Europe Market Report for Minimally Invasive Interbody Devices 2017 - MedCore

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Traditionally, these devices were implanted through open surgery. However, a growing number of these devices are being implanted using minimally invasive surgery (MIS) techniques. MIS spinal fusion is made possible by complex and innovative surgical technology, allowing implantation of posterior screw/rod and interbody devices with minimal surgical damage or harm to the patient. Proponents of MIS report that patients experience less trauma, have shorter hospital stays, use less medication after surgery and return to work sooner than patients who undergo open surgery. Skeptics of these techniques question the quality of the operation and cite that reduced access to the spine may compromise their ability to address the pathology.

Interbody devices, which are sometimes referred to as interbody cages, vary widely, and there are multiple ways of classifying them. In terms of design, interbody devices come as cages or spacers, each varying in size and shape.

For the purpose of this report, interbody devices are segmented by surgical approach.

Interbody (IB) devices are designed to replace the intervertebral discs of the spine; this enhances stability in the region and promotes fusion between the two vertebral bodies. These devices are threaded, allowing them to be used in conjunction with bone graft material. Over time, the packed graft is gradually replaced by natural bone, forming a solid piece. IB fusion procedures typically add a posterior fixation device to the associated level. These procedures are often referred to as 360° fusions, as surgeons will implant interbody devices from an anterior approach and flip the patient over to implant a posterior pedicle screw device. This combination increases the fusion success rate over standalone interbody fusion device implantation without the addition of fixation devices.
RESEARCH METHODOLOGY 13
1.1 RESEARCH SCOPE 13
1.2 IDATA'S 9-STEP METHODOLOGY 13
Step 1: Project Initiation & Team Selection 13
Step 2: Prepare Data Systems and Perform Secondary Research 15
Step 3: Preparation for Interviews & Questionnaire Design 16
Step 4: Performing Primary Research 17
Step 5: Research Analysis: Establishing Baseline Estimates 19
Step 6: Market Forecast and Analysis 20
Step 7: Identify Strategic Opportunities 22
Step 8: Final Review and Market Release 23
Step 9: Customer Feedback and Market Monitoring 24
DISEASE OVERVIEW 25
2.1 INTRODUCTION 25
2.1.1 Degenerative Disc Disease 25
2.1.1.1 Disc Herniation 25
2.1.1.2 Stenosis 26
2.1.1.3 Spondylothesis 27
2.1.1.4 Arthritis 27
2.1.2 Spinal Deformities 27
2.1.2.1 Scoliosis 27
2.1.2.2 Kyphosis and Lordosis 28
2.1.3 Trauma and Tumor 29
2.1.4 Vertebral Compression Fractures 29
2.1.4.1 Osteoporosis 29
2.1.4.2 Vertebral Compression Fractures 30
PRODUCT ASSESSMENT 31
3.1 PRODUCT PORTFOLIOS 31
3.1.1 Interbody Devices 31
3.1.1.1 Approaches 32
3.1.1.1.1 ALIF 32
3.1.1.1.2 PLIF 32
3.1.1.1.3 TLIF 32
3.1.1.1.4 Minimally Invasive PLIF 32
3.1.1.1.5 Minimally Invasive TLIF 33
3.1.1.1.6 LLIF 34
3.1.1.1.7 OLIF 34
3.1.1.1.8 Cervical 34
3.1.1.1.9 VBR/Corpectomy 34
3.1.1.2 Materials 34
3.1.1.2.1 Metal 34
3.1.1.2.2 PEEK 35
3.1.1.2.3 Machined Bone Allograft 35
3.1 FDA RECALLS 38
3.1.1 Alphatec Spine 38
3.1.2 DePuy Synthes 38
3.1.3 Medtronic 39
3.1.4 Orthofix 40
3.1.5 Stryker 41
3.1.6 Zimmer Biomet 42
3.2 CLINICAL TRIALS 43
3.2.1 DePuy Synthes 43
3.2.2 Globus Medical 43
3.2.3 K2M 44
3.2.4 Medtronic 45
3.2.5 Stryker 46
