

## Information about you

As part of your care, when you come to the hospital, information about you is shared between members of a health care team, some of whom you may not meet. It may be used to help train any staff involved in your care. Information we collect may also be used after you have been treated to help us to maintain and improve the quality of our care, to plan services, or to research into new developments.

We may pass on information to other health organisations to help improve the quality of care provided by the NHS generally.

All information is treated as strictly confidential, and is not given to anyone who does not need it. If you have any concerns please ask your doctor, or the person caring for you.

Under the Data Protection Act (1998), Hull and East Yorkshire Hospitals Trust is responsible for maintaining the confidentiality of any information we hold about you.

This leaflet was produced by Hull and East Yorkshire Hospitals NHS Trust,  
**Department** and will be reviewed in  
**Ref:**

**Clinical Support Services  
Division of Neurosurgery**

## **Care of Your Back Following Lumbar Spine Surgery.**

June 2010

*Working in Partnership to Provide a  
Quality Healthcare Service*

**This leaflet has been produced to give you information about how to care for your back following surgery. It is not meant to replace discussion between you and consultant or neuro physiotherapist. If after reading it, you require further explanation please discuss this with the relevant person but may act as a starting point for discussion.**

**Your consultant should have explained the operation procedure and the risks / benefits. This booklet will concentrate on providing you with information on the Physiotherapy input you can expect after surgery.**

**If after reading this booklet, you require further explanation please discuss this with a member of the healthcare team who has been caring for you.**

In most circumstances you will be reviewed by the physiotherapist on the first day after your surgery (in some cases you may even be reviewed on the same day). The physiotherapist will assess your limb movement and sensation and will teach you a series of exercises (which are described later in this booklet) to help you to get your back moving.

The physiotherapist will also teach you how to get out of bed and encourage you to begin walking. You may have some attachments such as drips, catheter and drains. These do not prevent you from walking, although you may require some assistance initially.

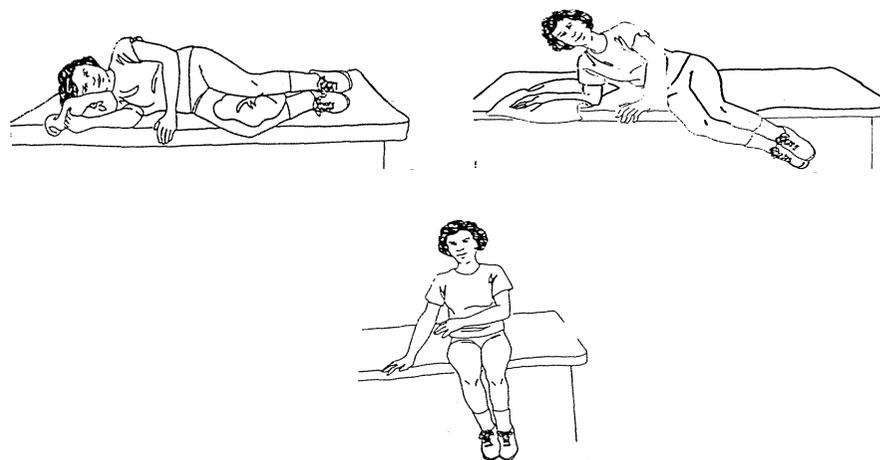
Following surgery you will need to care for your back to ensure that the operation is a success and that potential post-operative complications can be minimised.

**It is important to strike a balance between periods of activity and rest.**

### **LYING**

A good firm support is usually desirable; a mattress that is too soft will provide you with little support. You are free to move around in bed, and practicing rolling from side to side will make transferring in and out of bed much easier.

It is important to minimise the strain on your back when getting in and out of bed. To get out of bed, roll onto your side and swing your legs over the edge of the bed, whilst pushing up with your arms (see following diagram). Sit on the edge of the bed for a moment before standing up.



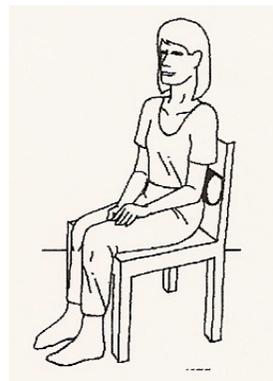
### **SITTING**

Whilst sitting out in a chair you should ensure a good upright posture. You should avoid standing still or sitting for prolonged periods as this will cause your back to stiffen and your posture to deteriorate.

Avoid sitting in soft low chairs as this will cause your back posture to become rounded. You may find it useful to place a rolled up towel into the curve in your lower back to provide support and help maintain a good posture (see middle diagram).



