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CERVICAL DISC ARTHROPLASTY

1 message

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CERVICAL DISC ARTHROPLASTY

Anterior cervical disc arthroplasty is a surgical procedure used to treat degenerative disc disease in the cervical spine (neck region). Unlike anterior cervical arthrodesis, which involves fusion of the vertebrae, this procedure aims to maintain motion and flexibility by replacing the damaged disc with an artificial disc implant.

Here are some key points about anterior cervical disc arthroplasty:

- 1. Surgical Technique:** The procedure is typically performed under general anesthesia. A small incision is made in the front of the neck, usually along a natural skin crease. The damaged disc is removed, decompressing the spinal cord and nerve roots. An artificial disc implant is then inserted into the empty disc space to restore disc height and maintain motion. The prosthetic disc is designed to replicate the natural function of a healthy disc, allowing for controlled motion and minimizing stress on adjacent segments.
- 2. Maintaining Motion:** The goal of anterior cervical disc arthroplasty is to preserve motion and flexibility in the neck, reducing the risk of adjacent segment degeneration that can occur with fusion procedures. By replacing the damaged disc with an artificial disc, the procedure aims to mimic the natural mechanics of the cervical spine and maintain normal range of motion.
- 3. Patient Selection:** Not all patients are suitable candidates for anterior cervical disc arthroplasty. It is typically recommended for patients with single-level or two-level disc disease who have not responded to conservative treatments such as physical therapy or medications. The specific criteria for patient selection may vary depending on the surgeon's assessment and the individual patient's condition.
- 4. Advantages:** Anterior cervical disc arthroplasty offers several potential advantages over fusion procedures. By preserving motion, it may help maintain neck mobility and alleviate symptoms such as neck pain, stiffness, and reduced range of motion. It also may reduce the risk of adjacent segment degeneration by distributing stress more naturally across the cervical spine. Additionally, some studies have suggested that disc arthroplasty may lead to quicker recovery times and less postoperative pain compared to fusion surgeries.
- 5. Risks and Considerations:** As with any surgical procedure, there are potential risks and complications associated with anterior cervical disc arthroplasty. These can include infection, bleeding, damage to nearby structures such as the esophagus or blood vessels, implant-related complications (such as malposition, dislocation, or wear), persistent pain, and the need for further surgeries. Patient factors, such as the presence of bone spurs or severe spinal stenosis, may impact the decision to perform a disc replacement or fusion. It is important for the surgeon to carefully evaluate the patient's condition, review medical history, and discuss potential risks and benefits.
- 6. Postoperative Care:** After anterior cervical disc arthroplasty, patients may require a short period of hospitalization for monitoring. They will be advised to gradually resume normal activities and may undergo physical therapy to help restore strength and mobility in the neck. Regular follow-up visits will be scheduled to monitor the healing process and evaluate the function of the artificial disc implant.

Anterior cervical disc arthroplasty can be an effective option for select patients with cervical degenerative disc disease. However, the decision to undergo this procedure should be made in consultation with a qualified spine surgeon, who can evaluate the patient's specific condition, preferences, and potential risks or contraindications.

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