

Information for patients and carers

Recovering from Lumbar Spinal Surgery



This booklet supplements the Lumbar Spine Surgery Booklet and it offers advice on what to do when you go home and returning to your everyday activities. There is also advice from your physiotherapist and occupational therapist.

Advice on returning to usual activity

You may see an Occupational Therapist, (OT) when you attend the specialist education clinic, (before the operation).

The OT can assess you and give you advice on carrying out your day-to-day activities. Daily tasks include personal care tasks, work, lifestyle and leisure activities. The OT can also, if appropriate, prescribe assistive equipment to help you.

After your surgery you will also receive an appointment to see a Physiotherapist who will work with you to progress your recovery. This will usually be in your local area and your appointment will be somewhere between 6 and 12 weeks post-op, depending on the type of operation that you have had.

If you do not receive an appointment and wish to see either an OT or a Physiotherapist then please contact the Spinal Team Patient Experience Administrators on the numbers below. You may have to leave a message, but a member of the team will get back to you.

Here is some advice that may assist you in the early days after your discharge from hospital:

- You will benefit from help from your family and friends after your operation. Please accept any help when it is offered
- **Talk to one of the team if you have no support at home after your operation**

- You should start moving around as normally as you can after your operation by gradually increasing your activity which should increase your fitness levels. At first this may be a little uncomfortable, but it will gradually become easier
- Returning to normal activity will vary according to which operation you have had, and the level of function that you wish to achieve
- Try not to sit for too long and maintain a good posture when you do sit down
- Remember initially to do everything in moderation
- Plan ahead, spread activities out over the day or the week
- Alternate heavier tasks with lighter ones
- Try not to become over-tired. Take regular rest breaks
- Try not to stay in one position for a long time

Starting to Exercise

- Walking is a very good exercise and helps you to keep fit. It improves your circulation and general strength. Start by walking a short distance and then gradually build up your speed and how far you go. If you have a dog, ask someone to walk it for you for a few weeks. (It is not advisable to allow a dog to pull you while you have it on a lead. Also it will be difficult for you to pick up and deal with the dog poo). Some people may need to continue to use sticks, crutches or walking poles for a period of time after the surgery. This is normal. In time you may be able to reduce the need to use walking aids
- Swimming and even walking in water are good exercises for you to participate in during your recovery, but do not do so until your wound is fully healed. Use whichever stroke is most comfortable and progress with this as able
- Avoid any contact sports and any sports where you have to twist or change direction quickly; for example, golf, mountain biking, skiing or similar activities, **for at least 6 weeks** after a Lumbar Discectomy/Decompression Operation and **for at least 12 months** after a Lumbar Spinal Fusion (unless your Consultant has given you specific advice that you may do so earlier)

You will need to discuss your return to sports with your Physiotherapist, who will give you tailored advice on this subject.

Returning to work

- You will need to take time off work after you have had your surgery
- Returning to work will depend on what operation you have had, your personal circumstances and on the type of job you have
- **As a guide, following your operation** you can return to:
Lighter work (e.g. work where you sit down) **2 to 4 weeks** after,
Light manual work **4 to 6 weeks** after,
Heavy manual work **12 weeks** after
- **Patients who have had lumbar fusion surgery are advised to discuss return to work at your post op appointment or with your OT or Physiotherapist**
- Consider a gradual or 'phased' return to work. You may be able to initially work shorter or fewer days in your working week. Or you may be able to return to work on reduced or lighter duties
- Please bear in mind some patients take longer to recover than others and this may affect when you can return to work
- It is advisable to discuss your return to work with your employer
- Union Reps and Occupational Health Departments can also provide support
You can also make simple changes to your work space to make it easier for you:
 - Avoid twisting, especially when bending down or reaching up
 - Try to store the documents you use most often in drawers at waist height
 - Make sure that your monitor screen is adjusted so that you don't have to struggle to see it
 - Adjustable height desks are available on the market; why not discuss options with your employer
 - Ensure that your office chair is correctly adjusted. It should be comfortably supportive

