

ANTERIOR CERVICAL DISCECTOMY

PATIENT/FAMILY INFORMATION SHEET

What is an anterior cervical discectomy?

Anterior cervical discectomy is a surgical procedure where a disc or discs are removed from your neck. A disc is a tough sac filled with a jelly-like substance. Discs sit between each of the bones in your neck (vertebrae) and serve as cushions. The disc may need to be removed if the jelly-like substance leaks out of the sack and puts pressure on a nerve in the spinal cord. This type of change in the disc can create pain. Arthritis and bone spurs are other reasons why you may need this surgery. Common symptoms of a disc herniation or bone spur in the neck include arm pain, weakness and numbness. More urgent symptoms include difficulty walking and new bowel and bladder difficulties. When the ruptured disc is removed pressure is taken off the nerve root and your pain may be relieved. Your physician may decide that your neck needs to be "fused" to make it more stable.

What can I do to prevent additional neck injury?

Using good body mechanics may prevent neck injury. Good body mechanics include keeping your back and neck straight and avoiding twisting or turning motions. Some important points to remember include:

- Your physician may want you to go physical therapy after your surgery. A physical therapist will help you with special neck and back exercises. These exercises help make your bones and muscle stronger.
- Your physician may give you a special brace to wear for 4 to 6 weeks after surgery. This brace helps support your neck as the bones heal.
- When lying on your side, bend your knees and use a pillow under your head and neck to keep you head level. This will lessen the strain on your shoulders, neck and arms.

What will I need to do at home?

- You may feel like resting more than usual after surgery. Slowly start to do more each day. Rest when you feel it is needed.
- You will have a waterproof dressing applied to your incision prior to discharge from the hospital. This bandage is to stay on until you see your doctor (about one week after surgery).
- Write down any questions you have about your health problems and how they are being treated. This way you'll remember to ask them during your next visit.

If you have had a fusion, do not take anti-inflammatory medications without first consulting with your neurosurgeon. Anti-inflammatory medications such as aspirin, ibuprofen (Advil, Alleve, Motrin) or prescription medications such as Vioxx, Celebrex or Naprosyn may interfere with healing. If you have questions about the safety of these or any medications, call your neurosurgeon.

What Do I Need To Do For Follow-Up?

- Take your medications as prescribed (see discharge instruction form).
- Call your physician to schedule a follow-up visit.
- Your physician may want you to go to physical therapy. Check with your physician before you start any exercise program.
- During the first weeks following surgery, riding in a car may increase back or neck pain. Limit car riding if it is uncomfortable.
- Check with your physician about when it is safe to drive.
- Check with your physician about how soon you should shower.
- Check with your physician about when it is safe to return to work.

What Do I Need To Report to My Physician?

Although complications following an anterior cervical discectomy are uncommon, you need to be aware of those signs and symptoms that warrant a call to your physician.

Call your physician for the following:

- Your incision is swollen, red, or has drainage coming from it. This may mean it is infected.
- Your stitches/staples come apart.
- Your bandage becomes soaked with blood.
- You have a temperature over 101⁰ F.
- You feel weak, numb, or have pain in your back, buttocks, arms or legs.
- You feel pain or swelling or see redness in either of your lower legs. This could mean there is a blood clot in your lower leg.
- You have questions or concerns about your surgery or medicine.

SEEK CARE IMMEDIATELY IF:

- You have trouble breathing all of a sudden. This could be a sign that you have a blood clot in your lung. It could also mean that you are allergic to a medicine you are taking.
- You cannot feel or move your arms.

For more Patient Education Fact Sheets, see the Greenwich Hospital web site at www.greenhsosp.org and click on Patient Education

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