

# Anterior Cervical Decompression and Arthroplasty

## *University Neurosurgery Information Sheet*

### **General Indications for the Procedure:**

Anterior cervical decompression and arthroplasty is a procedure which removes pressure from the spinal cord and/or nerve roots and reconstructs the spine to allow for motion at the treated segment.

### **Description of the Procedure:**

Anterior cervical decompression and fusion is performed by making a small incision in the front part of the neck. The trachea and esophagus are moved aside and the affected disk(s) are carefully removed. The spinal cord and nerve roots are decompressed while being visualized with the added light and magnification provided by the operating microscope. Once an adequate decompression is achieved, an artificial disc replacement is placed in the region once occupied by the disk(s). The FDA has set criteria for the use of cervical disc replacements. Occasionally arthroplasty is recommended for a condition which is similar to those detailed by the FDA. Such use is termed “off label” and if this applies to the patient’s condition the surgeon will notify the patient.

### **Risks of Procedure:**

The risks and possible complications include: infection, bleeding, difficulty swallowing and vocal cord paralysis which may result in permanent hoarseness. These risks are very small. Even rarer is the risk of total and permanent paralysis of the arms and legs with loss of bowel and bladder function. Similar to all operative procedures, there is no guarantee that this surgery will alleviate the current symptoms

### **Procedure Alternatives, if any:**

Anterior cervical discectomy and fusion is a common procedure that can be used to treat the patient’s condition. Unlike arthroplasty, this procedure will eliminate motion from the treated spinal segment. In certain situations, a decompression and reconstruction can be done from a posterior route. This involves opening the back of the neck and removing bone and/or disks from behind the spinal cord and nerve roots. The surgeon will inform the patient as to whether this is a safe alternative for the patient’s specific problem.

### **Probable Consequences of Refusing the Procedure:**

Current symptoms will persist and/or worsen.

### **Person(s) Performing the Procedure:**

The surgical team for this procedure is large. This involves, but is not limited to, the attending surgeons, resident surgeons, surgical nurses, physician assistants, surgical technologists and anesthesiologists. Everyone involved will be performing important tasks related to the surgery in accordance with the hospital policies, and based on their skill set and under the supervision of the responsible practitioners.