- Balance out the periods of time you have to stand, sit and walk around at work

Driving

- We advise that you **do not drive** for a period of **at least 2 weeks** after a Lumbar Discectomy/Decompression Operation and for **at least 4-6 weeks**, (but this could be up to **12 weeks**) after a Lumbar Spinal Fusion, depending on your recovery
- When you resume driving, you should be able to sit comfortably and be able to maintain a good posture in your car seat
- When sitting in the driving seat you should, be able to carry out your safety and visual checks without difficulty. In particular, the checks prior to pulling out into the road
- You should also be able to use the pedals and controls without difficulty. Most importantly, you should be able to operate the brake pedal, especially in an emergency stop. To be safe to drive, **you however need to be in full control of the vehicle, and able to perform an emergency stop without hesitation**
- We suggest that when you feel well enough to drive you have a partner or friend take you out in your car to an empty car park or space, and you have a practice. If you are not in full control, or able to perform an emergency stop without hesitation, leave it another week and try again
- You can travel as a passenger in a car after your operation. It is wise however to initially avoid long journeys
- If, later in your recovery, you do travel longer distances, either as a passenger or a driver in a car. Then, make sure that you take frequent breaks in your journey. Allow yourself time to get out of the car, walk around and have a rest
- Always keep a copy of your latest medication prescription with you when you are driving. You may be asked to produce this if you are stopped by the Police. Be aware there are new Drug Driving Laws in place and there is a drug driving limit which includes prescription medication. If in doubt discuss this with your local pharmacist

Car Insurance

- You must tell your Car Insurance provider that you are having a spinal operation carried out. You should tell them exactly what operation you are having or have had
- Look in your Insurance Policy Schedule, within the section, 'Duty of Disclosure'. It outlines there that you have a legal obligation to inform them of any major medical intervention you have had. If you do not do this it could nullify your insurance cover
- Make a note of the day, date and time you contact the Insurance Company on and with whom you speak/correspond
- Supplying this information to your insurance company should not adversely affect your premium
- You should continue to declare this information in the future

Further Hints and Tips

Please do not engage in heavy lifting activities and extremes of movement or repetitive bending, reaching or twisting for at least:

- **6 weeks after Lumbar Discectomy / Decompression**
- **12 weeks after Lumbar Spinal Fusion.**

Advice on Posture

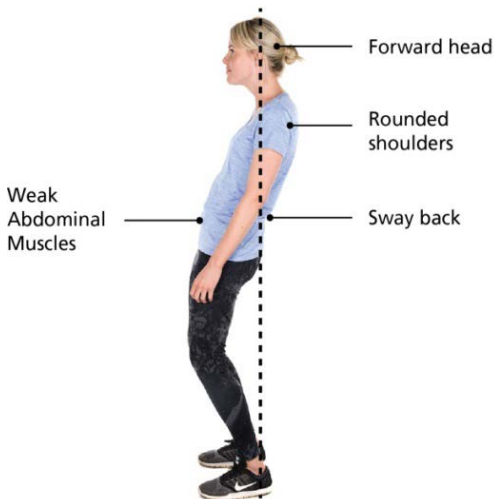
The following information is a guide only.

It is important to remember to change your position often. This will help to stop your muscles from getting tired and will allow your joints to move.

