How Long Will it Take to Recover?
Recovery time after a lumbar laminectomy varies depending on your particular situation, the number of levels involved, and your general health. One key to a successful recovery is maintaining a positive attitude. You will be encouraged to take short walks while in the hospital and to gradually increase the distance and frequency of your walks once at home. Avoid standing or sitting for prolonged periods and change your position frequently to help minimize back spasms and discomfort. Your doctor will give you specific instructions on activity levels, including when you can resume driving and return to work.

What if I Have Other Questions?
Just give us a call. We’ll be happy to answer any of your questions. We are committed to providing you with the highest quality of comprehensive spine care. If you have suggestions of comments, do not hesitate to let us know.

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How Long is the Hospital Stay?
The time spent in the hospital depends on several factors, including your overall health and the extent of our particular surgery. Some people may be able to return home the same day while others may spend one to two days in the hospital.

MRI or “magnetic resonance imaging” – MRI uses a very powerful magnet to send radio waves into the body. The images produced are very helpful in visualizing the soft tissues such as the spinal cord itself, as well as the discs and nerve roots.

Bone Scans – These are useful in revealing abnormalities such as infections, fractures, tumors and arthritis. Because bone scans are unable to differentiate between these problems, they are usually performed in conjunction with other diagnostic tests.
What is a Lumbar Laminectomy?
The lumbar area of the spine is better known as the lower back. The lamina is a part of each vertebra. A lumbar laminectomy is the surgical removal of the lamina or part of the lamina on one or more of the vertebrae in the lower back. This is usually done to relieve pressure on nerves that may become inflamed from pressure caused by a narrowed spinal canal, bone spurs, or a herniated disc. Once the lamina is removed, the surgeon can then access the spinal canal and remove the source of irritation or pressure.

Who is a Candidate for a Lumbar Laminectomy?
Those who suffer from frequent lower back pain and perhaps leg pain and numbness may have a condition known as spinal stenosis. Spinal stenosis describes the narrowing of the spinal canal in the area where the nerves and nerve roots exit the spinal column. This narrowing can occur as a result of arthritis in the spine, calcium deposits, or wear and tear that occurs from repetitive stress on the lower spine. In addition, some people are born with a narrow spinal canal that becomes symptomatic as they age.

The narrowing of the spinal canal may eventually cause pressure on the nerves and nerve roots that emerge from the spinal column. This irritation can result in pain and numbness, particularly after sitting or standing for extended lengths of time. A lumbar laminectomy may be recommended to make more room for the nerves or nerve roots.

Another condition that is often treated with a lumbar laminectomy is a herniated disc. The discs act as cushions or “shock absorbers” between the vertebrae. Part of the disc may herniate or bulge into the canal, again putting pressure on the nerves. Once the laminectomy is performed, the surgeon may trim or remove the material causing the irritation.

What are the Alternatives to a Lumbar Laminectomy?
Surgery is usually the last option considered. If your symptoms are mild, you may not require any treatment at all. Conservative treatments such as physical therapy, medications, and steroid injections may relieve symptoms for a time; however they usually do not permanently change the underlying cause of the problem – the narrowing of the spinal canal. In some cases, a lumbar laminectomy may be the only solution to remove irritation and create more space for the nerves.

How are Back Problems Evaluated?
Your doctor will use a number of approaches to evaluate and diagnose back problems such as spinal stenosis or a herniated disc.

These include:

**A Detailed History** – Your role in providing a detailed history is very important. Your doctor will need to know where and when it hurts, if there was a recent injury or fall, and a description of the pain. Are there positions or activities that make it feel worse? What makes it feel better? All of these details can help your doctor pinpoint the problem.

**A Physical Exam** – Once your history is given, a thorough exam by a back expert is another important step in getting a good diagnosis.

**Diagnostic Imaging** – X-rays can show the structure and alignment of the vertebrae as well as the presence and size of bone spurs or other bony abnormalities.

**CT or “computerized tomography”** – This is a special kind of x-ray machine. Rather than a single x-ray, a CT scanner sends (continued on flap)