

Cervical laminectomy complications

Injury to spinal cord and nerve roots

The overall incidence of neurological complications has been reported as 0.18% ¹⁾ and increases with severe [cervical kyphosis](#) correction (2.6%) ²⁾. Late neurological complications can be avoided in posterior corrective surgery for cervical kyphosis by prophylactic foraminotomies in the presence of foraminal stenosis, kyphosis correction that does not exceed 9.7° per spinal segment and avoiding kyphosis correction at C4–C5, which is where the largest posterior shift of the spinal cord occurs leading to [C5 palsy](#) ^{3) 4)}. This is a common problem but most cases resolve spontaneously. Similar to anterior surgery, spinal cord monitoring is a good adjunct monitoring tool.

[Cervical laminectomy](#) may cause postoperative [cervical kyphotic deformity](#) leading to segmental [instability](#) over time. [Laminoplasty](#) may be an alternative procedure to laminectomy, as it protects the spine against post-laminectomy kyphosis; however, similar to laminectomy, laminoplasty may cause [sagittal plane](#) deformities by destructing or weakening the dorsal tension band.

[PEEK rod-cervical lateral mass screw](#) systems may be useful in motion preservation surgery of the posterior cervical region ⁵⁾.

Cervical kyphotic deformity

see [Cervical kyphotic deformity](#).

Infection

Postoperative [discitis](#)....

¹⁾

Currier BL. Neurological complications of cervical spine surgery: C5 palsy and intraoperative monitoring. Spine (Phila Pa 1976). 2012;37(5):E328-E334. doi:10.1097/BRS.0b013e3182417276

^{2) 3)}

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Citation text Geck MJ, Macagno A, Ponte A, Shufflebarger HL. The Ponte procedure: posterior only treatment of Scheuermann's kyphosis using segmental posterior shortening and pedicle screw instrumentation. J Spinal Disord Tech. 2007;20(8):586-593. doi:10.1097/BSD.0b013e31803d3b16

⁵⁾

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