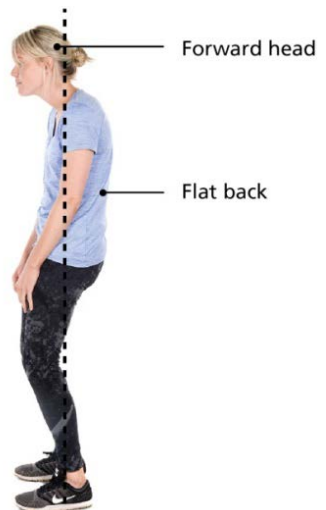
Good Posture

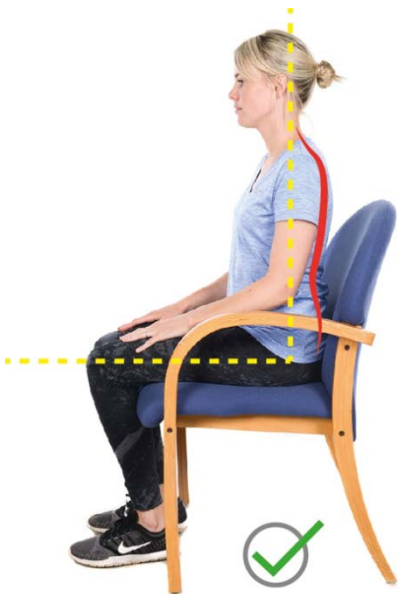


Poor Posture



Poor Posture





Advice on lifting

Do not lift **anything heavy** for at least:

6 weeks after a Lumbar Discectomy/Decompression Operation and for at least **12 weeks** after a Lumbar Spinal Fusion.

Avoid extremes of movement, (e.g. excessive bending or reaching and more importantly twisting) for at least; **6 weeks** after a Lumbar Discectomy/Decompression Operation and for at least; **12 weeks** after a Lumbar Spinal Fusion.

Take care when trying to lift

Here are a few tips that will help you to lift things as safely as possible.

Getting ready to lift

- Do you need to lift the object?
- If it is heavy, can you get help?
- If you are going to lift something, is there anything in your way?

Getting into the right position

- Do not attempt to lift by bending forward. Bend your hips and knees to squat down to your load, keep it close to your body, and straighten your legs to lift
- Never lift a heavy object above shoulder level
- Avoid turning or twisting your body while lifting or holding a heavy object
- Stand close to the object that you want to pick up
- Put your feet on either side of the object and face the way you are going to move
- Make sure your weight is spread evenly over each foot
- Take a firm hold of the object using the whole of your hands, not just your fingertips

Putting the object down

- Do the lift in reverse
- Make sure you are holding the object securely and close to your body
- Use your legs to do the work
- Try not to twist while lifting

Bad



Muscles stretched long and shoulders are forward from anchoring hips

Lifting only with back

Not lining up shoulders and knees cause back to twist

Good



Keep head up

Muscles kept short and shoulders are above anchoring hips

Bend knees and lift with legs

Always face the object - keep your shoulders and your knees lined up (don't twist your back)



Occupational Therapy Advice

Mobility / Access

- If you have difficulty stepping into or out of your house the OT can prescribe grab rails to assist you
- Access steps can be modified by the community OT department. You may however be on a waiting list to have this work carried out
- If you have problems going up stairs the OT can prescribe a commode for you to use downstairs
- In certain cases, a referral can be made to the community OT department for a 2nd bannister rail. There may however be a wait to have this fitted

Personal care

If you are having difficulty with personal care tasks you can discuss this with the OT.

Toileting

- The OT can prescribe various raised toilet seats and frames or grab rails to assist you to use the toilet
- You may find it easier to use a moist tissue to clean yourself after going to the toilet
- A commode can be prescribed by the OT for use at the side of your bed
- For men a urine bottle can be purchased from local pharmacies or equipment retail stores

Dressing and undressing

- Initially, after your operation, you may find it difficult to reach down to your feet when getting dressed / undressed. The OT can prescribe long handled equipment to assist you and will demonstrate this at the specialist education clinic
- Alternatively, some people can manage to cross one foot over and place it onto their opposite knee. This brings the foot nearer to them which can help when putting on lower garments. If you choose to do this you should avoid twisting your body in the process and it should not cause pain in either your back or hips

Bathing and washing

- We advise that you do not sit down in a bath until your wound is fully healed and you can get in and out of the bath without difficulty. This could be for at least **4 weeks** after a lumbar discectomy / decompression operation and for at least **6 to 12 weeks** after a lumbar spinal fusion
- If you have a shower over the bath, use that. So long as you can step into the bath without struggling, in order to use the shower
- If you have a shower cubicle or level access shower, use that
- We recommend that you have a non-slip surface or rubber mat in your bath / shower to avoid slips

