

# Post-op hematoma incidence similar for decompression types

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Image courtesy of Blausen Medical

where postoperative epidural hematoma was detected, independent of the surgical approach.

"Unilateral and bilateral approaches achieve a similar amount of dural sac extension by a lesser extent of bony resection in comparison with the laminectomy approach," the authors write.

**More information:** [Abstract](#)

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(HealthDay)—For patients undergoing decompression for degenerative stenosis, the incidence of epidural hematoma is similar for different surgical approaches; however, there is a tendency toward increased postoperative hematoma in approaches with greater bony decompression area, according to a study published in the December issue of the *Journal of Spinal Disorders & Techniques*.

Massimo A. Leonardi, M.D., from the University of Zurich, and colleagues utilized data from a previous prospective study involving 30 patients undergoing lumbar [decompression](#) for degenerative stenosis (49 levels treated by laminectomy; bilateral fenestration; and unilateral fenestration with contralateral undercutting). Before and after surgery, the cross-sectional area of the maximum bony stenosis and dural sac compression were measured in each operated level. The presence of [epidural hematoma](#) and its size were noted.

The researchers observed no significant between-group difference in the median postoperative bony stenosis. The median postoperative extension of dural sac areas also did not vary significantly between the three groups. In all three groups the incidence of epidural hematoma was also similar. There was larger bony decompression at the levels

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