

## Preparing for Low Back Surgery

If you and your orthopaedic surgeon have determined that your low back problem might be helped by surgery, then there are several things you can do to make sure you are prepared for the procedure.

This article will provide information on planning for your surgery, as well as what you might expect from your hospital stay and recovery.

### Preparing for Surgery

Your surgeon may ask you to stop taking certain medicine or to stop smoking to prepare for surgery. Depending on your age and general medical fitness, your surgeon may ask you to have a general medical checkup by your family doctor.

#### **Medication**

Some medicines may interfere with or affect the results of your surgery. They may cause bleeding or may interfere with the effects of your anesthesia. These medications include aspirin and non-steroidal anti-inflammatory drugs. Your surgeon may ask you to stop taking the medication before your surgery.

#### **Donating Blood**

Donating blood usually is not necessary for most low back surgery. However, there is always a chance that some blood loss will occur during surgery.

Your surgeon will discuss the advantages and disadvantages of donating your own blood compared with using someone else's blood. If you decide to donate your own blood, your surgeon may prescribe an iron supplement to help build up your blood before surgery.

#### **Advance Planning**

You will be able to walk after surgery, but you may need to arrange for some help for a few days after your return home with activities like washing, dressing, cleaning, laundry, and shopping.

Your surgeon will probably recommend that you do not drive a car for a period of time after surgery. You will need to arrange for transportation to and from your hospital appointments and to other places that you need to go during this time. You should consult your doctor before taking car trips.

## Your Surgery

### **Before Your Operation**

Patients usually are admitted to the hospital on the day of surgery. After admission, you will be taken to the preoperative preparation area where you will be interviewed by a doctor from the anesthesia department, who will review your medical history and physical examination reports.

You and the anesthesiologist will discuss the type of anesthesia to be used. (Sometimes this is done during an outpatient visit up to 7 days before your surgery.) The most common types of anesthesia used for low back surgery are general (you are asleep for the entire operation) or spinal (you may be awake but have no feeling from your waist down).

## ***Surgical Procedure***

The surgical procedure usually takes from 1 to 3 hours, depending on your problem.

When your surgery is completed, you will be moved to the recovery room, where you will be observed and monitored by a nurse until you awake from the anesthesia. You will have an intravenous (IV) line inserted into a vein in your arm. You also may have a catheter inserted into your bladder to make urination easier.

When you are fully awake and alert, you will be taken to your hospital room.

## **Rehabilitation**

There is usually pain for the first few days after surgery. Pain medication will be given regularly, perhaps by a patient-controlled analgesia. Your IV line and catheter will be removed within a few days after surgery.

Your spine must be kept in proper alignment. You will be taught how to move properly, reposition, sit, stand, and walk.

While in bed, you will be instructed to turn frequently using a "log rolling" technique. This maneuver allows your entire body to move as a unit, avoiding twisting of the spine.

You may be discharged from the hospital with a back brace or cast. Your family will be taught how to provide care at home.

## ***Complications***

The incidence of complications after low back surgery is low. Risks for any surgery include bleeding and infection. For spine surgery, complications include difficulties with urination (retention) and temporary decreased or absent intestinal function.

Major complications that can occur include, but are not limited to:

- Infection
- Heart attack
- Stroke
- Blood clots
- Recurrent disk herniations

Although rare, new nerve damage can occur as a result of this surgery. These complications may result in pain and prolonged recovery time.

## ***Warning Signs***

It is important that you carefully follow any instructions from your doctor relating to warning signs of blood clots and infection. These complications are most likely to occur during the first few weeks after surgery.

Warning signs of possible blood clots include the following:

- Swelling in the calf, ankle or foot
- Tenderness or redness, which may extend above or below the knee
- Pain in the calf

Occasionally, a blood clot will travel through the blood stream and may settle in your lungs. If this happens, you may experience a sudden chest pain and shortness of breath or cough. If you experience any of these symptoms, you should notify your doctor immediately. If you cannot reach your doctor, someone should take you to the hospital emergency room or call 911.

Infection following spine surgery occurs very rarely. Warning signs of infection include:

- Redness, tenderness, and swelling around the wound edges
- Drainage from the wound
- Pain or tenderness
- Shaking chills
- Elevated temperature, usually above 100°F if taken with an oral thermometer

If any of these symptoms occur, you should contact your doctor or go to the nearest emergency room immediately.

## Your Recovery at Home

After your discharge from the hospital, you will need to follow your doctor's orders exactly to ensure a successful recovery.

You should arrange for transportation home that will allow you to ride in a leaning back or lying down position. You may do as much for yourself as you can, as long as you maintain a balanced position of your spine. You should not stay in bed during the day. Do not hesitate to ask for help from your family members or friends if it is needed. If necessary, arrangements can be made for a home health aide.

### **Wound Care**

Your wound may be closed with stitches (sutures) or staples, which will be removed approximately 2 weeks after surgery. If the wound is clean and dry, no bandage is needed. If drainage continues after you are home, cover the wound with a bandage and call your surgeon.

### **Diet**

Some loss of appetite is common. Eating well-balanced meals and drinking plenty of fluids are important. Your doctor may recommend an iron supplement or vitamins before and after your surgery.

### **Activity**

Many people experience a loss of energy after major surgery, but this improves over time. Your doctor may prescribe an exercise program designed to gradually increase your strength and stamina.

Initially, your doctor will recommend that you should only participate in walking. Later, your doctor will encourage you to swim or use an exercise bike or treadmill to improve your general physical condition.

## After Recovery

After you have recovered from your low back surgery, you may continue to have some achy pain in your lower back that may be persistent. You can reduce the pain by staying in good physical condition. If you are overweight, you should enroll in a program to help you lose weight and keep it off.

Your doctor will evaluate you after your surgery to make sure that your recovery is progressing as expected.