

## **ACDF or Anterior Cervical Discectomy with Fusion**

### **Brief description of the procedure**

Surgical procedure performed to remove a herniated or degenerative disc in the cervical spine. The anterior approach is through the throat area. After the disc is removed, the vertebrae above and below the disc space are fused together

### **Disorders it treats**

A surgical procedure performed to remove a herniated or degenerative disc in the cervical (neck) spine. This disc may have caused Spinal or Foraminal Stenosis with radicular or local problems in the neck, shoulder, and arm region

### **Possible Post-Op findings**

Most patients are able to go home 1-2 days after surgery. Patients are instructed to avoid bending and twisting of the neck in the early postoperative period (first 2-4 weeks). Patients can gradually begin to bend and move their neck after 2-4 weeks as the pain subsides and the neck and back muscles get stronger as per the surgeon's protocol.. Patients are also instructed to avoid heavy lifting in the early postoperative period (first 2-4 weeks).

After surgery, pain is managed with pain medication. Because certain pain medication may be addictive, they are used for a limited period. As their regular use may side effects including cause constipation, drink lots of water and eat high fiber foods. Laxatives can be bought without a prescription. Thereafter, pain is managed with acetaminophen (e.g., Tylenol).Hoarseness, sore throat, or difficulty swallowing may occur in some patients and should not be cause for alarm. These symptoms usually resolve in 1 to 4 weeks.

### **Factors influencing recovery**

Slower healing rate caused by i.e. diabetic, smoker, old age, osteoporosis, obesity, and malnutrition. •If you had a fusion, do not use non-steroidal anti-inflammatory drugs (NSAIDs) (e.g., aspirin; ibuprofen, Advil, Motrin, Nuprin; naproxen sodium, Aleve) for 6 months after surgery. NSAIDs may cause bleeding and interfere with bone healing.

### **Brace (Y/N)**

Most patients are placed in either a padded cervical spine brace and will get a brace for showering purposes as well. This reduces the stress on the neck area and helps decrease pain. It can also be used to improve bone healing by maintaining the neck in a rigid position, especially in the first few weeks and months after surgery

### **How long?**

4 weeks post-op, until the patient sees the surgeon

### **Driving restrictions (Y/N)**

Patients may begin driving when the pain has decreased to a mild level, which usually is between 7-14 days after surgery. Patients should not drive while taking pain medicines (narcotics). When driving for the first time after surgery, patients should make it a short drive only and have someone come with them, in case the pain flares up and they need help driving back home. After patients feel comfortable with a short drive, they can begin driving longer distances alone.

- You may need help with daily activities (e.g., dressing, bathing), but most patients are able to care for themselves right away.
- Gradually return to your normal activities. Walking is encouraged; start with a short distance and gradually increase to 1 to 2 miles daily. A physical therapy program may be recommended.
- If applicable, know how to wear a cervical collar before leaving the hospital. Wear it when walking or riding in a car.

### **Physical Therapy Needed?**

Yes

### **PT objectives**

Increase posture, ergonomics, hand/arm strength and isometric cervical spine strength at first. Improve ROM starting 4 weeks post-op. Teach ergonomics. C-spine CORE exercises.

### **PT modalities**

Strengthening, Coordination, Proprioception exercises at first. Later on gentle AROM exercises will be added. US/E-stim as indicated

### **PT restrictions**

Wear collar during the day to help restrict cervical rotation.

### **Work/Hobby restrictions**

Patients may return to light work duties as early as 2-3 weeks after surgery, depending on when the surgical pain has subsided. Patients may return to moderate level work and light recreational sports as early as 3 months after surgery, if the surgical pain has subsided and the back strength has returned appropriately with physical therapy. Patients who have undergone a fusion at only one level may return to heavy lifting and sports activities when the surgical pain has subsided and the back strength has returned appropriately with physical therapy. Patients who have undergone a fusion at two or more levels are generally recommended to avoid heavy lifting, laborious work, and impact sports.

If you had a fusion, do not use non-steroidal anti-inflammatory drugs (NSAIDs) (e.g., aspirin; ibuprofen, Advil, Motrin, Nuprin; naproxen sodium, Aleve) for 6 months after surgery. NSAIDs may cause bleeding and interfere with bone healing. Do not smoke. Smoking delays healing by increasing the risk of complications (e.g., infection) and inhibits the bones' ability to fuse. Avoid bending your head forward or backward. Do not lift anything heavier than 5 pounds (e.g., gallon of milk). Housework and yard-work are not permitted until the first follow-up office visit. This includes gardening, mowing, vacuuming, ironing, and loading/unloading the dishwasher, washer, or dryer. Postpone sexual activity until your follow-up appointment unless your surgeon specifies otherwise.

### **Incision Care**

The wound area can be left open to air. No bandages are required. Small surgical tapes affixing the suture should be left in place. The area should be kept clean and dry.

### **When to call your surgeon**

If your temperature exceeds 101° F, or if the incision begins to separate or show signs of infection, such as redness, swelling, pain, or drainage. If your swallowing problems interfere with your ability to breathe or drink water.

## **Outcomes**

After fusion you may notice some range of motion loss, but this varies according to neck mobility before surgery and the number of levels fused. If only one level is fused, you may have similar or even better range of motion than before surgery. If more than two levels are fused, you may notice limits in turning your head and looking up and down