3.2.6 Zimmer Biomet 47
COUNTRY PROFILES 48
4.1 INTRODUCTION 48
4.1.1.1 Population 48
4.1.1.2 Median Age 48
4.1.1.3 GDP Per Capita 48
4.1.1.4 Price Index 48
4.2 GERMANY 49
4.3 FRANCE 50
4.4 UNITED KINGDOM 51
4.5 ITALY 52
4.6 SPAIN 53
4.7 BENELUX 54
4.8 SCANDINAVIA 55
4.9 AUSTRIA 56
4.10 SWITZERLAND 57
4.11 PORTUGAL 58
MIS INTERBODY DEVICE MARKET 59
5.1 INTRODUCTION 59
5.1.1 Approach Types 60
5.1.1.1 Minimally Invasive Posterior Lumbar Interbody Fusion 60
5.1.1.2 Minimally Invasive Transforaminal Lumbar Interbody Fusion 60
5.1.1.3 Lateral Lumbar Interbody Fusion 61
5.1.1.4 Direct Lateral Interbody Fusion 61
Figure 5 1: MIS Interbody Device Market by Segment, Europe, 2013 – 2023 (€M) 64
Figure 5 2: MIS Interbody Device Market by Segment, Europe, 2013 – 2023 (US$M) 64
Figure 5 3: Total MIS Interbody Device Market, Europe, 2013 – 2023 67
Figure 5 4: Units Sold by Country, Total MIS Interbody Device Market, Europe, 2013 – 2023 69
Figure 5 5: Average Selling Price by Country, Total MIS Interbody Device Market, Europe, 2013 – 2023 (€) 70
Figure 5 6: Average Selling Price by Country, Total MIS Interbody Device Market, Europe, 2013 – 2023 (US$) 71
Figure 5 7: Market Value by Country, Total MIS Interbody Device Market, Europe, 2013 – 2023 (€M) 72
Figure 5 8: Market Value by Country, Total MIS Interbody Device Market, Europe, 2013 – 2023 (US$M) 73
Figure 5 9: MIPLIF Market, Europe, 2013 – 2023 75
Figure 5 10: Units Sold by Country, MIPLIF Market, Europe, 2013 – 2023 77
Figure 5 11: Average Selling Price by Country, MIPLIF Market, Europe, 2013 – 2023 (€) 78
Figure 5 12: Average Selling Price by Country, MIPLIF Market, Europe, 2013 – 2023 (US$) 79
Figure 5 13: Market Value by Country, MIPLIF Market, Europe, 2013 – 2023 (€M) 80
Figure 5 14: Market Value by Country, MIPLIF Market, Europe, 2013 – 2023 (US$M) 81
Figure 5 15: MITLIF Market, Europe, 2013 – 2023 83
Figure 5 16: Units Sold by Country, MITLIF Market, Europe, 2013 – 2023 85
Figure 5 17: Average Selling Price by Country, MITLIF Market, Europe, 2013 – 2023 (€) 86
Figure 5 18: Average Selling Price by Country, MITLIF Market, Europe, 2013 – 2023 (US$) 87
Figure 5 19: Market Value by Country, MITLIF Market, Europe, 2013 – 2023 (€M) 88
Figure 5 20: Market Value by Country, MITLIF Market, Europe, 2013 – 2023 (US$M) 89
Figure 5 21: LLIF Market, Europe, 2013 – 2023 91
Figure 5 22: Units Sold by Country, LLIF Market, Europe, 2013 – 2023 93
Figure 5 23: Average Selling Price by Country, LLIF Market, Europe, 2013 – 2023 (€) 94
Figure 5 24: Average Selling Price by Country, LLIF Market, Europe, 2013 – 2023 (US$) 95
Figure 5 25: Market Value by Country, LLIF Market, Europe, 2013 – 2023 (€M) 96
Figure 5 26: Market Value by Country, LLIF Market, Europe, 2013 – 2023 (US$M) 97
Figure 5 27: OLIF Market, Europe, 2013 – 2023 99
Figure 5 28: Units Sold by Country, OLIF Market, Europe, 2013 – 2023 101
Figure 5 29: Average Selling Price by Country, OLIF Market, Europe, 2013 – 2023 (€) 102
Figure 5 30: Average Selling Price by Country, OLIF Market, Europe, 2013 – 2023 (US$) 103
Figure 5 31: Market Value by Country, OLIF Market, Europe, 2013 – 2023 (€M) 104
Figure 5 32: Market Value by Country, OLIF Market, Europe, 2013 – 2023 (US$M) 105
Figure 5 33: Drivers and Limiters, Dental Cement Market, Europe, 2016 108
Figure 5 34: Leading Competitors, MIS Interbody Device Market, Europe, 2016 112

Companies Mentioned:

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DePuy Synthes
Orthofix
Zimmer Biomet
Stryker
Merit Medical
Globus Medical
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