Cervical Laminaplasty (Cervical Laminoplasty)

Overview
This surgical procedure creates more space for the spinal cord and nerve roots to relieve the painful pressure of spinal stenosis, a narrowing of the spinal canal that can result from arthritis.

Preparation
Anesthesia is administered, and the patient is placed in a face-down position. The surgeon creates an incision on the back of the neck to access the cervical spine.

Cutting the Vertebra
On one side of the spine, the surgeon scores each lamina - the bony area that covers the spinal cord - to create a vertical groove. On the other side, the surgeon carefully cuts all the way through each lamina.

Pressure Relieved
The grooves act as hinges, allowing the vertebrae to open like a door. This creates more space in the spinal canal, immediately relieving pressure from the spinal cord and nerve roots. The surgeon examines the spinal canal and removes any bone spurs or other sources of compression.

Wedges Placed
The surgeon inserts small wedges of bone graft material to hold the bone open. Screws and metal implants secure the vertebrae and the bone wedges.

End of Procedure and Aftercare
The incision is closed and bandaged, and drains may be placed in the wound to prevent fluid buildup. A soft cervical collar may be used. Physical therapy may be needed.