



Ryan J. Hoel, MD

Care Coordinator Phone: 952-456-7423

Lumbar Decompression (Laminotomy) for Stenosis

PROCEDURE:

A decompression (laminectomy) is performed to remove compression on the nerves caused by narrowing (**stenosis**) of the openings for the nerves.

- A small 1-2-inch incision is made over the involved level(s) and the muscles are spread apart with a tube so that Dr. Hoel can see the spine
- Next, the **bone elements** (lamina or portions of arthritic joints) and **soft tissues** (unnecessary ligament) which are causing compression of the nerves are removed.
- The procedure takes approximately 1 to 2 hours for a one-level decompression.
- Despite early pain relief it may take from weeks to months for your ability to walk distances to return, this is due to deconditioning prior to surgery.
- With a one or two-level decompression patients can usually go home the same day. Three or more level decompressions may require a 1- or 2-night stay in the hospital.

POST-OP COURSE:

- Your first post-op check is approximately 2-3 weeks after surgery. You must limit bending, lifting and twisting (BLT) at the waist. No lifting greater than 10-15 lbs until we see you back in the office.
- You are able to walk at the time of discharge from the hospital and you may walk as much as you like letting comfort be your guide.
- Postoperatively, patients typically return to sedentary jobs (1-3 weeks), light jobs (2-4 weeks), medium jobs (4-6 weeks).
- At 2-4 weeks after the surgery you are able to exercise on a stationary bike or treadmill. At 4-6 weeks after the surgery you may do abdominal crunches to strengthen your stomach, and are able to do some light weight lifting, with the exclusion of dead lifts, military press, squats and leg press or other exercises which load the spine. You should wait at least 3 months before resuming golfing, running, rollerblading and 6 months before playing contact sports.

RISKS OF SURGERY:

- Blood loss: blood loss is minimal with this type of surgery.
- Infection: a small risk, less than 1-2%. You will receive antibiotics before your surgery to help limit this risk
- Injury to nerves: less than risk of infection but may cause weakness or decreased sensation. When they occur, these are usually temporary.
- Dural Tear (spinal fluid leak): risk of 7%, but occurs more commonly in patients with previous surgery at the same level. If a dural tear occurs it is repaired at the time of surgery and results in a hospital stay, you would have to lay flat for up to 24 hours in the hospital to prevent headaches from coming on while your body replenishes the spinal fluid that leaked.
- Other risks include anesthesia, recurrent stenosis, residual spine or nerve pain, and others discussed in the office.

COMPLICATIONS:

- You should call our office at 952-456-7423 if you develop a fever, chills, night sweats, drainage from your incision, or severe headaches.