



**INSTRUCTIONS**  
**FOR PATIENTS**  
**HAVING SPINAL**  
**SURGERY**



---

MD, FRACS  
NEUROSURGEON  
+ SPINAL  
SURGEON  
PROVIDER 2931417B

---

DR MARTIN  
SCHOLSEM

---

INSTRUCTIONS  
FOR PATIENTS  
HAVING SPINAL  
SURGERY

---

## FEW DAYS BEFORE SURGERY



Try to **relax and get as much sleep as possible**. Don't make any drastic changes in your routine and don't hesitate to call us if something has changed or you have any questions.

Make sure to stop any anti-inflammatory drugs seven days before the surgery (unless specified otherwise) and blood thinners such as Warfarin, Aspirin etc... (to stop them).

## SURGERY



Dr Scholsem and the anaesthetist will meet you in the pre operative area. **The doctor will go through the major steps of the surgery again** and make sure that nothing has changed since he last saw you.

Once the surgery is complete you will spend approximately 30 minutes to one hour in recovery where he will again come to see you. He will telephone your next of kin to reassure them and let them know when they can see you.

You will be **seen by the physiotherapist** the morning after surgery and we will make sure your pain is well controlled.

When you are discharged from hospital please call the doctor's office to make an appointment to see him for between 4 - 6 weeks after surgery. Also **make an appointment with your GP** for approximately one week after surgery.

After discharge it always takes a little more time to adapt to be back at home. Going from a hospital with nurses to a quieter home can be difficult. **Take advantage to rest and recover.**

## WOUND CARE SUTURES



Your wound will almost always be closed with dissolvable sutures underneath the skin. The wound will be covered with Steri-Strips.

- You may shower as soon as you feel safe to do so
- Change the dressing every couple of days for one week and after having a shower
- Pat the wound dry and keep it clean
- Do not apply creams or cleansers to the incision
- Do not submerge the incision under water in a bath and avoid going in a pool for 4 weeks
- The surgical dressing should be removed one week after discharge from hospital.
- The Steri-Strips will peel off on their own in time. If the wound is sensitive or your clothes rub against it, you may apply a clean dry gauze to cover the wound.
- Mild swelling around the incision after surgery is normal.
- You may even notice a slight increase in swelling after activities. This will dissipate in time.
- If you have any signs of drainage, fever, redness or worsening swelling around the wound please see your GP straight away or call my office.

### week 1

Once you are at home **walking is an excellent activity** and Dr Scholsem encourages all his patients to walk. Start with short lengths of time then work you way **up to 20 - 30 minutes of continuous walking four or five times per week**. Patients with more severe problems or in older age groups may not be able to achieve this goal. Do not let this concern you but discuss it with Dr Scholsem at your post operative appointment.

Try to avoid sleeping during the day as you will have more difficulty getting a good nights sleep however avoid over-doing it and get plenty of rest. **Eat a balanced diet** such as fruit, fibre and drink plenty of water.

Try to **minimize your sitting to periods** of less than 20 - 30 minutes as this will increase the strain on your back. Changing position frequently will be good for your back for the rest of your life.

Unless specified, **do not start any core muscle strengthening** before the post operative appointment (usually 4-6 weeks after surgery). You can ask your physiotherapist for gentle massage and stretching if needed after two weeks.

**Avoid lifting** anything greater than 5 kilos and remain very cautious about bending.

**Do not drive** for three weeks after surgery and stop every 30 minutes for a stretch/walk.

**Avoid smoking** as it has been shown to reduce skin and bone healing significantly.

## WEEK 1 - 3 MONTHS



### week 2 - 3

You have now progressed quite a lot but hitting a plateau. That is normal. **It is normal to experience pain following surgery** and many patients experience a few days of strong pain during their recovery, usually around the second or third week post discharge from hospital.

**As a general rule pain killers should only be used at the minimal dose** and always favour Paracetamol over strong pain killers. Don't stop the pain killers too quickly but when the pain gets better try to slowly reduce the dose. For example, cutting by half the morning dose for a few days then the evening dose before stopping the morning dose.

Patients who have undergone a fusion should **avoid anti inflammatory** or non steroidal drugs such as Nurofen, Ibuprofen, Voltaren as this has been shown to slow bony healing.

If you are taking an anticoagulant or blood thinner such as Warfarin, Aspirin, Plavix, Pradaxa etc you will be told when you can restart the medication.

