

Ossification of the posterior longitudinal ligament outcome

Progression of cervical [ossification of the posterior longitudinal ligament](#) (OPLL) is associated with younger age, involvement of multiple levels, and mixed-type morphology. OPLL masses that are contiguous with the [vertebral body](#) and have trabecular formation are useful findings for identifying masses that are less likely to progress ¹⁾.

Although posterior decompressive surgery is widely used to treat patients with [cervical myelopathy](#) and multilevel ossification of the posterior longitudinal ligament (OPLL), a poor [outcome](#) is anticipated if the [sagittal alignment](#) is kyphotic (or [K-line negative](#)).

There were no differences in clinical outcome according to surgical type, but complication rates varied depending on sex and surgical approach to symptom ²⁾.

¹⁾

Choi BW, Baek DH, Sheffler LC, Chang H. Analysis of progression of cervical OPLL using computerized tomography: typical sign of maturation of OPLL mass. J Neurosurg Spine. 2015 Jul 17:1-5. [Epub ahead of print] PubMed PMID: 26186351.

²⁾

Yudoyono F, Cho PG, Park SH, Moon BJ, Yi S, Ha Y, Kim KN, Yoon DH, Shin DA. Factors associated with surgical outcomes of cervical ossification of the posterior longitudinal ligament. Medicine (Baltimore). 2018 Jul;97(29):e11342. doi: 10.1097/MD.00000000000011342. PubMed PMID: 30024507.

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