

Medial facetectomy

Medial **facetectomy** (the most commonly performed form of this procedure) is usually performed in conjunction with a lumbar **laminotomy** or laminectomy and foraminotomy procedure; this is carried out with or without discectomy. In the setting of degenerative spine disease, this operation is indicated in cases refractory to medical and conservative treatment, such as anti-inflammatory treatment, physical therapy, pain management, etc.

Indications for this procedure include the following:

Facet hypertrophy resulting in foraminal stenosis on imaging studies (MRI or CT myelogram), and painful radiculopathy

Facet hypertrophy resulting in symptomatic central stenosis, in the setting of advanced degenerative changes

Foraminal stenosis caused by other osteophytic changes, degenerative disk disease, or herniated nucleus pulposus

Neurogenic claudications

Presence of a symptomatic synovial cyst

Informing the patient that the main goal of this procedure is to relieve compression at the level of the foramen and hence treat leg pain and radiculopathy is important. This procedure is not designed nor is it indicated to treat primary axial back pain

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Last update: **2024/06/07 02:57**

