

# **MR MARTIN KNIGHT**

MBBS.FRCS.MD GMC NO: 1419669 **The Spinal Foundation** 



## **EXPERT INFORMATION**

#### **SPECIALIST AREAS:**

- Endoscopic Minimal **Invasive Spinal** Surgery
- · Trauma and orthopaedic surgery
- · Cluneal nerve pain

#### **CASES ACCEPTED:**

Claimant age: 15+

**Clinical assessments** Remote assessments Home visits **Prison visits Criminal cases Screening reports Desktop reports** 

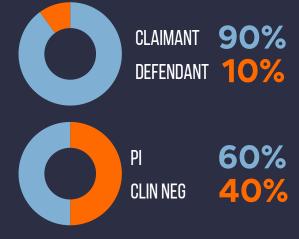


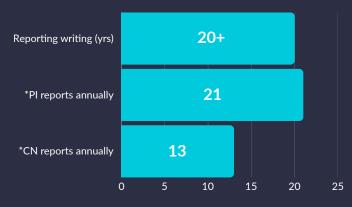


\*Case-by-case

Family cases\*

## **EXPERT RATIO**





\*Annual report from 2024

## **VENUES:**



- 9 Harley Street, London, W1G 9QY
- 25 Harley Street, London, W1G 9QY

### **FURTHER INFO:**

**Court experience Bond Solon trained** Legal aid (LAA) **Personal Injury Clinical Negligence:** 

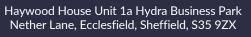
- Causation
- Liability
- **Breach of Duty**
- **Condition & Prognosis**

#### CONTACT

enquiries@mlas.co.uk



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## **CASES RELATING TO:**

#### Lumbar spine surgery:

- Wrong-level lumbar decompression or fusion
   Disc protrusion/extrusions/sequestra
- Insufficient decompression (e.g. residual disc
   Osteophytosis herniation, lateral recess stenosis)
- Transforaminal Endoscopic Lumbar Decompression
- Adjacent segment disease following fusion
- Persistent or recurrent lumbar pain after surgery/failed chronic pain management
- Nerve root injury (traction, thermal, or direct
   Leaking discs surgical trauma)
- Dural tear/cerebrospinal fluid (CSF) leak
- Infection (discitis, osteomyelitis, postoperative wound infection)
- Complex Regional Pain Syndrome (CRPS) following lumbar surgery
- Emergency or elective spinal surgical negligence

### Thoracic spine surgery:

- Incorrect-level thoracic surgery (higher risk due to anatomical variability)
- Residual thoracic disc herniation or inadequate decompression
- Instrumentation failure (rod/screw loosening
   Post-accident injury of the spine or misplacement)
- Post-operative kyphotic deformity
- Post-operative infection or epidural abscess
- Pulmonary or pleural complications

#### Cervical spine surgery:

- Wrong-level cervical discectomy
- Residual or recurrent cervical disc herniation
- Dysphagia or recurrent laryngeal nerve injury
- Vertebral artery injury

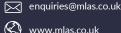
### Mismanagement of degenerate disc disease, including:

- Laser disc compression
- Axial or central stenosis
- Spondylolytic spondylolisthesis
- Spinal instability
- Discogenic pain
- High-intensity zones
- Perineural scarring
- Traumatic vertebral fractures
- Osteoporotic vertebral compression fractures
- · Cluneal nerve root irritation
- Facet joint pain
- Sacroiliac joint pain

#### Clinical Negligence and Personal Injury relating to:

- Ehlers-Danlos Syndrome (EDS)
- Cauda Equina Syndrome (CES)
- Endoscopic Foraminoplasty
- Annuloplasty
- Endoscopic Intradiscal Discectomy
- SpineJack Vertebral Reconstruction
- Gelstix and Kehrfix or Stem Cell Disc Reconstruction
- CT Guided Nerve Root Blocks
- Cluneal Nerve Injections and Radiofrequency Ablation
- Facet Joint Injection and Denervex





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### **MEDICO LEGAL EXPERIENCE:**

Mr Martin Knight is a Consultant Spinal Orthopaedic Surgeon specialising in minimally invasive and endoscopic spinal surgery. He has acted as an Expert Witness for over 20 years and is fully Cardiff University Bond Solon (CUBS) certified. He is instructed by both Claimants and Defendants in personal injury and clinical negligence matters, and provides detailed, balanced, and comprehensive reports on Condition & Prognosis, Causation, and Liability.

Mr Knight takes a rigorous, forensic approach to his medico-legal work, applying his extensive surgical expertise and root-cause analysis of spinal pain to produce clear, evidence-based opinions.

He has prepared expert reports in more than 500 cases, covering a wide range of spinal pathology and surgical issues, including mismanagement of degenerative disc disease, Cauda Equina Syndrome (CES), Complex Regional Pain Syndrome (CRPS), delayed diagnosis, complications of minimally invasive and endoscopic spinal procedures, and failures of lumbar, thoracic, and cervical spinal surgery.

Mr Knight is experienced in joint expert discussions and can provide oral evidence in court when required.

### **CLINICAL EXPERIENCE:**

Mr Knight is a highly experienced Orthopaedic Spinal Surgeon with more than three decades of consultant-level practice. As Medical Director of the Spinal Foundation since 1994, he has been at the forefront of advancing minimally invasive and endoscopic spinal surgery, pioneering techniques that have since been adopted globally.

He has performed over 10,000 endoscopic minimally invasive spinal procedures, using real-time patient feedback to accurately identify and treat the true sources of spinal and referred pain. His clinical practice encompasses the full spectrum of degenerative cervical, thoracic, and lumbar disorders, spinal stenosis, nerve compression, and complex failed back surgery cases.

Mr Knight is widely recognised as an innovator in the field. He has developed multiple endoscopic instrument systems and advanced techniques, including Transforaminal Endoscopic Lumbar Decompression and Foraminoplasty, which allow long-term treatment of disc prolapse, foraminal narrowing, post-operative scarring, and spinal instability without the need for open surgery, fusion, or disc replacement. His ongoing work includes cutting-edge research into stem cellbased disc reconstruction, disc augmentation polymers, and keyhole approaches to spinal decompression and disc repair.













### **PUBLICATIONS:**

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  of Research: Strategies for Surgical Investigators Selected Nonexperimental Methods: An Orientation in
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