- You can use a long-handled, (back) brush to wash your feet and legs
- Until your wound is healed, ensure that it is covered when showering
- Try to place shampoo etc. on a shelf, at approximately waist height, to avoid having to bend down
- If you prefer to have a strip wash instead, the OT can prescribe a perching stool for you to sit on at the sink. The perching stool is **not safe** however to be used in either the bath or shower cubicle

Bed

- The OT or Physiotherapist can advise you if you are having any difficulty transferring into or out of bed
- If your bed is too low, you can increase its height by adding an extra mattress to the bed. Place the firmer mattress next to the bed base. (You will need to ask someone to do this for you)
- Some beds can be raised with 'bed raisers', but this depends on the style of legs fitted to the bed. In some circumstances, bed raisers can be prescribed by the OT
- If your bed is too soft, a board can be put on top of the bed base below the mattress. This should add firmness to the bed. (You will need to ask someone to do this for you)
- If your mattress is too hard, or uncomfortable, you can add a mattress topper or place a duvet on top of the mattress. These should be put **under** the bottom sheet
- You can sleep with a pillow between your knees, if you find this more comfortable
- A commode can be prescribed by the OT for use at the side of your bed

Chair

- The OT or Physiotherapist can advise you if you are having any difficulty transferring into or out of your chair
- Be aware of maintaining a good posture when sitting down and standing up from your chair

- An 'easy chair', should be comfortably supportive, (not too upright as with dining chairs)
- Your chair should have two good arms (for this reason chairs are better than settees)
- **Chair seat length;** this should be 2/3 of the length of your thigh. This measurement should be taken from the back of your bottom towards your knees when sitting in the chair. (You should be able to put your hand in between the cushion edge and the back of your knees). The reason for this measurement is to allow you to have an adequate knee bend when you stand up
- **Chair seat height;** your bottom should be at least level with your knees in sitting. If your bottom is slightly higher than your knees, even better. To gain seat height you may be able to add an extra seat cushion to your chair
- Avoid buying a new chair before your operation as this may not prove to be the best choice for you in the long term and could prove costly. In the short-term, adapt the chair you have, if necessary by adding cushions. Alternatively, if you are able, you could borrow a more suitable chair from a family member or a friend
- **When buying a new easy chair;** this can be expensive, so if, in the future, you choose to purchase a chair, bear the following in mind: Sit in the chair you are considering buying, while in the shop, for at least 15 minutes. It can take this time for you to tell if you are entirely happy with the comfort of the chair

Domestic Activities

Cooking

- **Planning and organisation** are important. Consider the layout of the items in your kitchen and the tasks you need to carry out on a regular basis
- Place items such as pots and pans, which you use regularly, onto work surfaces at approximately waist level. Immediately after

your operation try not to reach up to high or down to low shelves on a regular basis

- **Meal preparation;** prior to your operation, stock your cupboards and freezer with easily prepared meals to use after your operation
- If possible, eat at a table. If this is not possible, the OT can prescribe a trolley for you to transport your meals on
- You could use a shoulder bag to carry items around in
- If you wish, you can prepare drinks in larger batches and store them in a flask. This takes less effort and is more efficient
- Consider the weight of pots and pans. Avoid using heavy or very large cooking pots as these can be difficult to move around and lift
- Only boil the amount of water you need in the kettle
- You can boil vegetables in a metal sieve or wire basket, inside a pan of water. By doing this it reduces the weight to be lifted. The water can then be emptied out of the pan later, when it is cold. If you can, slide the pan to the sink to empty out the water as this takes less effort. The water can also be decanted out of the pan by scooping it out with a jug
- Avoid twisting when carrying out tasks in the kitchen. If you can, squat when bending down, try to avoid bending over too far from your waist especially in the early days after your operation
- Do not over reach to the oven, especially when holding a dish or pot at arm's length. Doing that can greatly increase the load on your spine
- A perching stool and / or trolley can be prescribed by the OT to assist you when carrying out kitchen tasks

