance imaging interpretation by trainees. Br J Neurosurg. 2015; 29:712-4.
- 54. Madrazo I, Zamorano C, Magallón E, et al. Stereolithography in spine pathology: a 2-case report. Surg Neurol. 2009; 72:272-75.
- Provaggi E, Leong JJ, Kalaskar DM. Applications of 3D printing in the management of severe spinal conditions. Proc Inst MechEng H. 2017; 231:471-86.
- Phan K, Sgro A, Maharaj MM, et al. Application of a 3D custom printed patient-specific spinal implant for C1/2 arthrodesis. J Spine Surg. 2016; 2:314-18.
- Sugawara T, Higashiyama N, Kaneyama S, et al. Accurate and Simple Screw Insertion Procedure With Patient- Specific Screw Guide Templates for Posterior C1-C2 Fixation. Spine (Phila Pa 1976). 2017; 42:E340-E6.
- Owen BD, Christensen GE, Reinhardt JM, et al. Rapid prototype patient-specific drill template for cervical pedicle screw placement. Comput Aided Surg. 2007; 12:303-8.
- Lu S, Xu Y, Zhang Y, et al. A novel computer-assisted drill guide template for lumbar pedicle screw placement: a cadaveric and clinical study. Int J Med Robot. 2009; 5:184-91.
- Chen H, Guo K, Yang H, et al. Thoracic Pedicle Screw Placement Guide Plate Produced by Three-Dimensional (3-D) Laser Printing. Med SciMonit. 2016; 22:1682-86.
- Otsuki B, Takemoto M, Fujibayashi S, et al. Utility of a custom screw insertion guide and a full-scale, color-coded 3D plaster model for guiding safe surgical exposure and screw insertion during spine revision surgery. J Neurosurg Spine. 2016; 25:94-02.
- Deng T, Jiang M, Lei Q, et al. The accuracy and the safety of individualized 3D printing screws insertion templates for cervical screw insertion. Comput Assist Surg (Abingdon). 2016; 21:143-9.
- Lu T, Liu C, Dong J, et al. Cervical screw placement using rapid prototyping drill templates for navigation: a literature review. Int J Comput Assist Radiol Surg. 2016; 11:2231-40.
- 64. Wu A, Wang S, Weng W, et al. The radiological feature of anterior occiput-to-axis screw fixation as it guides the screw trajectory on 3D printed models: a feasibility study on 3D images and 3D printed models. Medicine (Baltimore). 2014; 93:e242.
- Rong X, Wang B, Deng Y, et al. Three-dimensional Printed Patient-specific Drilling Templates for Expansive Open-door Laminoplasty. Chin Med J (Engl). 2016; 129:2644-6.
- Lin C, Fang J, Lin R. Resection of giant invasive sacral schwannoma using image-based customized osteotomy tools. Eur Spine J. 2016; 25:4103-7.
- Mobbs R, Coughlan M, Thompson R, et al. The utility of 3D printing for surgical planning and patient-specific implant design for complex spinal pathologies: case report. J Neurosurg Spine. 2017; 26:513-8.
- Lamellar 3D Titanium Technology. 2015. Available online: http://www.k2m.com/platform-technologies/technology/lamellar-titanium-technology [accessed on 12-01-2018]
- 69. Titanium Manufacturing Overview. 2016. Available online: http://www.stryker.com/builttofuse/media/assets/ TRITA-BR-2 Titanium Manufacturing Overview FINAL.pdf [accessed on 25-02-2018]
- Xu N, Wei F, Liu X, et al. Reconstruction of the Upper Cervical Spine Using a Personalized 3D-Printed Vertebral Body in an Adolescent With Ewing Sarcoma. Spine (Phila Pa 1976). 2016; 41: E50-4.
- Zeman J, Matejka J, Belatka J and Vodicka J. Vertebral body replacement with a Synex implant. Rozhledy v chirurgii: mesicnik Československé chirurgické společnosti. 2007; 86: 263-67.

