

## **The Results of Microsurgical Resection of the Lumbar Synovial Cyst without Arthrodesis**

**Fernando Luiz Rolemberg Dantas**

Biocor Hospital, Brazil

Synovial Cysts (SC) develop, in most cases, in the Lumbar Spine. The treatments described for lumbar SC vary from percutaneous puncture to arthrodesis. There is a fear of postoperative instability after surgical resection of cysts, especially when associated with Degenerative Spondylolisthesis. The objective of this study was to evaluate the efficacy of microsurgical removal of the lumbar synovial cyst without arthrodesis in resolving the signs and symptoms of patients with improved quality of life, recurrence rate, and the frequency of created postoperative instability.

50 patients underwent microsurgery to remove the lumbar synovial cyst between January 1998 and January 2016. Of the total, 32 were women and 18 were men. The mean score on the Oswestry scale was  $12 \pm 12.6\%$  (median 8, 0-53). Based on the MacNab scale, 98% of the results obtained were considered excellent and good. Based on the self-assessment obtained with the Weiner scale, it was found that low back pain was present in only 16% of patients in the postoperative period. It was also found that there was a significant improvement in strength and pain in the lower limbs in 96 and 94%, respectively. Grade I Spondylolisthesis was present in 42% of cases. Two patients (21 with previous Spondylolisthesis) were reoperated with arthrodesis two years after surgery due to the worsening in the preoperative listhesis. There was no recurrence at the operated site. One patient (29 without previous Spondylolisthesis) presented a contralateral synovial cyst at the same level where he had been operated on, being reoperated with arthrodesis. Microsurgical treatment for cyst removal without arthrodesis showed excellent and good results in most cases, with low rates of complications. Total surgical resection was obtained in all cases; there was no recurrence at the operated site. Only 10% of the cases with preoperative Spondylolisthesis needed to be reoperated.

### **Biography**

Fernando Dantas is a Neurosurgeon with a specialization in Spine Surgery from France, holds a Master's and Doctoral Degree in Neurosurgery, actively participates in Spine specialty congresses in Brazil worldwide, has several published works, the most important of which are related to the treatment of Odontoid Fractures, use of cage or not in Lumbar Spondylolisthesis, systematic review of the use of Vancomycin in Spine Surgery, among others. Elected to the position of vice president of the Brazilian society of Neurosurgery.

e: [dantasfernando2@gmail.com](mailto:dantasfernando2@gmail.com)