Housework

- Initially, avoid any domestic task which involves **excessive bending or lifting** and more importantly **twisting**
- Break your household jobs down into smaller tasks. Pace yourself when carrying out your daily jobs. You don't need to do everything in one go

- Do not vacuum, sweep or mop floors or take out heavy bins for at least **4 weeks** after a lumbar discectomy/decompression operation and for at least **6 weeks** after a lumbar spinal fusion
- If you have to take your kitchen bin bag out do it more often with smaller amounts in it. Ask someone else to take your wheelie bin out for you on the days when the council workers empty them
- You may start to undertake **light** housework, such as washing up **2 to 4 weeks** after your surgery
- Ask for help to change your bed linen for at least **4 weeks** after a lumbar discectomy/decompression operation and for at least **6 to 12 weeks** after a lumbar spinal fusion
- If you have no-one to help you to change your bed linen, you could use a top sheet between you and the duvet cover. It is easier to change a sheet than a duvet cover
- You might find it easier to kneel down at the side of the bed when arranging your bed covers. Don't do this if you cannot stand up again from a kneeling position.

Laundry

- Washing machines - loading and unloading; If possible, ask for help with your laundry for at least **4 weeks** after a lumbar discectomy/decompression operation and for at least **6 weeks** after a lumbar spinal fusion
- When you are loading and unloading the washing machine, bend your knees or kneel down. If you kneel down have a chair or something similar nearby to help you to stand up again
- Don't carry too many items of laundry at any one time, especially when the washing is wet
- You can use a small plastic, double handled tub to carry laundry in. This limits the weight of washing you need to carry at any one time

Shopping

- Ask for help with lifting your shopping for at least **4 weeks** after a lumbar discectomy/decompression operation and for at least **6 weeks** after a lumbar spinal fusion

- Shopping can be done online; some of your local shops may also deliver. Ask the delivery driver to put your shopping onto a table or work surface. This should make it easier for you to put the shopping away
- When you do return to shopping in the supermarket, do it little and often
- You may find it easier to use one of the smaller trolleys at the supermarket
- Don't over fill your shopping bags
- Take care when lifting the shopping bags from the trolley into the car boot, and out again at home
- Do not twist or over reach when handling your shopping

Lifestyle

Gardening

- Do not mow the grass for at least **6 weeks** after your operation
- Avoid heavy gardening for at least **12 weeks** after your operation

Childcare

- Ask for help when caring for children for the first few weeks after the operation
- Avoid twisting your body when dealing with children
- If you can avoid picking up and carrying young children while you are recovering from your surgery
- Ask the child to climb up onto your knee rather than you having to pick them up. If this is not possible kneel or squat down to the child's level when caring for them
- When lifting a child out of a cot make sure that the cot-side is down. Bring the child close to the cot-side before you lift the child up
- When lifting a child into and out of a pram or pushchair, squat or kneel down if you can
- Kneel down when bathing the child

- Be careful not to twist when assisting a child into a car seat
- Avoid carrying a baby in a car seat as all the weight can be on one hand and arm

Air travel

- We advise that you avoid flying in an aircraft for at least **4 weeks** after your operation. Within the first 4 weeks there is an increased risk of you developing a deep vein thrombosis, (blood clot)
- Bear in mind, even after the first four weeks on long haul flights; flights of more than 4 hours, you should make sure that you move around in the aircraft cabin. When you are sitting down rotate your ankles, this will keep your blood pumping. For further information see: <https://cks.nice.org.uk/dvt-prevention-for-travellers#!scenario>

Holiday insurance

- If you take out holiday or travel insurance, now or any time in the future, you should tell the insurance firm that you have had a spinal operation carried out
- If you do not provide this information to the insurance company you may find that you are not fully insured. As a result they may not pay out on a claim
- Supplying this information to your holiday insurance company may affect your premium
- You should continue to supply this information in the future

Sex

- You can resume sexual activity as and when you feel comfortable to do so
- Try talking to your partner about your concerns in order to reduce any worries about causing pain
- Try alternative positions and use pillows to support your back
- The '**Outsiders Sex and Disability Helpline**', offers advice and counselling regarding difficulties with sexual relationships because of physical problems

Physiotherapy

Physical rehabilitation after your operation is very important in helping you to get the most from your surgery.

