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V0431 - KEYHOLE TRANSLAMINAR APPROACH FOR SUPERIORLY MIGRATED LUMBAR DISC HERNIATIONS

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Resumen

Objectives: To describe the microsurgical keyhole translaminal technique treatment of superiorly migrated lumbar disc herniations. Experience after 73 cases.

Methods: Translaminal approach includes microsurgical exposure of the unilateral lumbar lamina, drilling a 6-8 mm diameter hole in the centre of the lamina without altering the facet or the stability of the vertebra exposing the superior insertion of the yellow ligament in its inferior part and the epidural fat in the superior segment. Through this small opening the axilla of the superior ipsilateral nerve root can be exposed and the superiorly migrated disc herniation can be removed as well as completing the microdiscectomy if necessary. This technique has been used in 73 cases by the author.

Results: Keyhole translaminal approach offers an adequate exposure of the axilla and foramen of the superior nerve root. It could be used in all the proposed cases of superiorly migrated lumbar disc herniations. No complications such as CSF leak or nerve root injury were observed. One radiological herniation recurrence was appreciated after a minimum one year follow-up of the patients which was treated conservatively.

Conclusions: Microsurgical excision of superiorly migrated lumbar disc herniations affecting the foramen and axilla of the superior nerve root through the translaminal approach should be considered as an alternative to other more stability altering techniques.