

Endoscopic Spine Surgery with James Watt

- First in Northland and Kensington Hospital

Patients in Northland now have access to keyhole spine surgery at Kensington Hospital — a minimally invasive alternative to traditional spinal surgery.

Spine Surgery: Introducing Full-Endoscopic Techniques to New Zealand

James Watt and Kensington Hospital currently leading the introduction of a dedicated endoscopic spine service. After undergoing training in Germany and Australia, James recently successfully performed the first endoscopic lumbar spine decompression and discectomy in Northland and for Kensington Hospital.

Endoscopic surgery offers patients a genuinely minimally invasive alternative to conventional open spine surgery, with procedures including:

- **Endoscopic lumbar discectomy** – treats acute disc herniations via a working channel with continuous visualisation.
- **Endoscopic decompression of foraminal and lateral recess stenosis** – eliminating the need for segmental fusion in appropriately selected patients.

Adding to traditional open and microscope-assisted cervical, thoracic and lumbar surgical procedures, endoscopy serves to minimise disruption to musculature and stabilising structures, reduce postoperative pain and allow early mobilisation with same-day discharge possible in suitable cases.

Why Early Referral Matters

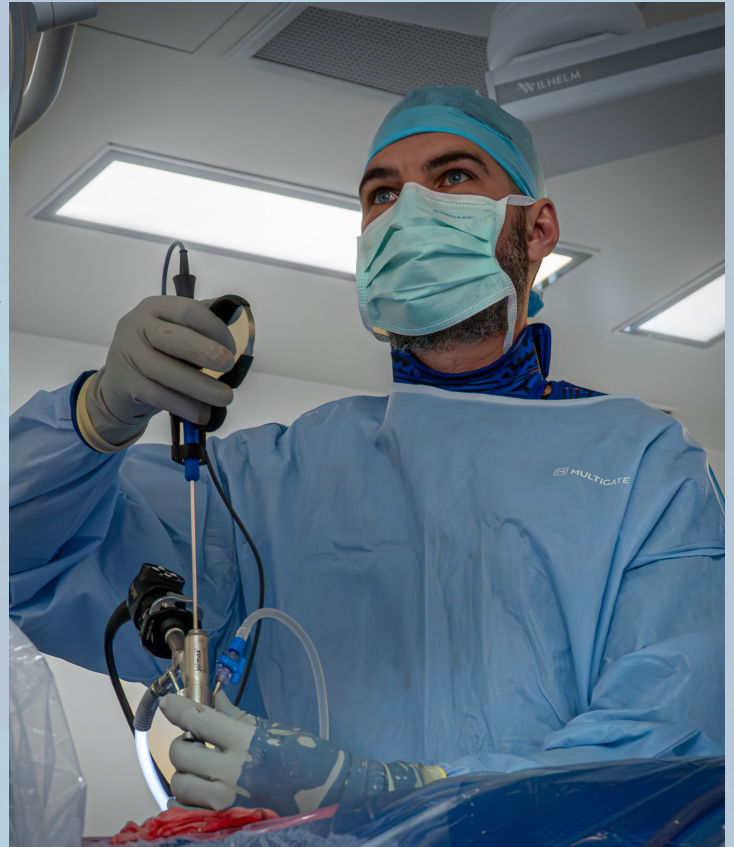
The case for earlier referral in spine care

While the majority of patients with symptoms from spinal pathology can continue to be managed conservatively, we are entering a new era where the threshold for safe, effective, and well-tolerated surgery is changing.

Patients are often hesitant to consider traditional “open” back surgery, even when their symptoms are severe. Endoscopic techniques now allow us to offer surgical relief in a way that aligns with their concerns – minimising trauma while effectively addressing pathology.

The timing of referral is critical:

- Earlier referral allows earlier discussion of appropriate conservative measures and also enables discussion around less invasive procedures that can be safely and effectively performed, helping patients understand their pathology better and assisting with informed decision making.
- The benefits of surgery are significantly higher when performed early in the disease course – before prolonged nerve compression leads to irreversible change, before biomechanical compensation leads to more complex pathology and where the prolonged conservative measures may negatively influence outcome where patients end up requiring surgery.
- Where patients end up requiring surgery for significant radicular symptoms, it has been proven that outcomes with earlier surgery are superior to delayed surgical intervention even where the same type of procedure is performed.



Meet James Watt

A Specialist Service in Hand, Spine and Hip Surgery with a Focus on Tissue Preservation and Early Functional Recovery.

Across all areas of his practice, James' focus is on delivering effective surgical solutions with minimal disruption to surrounding anatomy, aiming to reduce recovery time, surgical morbidity, and long-term functional compromise.

Further to the recent introduction of spine endoscopy, below is a summary of the latest additions to services provided by James at Kensington Hospital, with a practice philosophy centred on minimally invasive, tissue-sparing techniques where possible.



Anterior Hip Surgery – Functional Recovery through Muscle Preservation

James has adopted the direct anterior approach to total hip replacement, a technique that preserves key soft tissue planes and allows patients to return to mobility with:

- Lower dislocation risk
- Reduced need for postoperative restrictions
- Faster return to work and activity



Minimally Invasive Hand and Wrist Surgery

Endoscopic carpal tunnel release – a camera assisted decompression of the median nerve through a 10mm incision proximal to the wrist crease, sparing the palmar skin.

Wrist arthroscopy – for TFCC injuries, degenerative pathology, and scapholunate ligamentous instability, preserving wrist biomechanics through keyhole access.



Contact and Referral Information

James is happy to provide advice on case suitability or imaging review, and encourages clinicians and therapists to consider early surgical input in cases where pain, neurological symptoms, or function is deteriorating despite a reasonable trial of conservative care.

Patients can be guided to www.drwatt.co.nz for further information.

Referrals for surgical consultation may be directed to James via Healthlink or email at admin@drwatt.co.nz

