

Cervical Disc Replacement Post-op Instructions

Cervical disc replacement involves a small incision in the front of the neck, often hidden in a skin crease. I will remove the disc material that is pressing on the spinal cord or nerves, and replace it with an artificial disc.

Hospital stay

This depends on a few factors such as age, co-morbidities and number of levels. Typically, patients go home the day of surgery or the following morning. Going home requires your pain to be controlled and an assessment that you are safe on your feet.

Incision care

You can shower 48 hours after the surgery. Don't aim the water jet directly at the incision, just let the water run over the area. Pat the area dry, don't scrub at the area (this will help keep the scar small). Do not put any lotions or creams on the incision for at least a month.

Avoid submerging the incision (bath or pool) until the incision has been dry, with no drainage for 7 days.

The incision will be covered with Steri-Strips. These will fall off on their own but if they are coming loose and annoying you, feel free to trim them carefully with scissors.

Brace

Wearing the collar for the first few days will help with your pain. After this you can wean out of it and wear only for comfort. Wearing it for too long will lead to a stiff neck and loss of muscle strength, so it's important to stop using it when you are comfortable.

Activities

Walking is the best rehab, and you can do as much of this as you want from day one. After two weeks, if you want to do something more vigorous, you can use a stationary bike, an elliptical trainer, or walk against water in the pool. Avoid running until at least 6 weeks after surgery. Too much stress on the neck before it is fully healed can cause the artificial disc to displace. Once the healing is complete, you will be able to do any activities you want (except contact sports).

Pain medications

Depending on what you required after surgery you will be taking either Tramadol or Oxycodone, and Tylenol for pain. You will also have a muscle relaxant (Flexeril or Diazepam) which will help with pain but is especially good for any pain in the back of the neck (this happens due to the facet joints and muscles being stretched as they return to their normal position).

If you are taking Oxycodone, reduce the dose as you are able by taking one instead of two tablets, and then transferring to Tramadol.

While on Oxycodone or Tramadol it is important to take a stool softener to prevent constipation, which can be severe.

I also will give a short course of indomethacin (if you are allowed to take it) to help prevent unwanted bone growth which can stop the replacement from working correctly.

Typical problems

Commonly, patients report some discomfort with swallowing, much like a sore throat. This typically lasts for a couple of days and can be helped with throat lozenges and avoiding dry/rough foods. Ice cream is always a good option.

Some patients will have posterior neck pain, this is related to the muscles/joints in your neck adjusting to a new position. It is short lived and responds well to the muscle relaxant.

Post op visits

A typical schedule is listed below, but this is tailored for your individual circumstances:

- First post op visit is 2 weeks following surgery
- Second visit is 6 weeks following surgery
- Third visit is 3 months following surgery
- Fourth visit is 6 months following surgery
- Then annually following surgery