

Editorial on Laminectomy

Sarita Mon*

Department of Medicine, Sha Medical University, India

Editorial Note

Laminectomy is a surgical operation method to cure spine cord and relieve pain in nerves. It creates a space by removing lamina that is present on the back part of the vertebrate that covers spine. It removes the bone spurs or segments that put pressure pain on nerves. It is also known as decompression surgery, laminectomy surgery enlarges your spinal canal to relieve pressure on the spinal cord or nerves.

Indications

The laminectomy can be known by the presence of spinal canal stenosis, narrowing of the spinal canal has multiples etiologies such as congenital, metabolic, and traumatic tumoral, however, degenerative stenosis is the most common cause. Central stenosis is the most common, and the main symptom is neurogenic claudication, which includes pain, tingling, or cramping sensation in the lower extremity. If the symptom from stenosis does not respond to conservation treatment. Then surgical treatment such as decompression with or without fusion. Laminectomy can be performed through a traditional open approach or with a minimally invasive technique.

The traditional open approach requires a posterior midline incision (3 to 4 cm in length for single level), subperiosteal dissection along spinous processes to detach and retract paraspinous muscles from the spinous processes medially to the lateral laminar border avoiding damage of the facet joint. A systematic review compared conventional laminectomy and three different techniques that avoid the removal of the spinous process (unilateral

laminotomy, bilateral laminotomy and split spinous process laminotomy). The decreased postoperative back pain for bilateral laminotomy and split spinous laminotomy was found, however, there were no observable clinically significant differences.

Complications due to laminectomys

Cerebrospinal Fluid (CSF) leak from dural sac tear may cause dizziness, painful orthostatic headache, or thunderclap headache. Nonsurgical management of which includes bed rest, caffeine, or acetazolamide to alleviate symptoms. Surgical intervention with direct Dura mater repair or dural patching can be performed in cases of tear injury when it is feasible.

That indicates spinal instability. When laminectomy was compared with unilateral laminotomy and in case of extensive posterior laminectomy. This complication is avoided by preserving the pars interarticularis and at least two-thirds of lumbar or fifty percent of cervical facet joints.

- Swelling on or near the incision site, draining, heat, redness ta incision site.
- Difficulty breathing, chest pain, swelling in legs, urinating problem.

But you can be recovered within 2 to 3 weeks of time to walk and 2 to 3 months to cure completely. Among the all surgeries of spine. Laminectomy is having a success rate of 80%. But In some cases it causes spinal nerve root damage which in turn causes trauma, spinal fusions, connecting two or more bones in the back, to help stabilize the spine. After surgery avoid cycling, jogging, weight lifting, aerobic exercise that causes pressure on the nerves.

How to cite this article: Sarita Mon. "Editorial on Laminectomy". *J Spine* 9 (2020) DOI: 10.37421/jsp.2020.9.451

*Address for Correspondence: Mon S, Department of Medicine, Sha Medical University, India, E-mail: sarita21@gmail.com

Copyright: © 2020 Mon S. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received 06 July 2020; Accepted 24 July 2020; Published 31 July 2020