

# Cervical Laminoplasty

## *University Neurosurgery Information Sheet*

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

A cervical laminoplasty is performed to remove pressure from the spinal cord.

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

An incision coursing along the midline of the spine in the back portion of the neck is made. 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 spinal canal is formed by a series of bony rings. The rings over the compressed region are completely cut on one side and partially cut on the other. Decompression of the spinal cord is accomplished by hinging the rings open after these cuts have been made. The rings are held open with sutures, small titanium plates, or pieces of bone. The surgeon will explain which method would be best for the patient's condition. 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. Laminoplasty preserves the motion of the spine although in most situations the motion is slightly less than that present before surgery. Similar to all operative procedures, there is no guarantee the surgery will alleviate the 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 laminectomy may be performed. This involves completely removing some of the bone in the back of the neck. 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.