

Functional Outcome of Anterior Cervical Decompression and Fusion in Cervical Compressive Disease

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Abstract

Degenerative cervical myelopathy (DCM) is a currently added time period that encompasses degenerative etiologies of cervical myelopathy which includes spondylosis, ossification of the posterior longitudinal ligament, and ossification of the ligamentum flavum. Sufferers with progressive myelopathy are regularly offered surgical remedy to assist stabilize or enhance their neurological signs and characteristic. The list of operations for spinal compressive pathologies encompass laminoplasty and anterior cervical decompression with bone fusion (ASF) depending at the reasons, extension, direction of compression, presence of neck pain, and surgeons' experience. Anterior cervical decompression and fusion is the maximum common procedure due to the fact spondylotic myelopathy is located anteriorly to the spinal cord in maximum cases. In cases of a variable degeneration it's also feasible to combine discectomy and corpectomy inside the same affected person. In the current study, we reviewed various studies in literature on anterior cervical decompression and fusion in cervical compressive myelopathies.