- Kandziora F, Schnake K, Klostermann C, et al. Vertebral body replacement in spine surgery. Der Unfallchirurg. 2004; 107: 354-71
- Chae M, Rozen W, McMenamin P, Findlay M, et al. Emerging Applications of Bedside 3D Printing in Plastic Surgery. Frontiers in Surgery. 2015; 2: 25.
- Birtchnell T and Urry J. 3D SF and the future. Futures. 2013;
 50: 25-34
- Cohen A, Laviv A, Berman P, et al. Mandibular reconstruction using stereolithographic 3-dimensional printing modeling technology. Oral Surgery, Oral Medicine, Oral Pathology, Oral Radiology, and Endodontology. 2009; 108: 661-6.
- Kruth J, Wang X, Laoui T, et al. Lasers and materials in selective laser sintering. Assembly Automation. 2003; 23: 357-71.
- Vaezi M, Yang S. 2 Freeform fabrication of nanobiomaterials using 3D printing. In: Narayan R, (ed.). Rapid Prototyping of Biomaterials. Woodhead Publishing. 2014; 16-74.
- Vaezi M, Seitz H, Yang S. A review on 3D micro-additive manufacturing technologies. The International Journal of Advanced Manufacturing Technology. 2012; 67: 1721-54.
- Dimitrov D, Schreve K, Beer N. Advances in threedimensional printing – state of the art and future perspectives. Rapid Prototyping Journal. 2006; 12: 136-47.
- Schubert C, van L, Donoso L. Innovations in 3D printing: a 3D overview from optics to organs. The British journal of ophthalmology. 2014; 98: 159-61.
- Chen H, Wu D, Yang H, et al. Clinical Use of 3D Printing Guide Plate in Posterior Lumbar Pedicle Screw Fixation. Medical science monitor: international medical journal of experimental and clinical research. 2015; 21: 3948-54.
- Berry E, Cuppone M, Porada S, et al. Personalised imagebased templates for intra-operative guidance. Proceedings of the Institution of Mechanical Engineers Part H, Journal of engineering in medicine. 2005; 219: 111-8.
- Kaneyama S, Sugawara T, Sumi M, et al. A novel screw guiding method with a screw guide template system for posterior C-2 fixation: clinical article. Journal of neurosurgerySpine. 2014; 21: 231-8.
- Sugawara T, Higashiyama N, Kaneyama S, et al. Multistep pedicle screw insertion procedure with patient-specific lamina fit-and-lock templates for the thoracic spine: clinical article. Journal of Neurosurgery Spine 2013; 19: 185-90.
- Lin C, Wirtz T, LaMarca F et al. Structural and mechanical evaluations of a topology optimized titanium inter body fusion cage fabricated by selective laser melting process. Journal of Biomedical Materials Research Part A. 2007; 83(A): 272-9.
- 86. Kang H, Hollister S, La M, et al. Porous Biodegradable Lumbar Inter body Fusion 29 Cage Design and Fabrication Using Integrated Global-Local Topology Optimization With Laser Sintering. 30 Journal of biomechanical engineering. 2013; 135: 1010131-8.
- 87. Spetzger U, Frasca, Konig S. Surgical planning, manufacturing and implantation of an individualized cervical fusion titanium cage using patient-specific data. European spine journal: official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section 45 of the Cervical Spine Research Society. 2016
- Yang J, Cai H, Lv J, et al; In vivo study of a self-stabilizing artificial vertebral body fabricated by electron beam melting. Spine. 2014; 39: E486-92.
- Beer N, Merwe A. Patient-specific intervertebral disc implants using rapid manufacturing technology. Rapid Prototyping Journal. 2013; 19: 126-39.
- Domanski J, Skalski K, Grygoruk R and Mróz A. Rapid prototyping in the intervertebral implant design process. Rapid Prototyping Journal. 2015; 21: 735-46.