

Cervical arthroplasty for cervical spondylotic myelopathy

Farrokhi et al., searched for evidence regarding the surgical approach to [Cervical spondylotic myelopathy](#) (CSM) in medical databases with articles dated from 1985 to 2016.

In patients with effective [cervical lordosis](#) (fewer than 3 levels of ventral disease), [anterior cervical discectomy and fusion](#) (ACDF) or [cervical arthroplasty](#) is preferred ¹⁾.

For patients with multilevel CSM caused by segmental ossification of posterior longitudinal ligament (OPLL) and [cervical degenerative disc disease](#) (DDD), the hybrid surgery of [anterior cervical corpectomy and fusion](#) (ACCF) and [cervical disc arthroplasty](#) (CDA) demonstrated satisfactory clinical and radiologic outcomes. Moreover, although located next to each other, the instrumented ACCF construct and CDA still achieved solid arthrodesis and preserved mobility, respectively. Therefore, hybrid surgery may be a reasonable option for the management of CSM with OPLL ²⁾.

¹⁾

Farrokhi MR, Ghaffarpasand F, Khani M, Gholami M. An Evidence-Based Stepwise Surgical Approach to Cervical Spondylotic Myelopathy: A Narrative Review of the Current Literature. World Neurosurg. 2016 Oct;94:97-110. doi: 10.1016/j.wneu.2016.06.109. Review. PubMed PMID: 27389939.

²⁾

Chang HC, Tu TH, Chang HK, Wu JC, Fay LY, Chang PY, Wu CL, Huang WC, Cheng H. Hybrid Corpectomy and Disc Arthroplasty for Cervical Spondylotic Myelopathy Caused by Ossification of Posterior Longitudinal Ligament and Disc Herniation. World Neurosurg. 2016 Nov;95:22-30. doi: 10.1016/j.wneu.2016.07.065. PubMed PMID: 27474455.

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