### week 4 - 3 months

This is the time to get healthy again. See your physiotherapist regularly and most importantly **involve yourself in a physical activity such as walking.**

If you had a lot of pain for a long time you have probably lost most of your muscle mass and it will take time to rebuild it again but don't get discouraged.

Pain in the back itself may be due to many factors and may improve slowly or persist to some degree.

Even if your leg pain is better immediately after surgery you may have **flashes of pain when you start to become more active.** It is usually the case the first three weeks after surgery.

These episodes of pain can be as strong or sometimes even stronger than before surgery. Don't panic and continue taking your pain killers.

**If you have any doubts or questions, please call Dr Scholsem's office.**

## YOUR RECENT SURGERY



### If you have had cervical spine (neck) surgery

**If you had an anterior approach** the wound will be on the front of your neck in a skin crease. You may experience a mild sore throat for a few days and very often mild swallowing difficulties that improves in most patients after 2 - 3 weeks.

**If you had a disc replacement,** cage or artificial disc you may feel some spasms in the neck muscles for a few weeks. Don't hesitate to ask your physiotherapy for some massages a couple of weeks after surgery.

**If you had a posterior approach** the wound will be on the back of your neck. You may feel muscle tenderness and spasms in the cervical region. The muscles after being dissected and retracted from the spine take approximately 2 or 3 months to recover but the neck discomfort improves much quicker.

### If you had lumbar spine fusion surgery

**A lumbar fusion is bigger surgery than a simple decompression and the recovery can be quite long.**

Despite the name of the surgery the spine is not actually fused during lumbar spinal fusion surgery. Instead, during the surgery a bone graft is placed in the spine so that two parts of the vertebrae can gradually grow together into one longer bone. The long bone will serve to immobilise the spine at that segment. Screws, cages, plates and rods are placed during the surgery to stabilise the area while the bone heals and becomes solid, a **process that usually takes about 3 to 4 months.**

The **bone continues to mature** and solidify over a prolonged period usually for 12 to 18 months after the surgery.

The muscles too have to heal and usually take 2 to 3 months as well. Due to the pain and inactivity you will probably have **lost some of your core muscle strength** during the months before the surgery and it will be very important to **dedicate yourself to rebuild your fitness** once it is safe to exercise again.

You had during the surgery (intra-operative CT or O-ARM) or the day after post operative CT confirming good position of the hardware. This will be followed up by Dr Scholsem who will make sure that bone healing occurs. You will have some lumbar x-rays 4 - 6 weeks after surgery and a post operative CT scan at 3 months.

## Managing your mood, expectations and goals

**A successful result after the surgery also depends on a positive attitude and efforts by patients to aid recovery.**

Your pre operative symptoms may take weeks or longer to fully improve. Generally, symptoms such as pain shooting into the leg improves first. Numbness is often the last symptom to improve and usually can even be slightly worse than before the surgery (don't worry this is normal).

Quite frequently patients experience a brief period of "letdown" or depression after surgery. Some may subconsciously have expected to feel better "instantly" even though they rationally understand that this will not be the case. Patients commonly question their decision to have surgery during the first few days after surgery. As the healing occurs, these thoughts usually disappear quickly.

If you feel depressed, understanding that this is a "natural" phase of the healing process may help you cope with this emotional state.

Quite frequently this happens around day 3 and we call it "the third day blues" and again after 3 weeks where you become more active but still are not fully recovered.

So you are feeling better and the discomfort you are now in is nothing compared to what you endured before surgery or perhaps you feel quite the opposite. Many patients have verbalised frustration at not being able to resume normal activities - for example, driving, going back to work or participating in simple activities of daily living. Having to limit and curtail your activities, along with pain and discomfort can leave you with the impression that you will never get better.

## POST SURGERY MILESTONES



Remember your body needs to recover from major surgery. How you take care of yourself in the post operative period will have a direct bearing on the ultimate result. This is the time to take care of yourself rest, eat a well balanced diet high in protein, walk every day if possible, take a more positive attitude and feel good about yourself. **It takes a great deal of courage and determination to undergo what you have been through.**

---

## MEDICATION

For the pain we prescribed you :

---

---

---

Dr Scholsem's advise is to first reduce :

---

---

---

---

Discuss all this with your GP who knows you well and can also give you best advice.

---

ST. GEORGE PRIVATE HOSPITAL  
SUITE 3B, LEVEL 3  
1 SOUTH ST, KOGARAH 2217

T. (02) 9553.7511  
F. (02) 9553.7588

---

DR MARTIN  
SCHOLSEM

---