## Anterolateral retroperitoneal approach

Retroperitoneal (Anterolateral) Approach to the Lumbar Spine

## Indications

```
Can access L1 to sacrum

slightly more difficult to reach L5-S1 disk space than transperitoneal

approach

bifurcation of great vessels anterior to L4 vertebral body q

Indications

psoas abscess drainage (without risk of postoperative ileitits)

spinal fusion

biopsy or resection of vertebral body

disc replacement

exposure of sympathetic chain (general surgery)
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Position

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Place in semilateral position (45 degrees to horizontal)
    use sandbags or bean bag to hold patient at angle
    or place patient supine and tilt table
Place left side up
    aorta is more resistent to injury than vena cava
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Incision

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Make incision from
posterior half of 12th rib to
lateral border of rectus abdominis (midway between umbilicus and pubic
symphysis)
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Approach

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Approach to spine

incise subcutaneous fat

expose aponeurosis of external oblique muscle

divide external oblique in line with fibers

divide internal oblique in line with incision and perpendicular to

muscle fibers

divide transverus abdominis in line with skin incision

bluntly disect plane between retroperitoneal fat and psoas fascia

retract peritoneal cavity medially

bring ureter with peritoneal cavity

follow surface of psoas muscle to vertebral bodies

tie off segmental lumbar arteries of aorta in the field of dissection

L4/5 disc space

mobilize aorta to the contralateral side

place needle in disc and take lateral xray to identify level
```

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```
L5/S1 disc space
work between the bifurcation of aorta
place needle in disc and take lateral xray to identify level
```

## Dangers

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Sympathetic chain

lateral aspect of vertebral body

Genitofemoral nerve

anterior surface of psoas muscle attached to fascia

Segmental arteries

segmental lumbar arteries and veins q

aorta

Ureter

lies between psoas fascia and peritoneum

attached more firmly to peritoneum

stroke to produce peristalsis to confirm

Superior hypogastric plexus

injury leads to retrograde ejaculation
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