

Cervical Laminectomy

University Neurosurgery Information Sheet

General Indications for the Procedure:

A cervical laminectomy is performed to alleviate pressure from the spinal cord.

Description of the Procedure:

A cervical laminectomy is performed by making an incision coursing along the midline of the spine in the back portion of the neck. The two columns of muscles which lie along either side of the spine are separated from one another and the back portion of the spine is exposed. The bone and ligaments which are compressing the spinal cord are removed. Once the spinal cord is decompressed the muscles are sewn together and the skin is closed.

Risks of Procedure:

The risks and possible complications include infection and bleeding. These risks are very small. There is a slight chance that spinal fluid may leak from the tissue surrounding the spinal cord, which can usually be successfully stopped with stitches. Infrequently, such leakage may require additional surgery to control. Even rarer is the risk of partial or total paralysis of the arms and legs with loss of bowel and bladder function. In rare instances the spine may lose its stability requiring a second operation, called a fusion, to be performed. Similar to all operative procedures, there is no guarantee the surgery will alleviate the patient's symptoms.

Procedure Alternatives, if any:

In certain situations the decompression may also be performed from the front part of the spine. This involves making an incision in the front of the neck, moving the trachea and esophagus, removing bone and disc material, and performing a fusion. In selected patients a laminoplasty may be performed. This involves moving some of the bones in the back of the neck so that they remain attached to the spine but are not compressing the spinal cord. Occasionally a fusion is combined with a laminectomy which eliminates all motion over the operated levels.

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.