Recovery time after cervical discectomy and fusion varies depending on your particular situation, the number of levels involved, as well as your general health. The key to a successful recovery is maintaining a positive attitude. You will be able to take short walks while in the hospital, and need to gradually increase the distance and frequency of your walks once at home. If a fusion has been performed, it can take up to three months for the vertebrae to completely join together. Your doctor will give you specific instructions on activity levels, including when you can resume driving and return to work.

What if I Have Other Questions?
Just give us a call. We’ll be happy to answer any questions you may have. And be sure to ask us about our upcoming seminars on back and neck pain – we’d love to see you!

How are Back Problems Evaluated?
(Continued from inside)

MRI or “magnetic resonance imaging” – MRI uses a powerful magnet to send radio waves into the body. The images produced are very helpful in visualizing the soft tissues such as the spinal cord, as well as the discs and nerve roots.

Bone Scans – These are useful in revealing certain abnormalities such as infections, fractures, tumors and arthritis. Because bone scans are unable to differentiate between these problems, they are usually performed in conjunction with other diagnostic tests.

How Long Will it Take to Recover?
(Continued from flap)

The time spent in the hospital after a cervical discectomy and fusion depends on several factors including your overall health and the extent of your particular surgery. Some people may be able to return home the same day while others may spend one to two days in the hospital.

How Long will it Take to Recover?
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Cervical Discectomy and Fusion

What is a Cervical Discectomy and Fusion?

A cervical discectomy and fusion is a surgical procedure performed on the cervical (neck) region of the spine to help relieve pressure on nerves, and perhaps even the spinal cord itself. Over time, wear and tear, arthritis or an injury can damage the structures of the cervical spine resulting in pressure and irritation to nerves and nerve roots. This pressure can cause severe pain, discomfort, and numbness not only to the neck, but down the arms as well. During the operation, a small incision is made, usually in the front of the neck, and the surgeon removes the bony material or disc that is causing the problem. In most cases, the surgeon then fuses or joins together the affected vertebrae using bone graft or bone graft and a metal plate.

Who is a Candidate?

Frequent pain and/or numbness in the neck or down the arms will usually result in a visit to the doctor. A diseased or damaged disc in the neck is a common cause of this pain or numbness, and can happen for a number of reasons. Over time, a disc can wear and “flatten,” resulting in the vertebrae above and below the flattened disc to slide back and forth, or even touch. This can pinch or irritate the nerves causing pain and numbness. Another cause may be a sudden injury, resulting in a bulging or herniating disc, causing pressure on the nerves and nerve roots. Bony growths (spurs) can also form, and further narrow the pathways through which the nerves must travel.

What are the Alternatives?

Surgery is usually the last option considered. If your symptoms are mild, you may not require any treatment at all. Other conservative treatments such as physical therapy, medications, and steroid injections may relieve symptoms for a time; however they usually do not permanently change the underlying cause of the problem. In some cases, cervical discectomy and fusion may be the only solution to remove irritation and create more space for the nerves.

How are Neck Problems Evaluated?

Your doctor will use a number of approaches to evaluate and diagnose neck problems such as a herniated disc. These include:

A Detailed History – Your role in providing a detailed history is very important. Your doctor will need to know where and when it hurts, if there was a recent injury or fall, and a description of the pain. Are there positions or activities that make it feel worse? What makes it feel better? All of these details can help your doctor pinpoint the problem.

A Physical Exam – Once your history is given, a thorough exam by a spine expert is another important step in getting a good diagnosis.

Diagnostic Imaging – Xrays can show the structure and alignment of the vertebrae, as well as the presence and size of bone spurs or other bony abnormalities.

CT or “computerized tomography” – This is a special kind of xray machine. Rather than a single xray, a CT scanner sends out a number of beams at different angles. These images are then read by a computer, producing detailed cross-sections or “slices” that can show the shape and size of the spinal canal and the surrounding structures.

(Continued on flap)