

# Lumbar Laminectomy Surgery for Spinal Stenosis (Open Decompression)

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A lumbar laminectomy is also known as an open decompression and typically performed to alleviate pain caused by neural impingement that can result from [lumbar spinal stenosis](#).

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A condition that primarily afflicts elderly patients, spinal stenosis is caused by degenerative changes that result in enlargement of the [facet joints](#). The enlarged joints then place pressure on the nerves, and this pressure may be effectively relieved with the laminectomy.

The lumbar laminectomy is designed to remove a small portion of the bone over the nerve root and/or disc material from under the nerve root to give the nerve root more space and a better healing environment.

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## Laminectomy Surgery

The lumbar laminectomy (open [decompression](#)) differs from a [microdiscectomy](#) in that the incision is longer and there is more muscle stripping.

- First, the back is approached through a two-inch to five-inch long incision in the midline of the back, and the left and right back muscles (erector spinae) are dissected off the lamina on both sides and at multiple levels (see [Figure 2](#)).
- After the spine is approached, the lamina is removed (laminectomy), allowing visualization of the nerve roots.
- The facet joints, which are directly over the nerve roots, may then be undercut (trimmed) to give the nerve roots more room.



Post laminectomy, patients are in the hospital for one to three days, and the individual patient's mobilization (return to normal activity) is largely dependent on his/her pre-operative condition and age.

Patients are encouraged to walk directly following a laminectomy for lumbar stenosis. However, it is recommended that patients avoid excessive bending, lifting, or twisting for six weeks after this stenosis surgery in order to avoid pulling on the suture line before it heals.

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