In 2000 Stummer et al published that Five-aminolevulinic acid (5-ALA)-derived fluorescence was approved for fluorescence-guided resections of malignant gliomas, relying on selective synthesis and accumulation of protoporphyrin IX (PPIX) within malignant glioma cells.

The Oswestry Disability Index (ODI) is an index derived from the Oswestry Low Back Pain Questionnaire used by clinicians and researchers to quantify disability for low back pain. The ODI is a 10-item score from 0 to 100 that encompasses limitations in activity, sleeping, social life, work, and personal care resulting from low back pain. Higher scores indicate more severe disability. This validated questionnaire was first published by Jeremy Fairbank et al. in Physiotherapy in 1980. The current version was published in the journal Spine in 2000.

In 1995, the Brain Trauma Foundation developed the first TBI Guidelines with the assistance of a group of international experts in the field. The goal was to offer the latest research on which to build protocols that would improve the survival and outcomes of TBI patients. With the publication of the Guidelines for the Management of Severe Head Injury, the benchmark for evidence-based guidelines in Neurosurgery and other surgical specialties was set. These Guidelines were updated in 2000 under the title Management and Prognosis of Severe Traumatic Brain Injury with the addition of a new section entitled Early Indicators of Prognosis in Severe Traumatic Brain Injury. The American Association of Neurological Surgeons and the World Health Organization’s Committee on Neurotrauma have endorsed each document, joined by the Congress of Neurological Surgeons and AANS/CNS Joint Section on Neurotrauma and Critical Care.

A dedicated commercial system for navigated Three-dimensional Intraoperative Ultrasound allowing to acquire 3D ultrasound (US) volumes by combining a stack of 2D US scans with known spatial positions was first presented in 2000 by Gronningsaeter et al.,

The Charité artificial disc went through revisions over 6 years, resulting in the SB Charité III, and the first clinical experience was published in 1994 using the final version of the SB Charité III (DePuy Spine Inc, Raynham, Massachusetts).

The clinical trial in the United States for Food and Drug Administration (FDA) approval began in 2000, and the device was cleared for use in 2004. Since then, multiple other lumbar arthroplasty devices have been developed and have become available in the United States and Europe.
Atypical teratoid rhabdoid tumor was originally described a histological variant of Wilm's tumor in 1978.

Primary intracranial diseases were initially reported in 1987 and subsequently, defined as a distinct CNS neoplasm in 1996 and added to the World Health Organization (WHO) Brain Tumor Classification in 2000 (grade IV).