Your Physiotherapist will give you advice on how to:

- Help you to get back to normal activities
- Help to get your spine moving
- Improve your muscle strength and general fitness
- Help you to improve your balance and ability to walk further
- Improve your knowledge of how your spine works and how to look after it in the future

The physiotherapist will arrange your post-operative physiotherapy. This will usually be between 6-12 weeks post operatively, depending on which operation you have had.

Exercises

Exercises should not increase your pain, or symptoms such as numbness, pins and needles. While you are exercising you may feel a little discomfort, stiffness, pulling or twinges of pain. This is normal straight after your operation.

Getting your spine moving

- Your Physiotherapist will give you gentle mobility exercises depending on which operation you have had, some of the exercises you will already have done before the operation
- We would recommend that you do not over stretch or do repetitive movements until you have been to your Physiotherapy appointment
- Up until that time please move around as normally as you can, `listen to your body`, and remember that the initial healing process takes at least 6-12 weeks to occur

Improving muscle strength and general fitness

Your Physiotherapist will help you to strengthen and re-engage your abdominal, back, gluteal and leg muscles. These muscles help to support your spine. They may have become weaker in the lead up to your operation. Your Physiotherapist will show you how to get these muscles working again.

Improve your balance and ability to walk further

- If you have had pain or pins and needles in your leg before your surgery it is very important that you start to try and use the leg as normally as possible after the surgery
- You may still have some symptoms in your leg but your Physiotherapist will show you how to improve your muscle strength and balance, which will give you more confidence when you walk

The advice outlined above has been provided for your guidance.

It has been designed to help you cope after your operation.

Contact details

Should you require further advice or information please contact:

Orthopaedic Spinal Team

Patient Experience Co-ordinator - 01772 522307

Patient Experience Co-ordinator - 01772 522943

Patient Experience Co-ordinator - 01772 521391

Patient Experience Co-ordinator - 01772 522310

Royal Preston Hospital

Ward 14 - 01772 522474

Ward 16 - 01772 522990

Chorley Hospital

Leyland Ward - 01257 245742

Rawcliffe Ward - 01257 245748

The Patient Advice and Liaison Service (PALS)

PALS offer support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

Telephone: 01772 522972 Email: PALS@LTHTR.nhs.uk

Care provided by students

At Lancashire Teaching Hospitals our students get practical experience by treating patients.

Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.patient.co.uk

www.accessable.co.uk

Support groups and organisations

EuroSpine

www.eurospine.org - European Spinal Surgeons website, information on spinal conditions and surgery.

British Association of Spinal Surgeons

www.spinesurgeons.ac.uk - Advice and information on spinal conditions and surgery.

SPORT Trial

www.dartmouth.edu/sport-trial/patients.htm - Research based information and treatment calculator for spinal decompression and discectomy

Backcare

www.backcare.org.uk - Information about back pain and how to manage it. Helpline: 0845 130 2704

Brain and Spine Foundation

www.brainandspine.org.uk - Advice and support for people with brain and spine conditions. Helpline: 0808 808 1000

Brain and Spinal Injury Centre (BASIC)

www.basiccharity.org.uk Helpline: 0870 750 0000

Outsiders Sex and disability advice.

www.outsiders.org.uk Helpline: 07770 884 985

Scoliosis Association (SAUK)

www.sauk.org.uk - Advice, support and information about scoliosis and other spinal conditions.

Helpline: 020 8964 1166

Spinal Injuries Association (SIA)

www.spinal.co.uk Helpline: 0800 980 0501

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All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking this will include Nicotine Replacement Therapy to help manage your symptoms of withdrawal and the opportunity to speak to a nurse or advisor from the specialist Tobacco and Alcohol Care Team.

If you want to stop smoking, you can also contact Smokefree Lancashire on Freephone **08081962638**

Please ask a member of staff if you would like help in understanding this information.

This information can be made available in large print, audio, Braille and in other languages.

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