GOOD POSTURE



TOWEL SUPPORT



POOR POSTURE

## WALKING

Initially after your operation your back may be sore as you move; this may increase over the first couple of days but will then improve. You should aim to walk short distances little and often to ensure your muscles do not stiffen up. Once you are home try to increase the distance you walk daily always paying attention to your posture.

## Pain Management

Following your spinal surgery it is likely that you will feel some pain and discomfort as you recover from the procedure. Therefore it is important to discuss with your GP **appropriate pain medication** during your recovery period, so that you can manage daily activities.

## LIFTING

**Avoid lifting heavy objects** and also holding items at arms length. Always use a correct lifting technique, bending at the knees and not at your back (see following diagram). Avoid bending, twisting or leaning movements.



RIGHT



WRONG

## PERSONAL HYGIENE

Showers are initially better for you as sitting in a bath increases the pressure through your lower back. You can resume baths once sitting is comfortable. If you have concerns please discuss this with the Occupational Therapist on the Ward prior to discharge.

Initially when washing you will need to keep your wound dry, the Nurse looking after you will be able to advise you on how to do this.

## DRIVING

Always ensure that your driving position allows you to maintain a good posture. Long distances should be avoided unless interspersed with regular stops. Get out of the car, walk about and stretch.

It is **your responsibility** to ensure insurance cover prior to commencing driving after your surgery.

## WORK

Return to work will depend very much upon the individual and the type of work you do. It is important that you ask your **GP** when it is safe to return to work.

## PHYSIOTHERAPY AFTER SURGERY

In most circumstances you will be reviewed by the physiotherapist on the first day after your surgery (in some cases you may even be reviewed on the same day). The physiotherapist will assess your limb movement and sensation and will teach you a series of exercises (which are described later in this booklet) to help you to get your back moving.

The physiotherapist will also teach you how to get out of bed and encourage you to begin walking. You may have some attachments such as drips, catheter and drains. These do not prevent you from walking, although you may require some assistance initially. You will also be expected to sit out into a chair for short periods from the first day after surgery

**Prior to being discharged from hospital you will need to be able to complete your exercises, walk short distances comfortably and be able to walk up and down a flight of stairs (if you have them).**

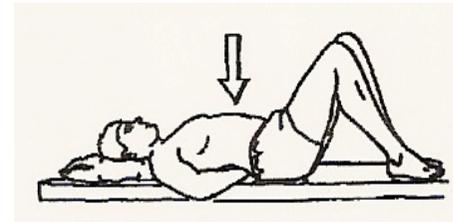
## EXERCISES

These exercises are designed to improve the movement and strength in your back, prevent muscle spasm and help the healing process. They should be carried out approximately three times a day. Begin by doing 2 or 3 of each exercise and gradually build up from there, aiming to build up to performing 15 minutes of exercise at each session.

**If you experience any increase in pain cease from doing that exercise until the pain resolves at which point you can recommence the exercise.** It is also beneficial to increase your walking tolerance to aid general fitness. This should be done within the limits of pain.

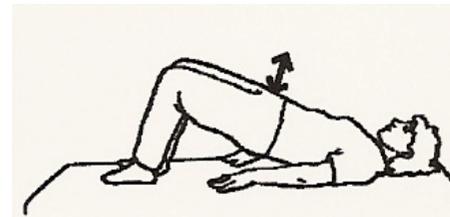
You may also be provided with additional exercises to strengthen your back and legs if your physiotherapist deems this necessary.

## PHASE 1 (COMMENCE IMMEDIATELY AFTER SURGERY)



Lying on your back with your knees bent, tighten your stomach muscles and flatten the curve of your back into the bed.

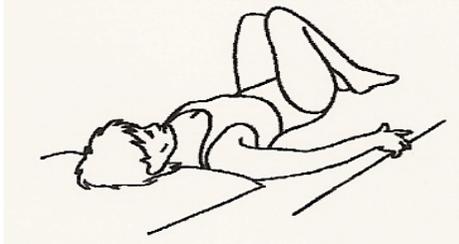
Hold for 5 seconds.



Lying on your back with knees bent and feet flat to the bed, lift your bottom upwards.

Hold the position for 3 seconds.

Lower down and slowly return to the starting position



Lying on your back with knees together and bent, slowly roll your knees from side to side keeping your upper trunk still.



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Sit in good posture, push the thumbs or fingertips into the deep low back extensor muscles with firm pressure. Hold this pressure. Slowly try to tighten the low back extensor muscles to cause them to swell out into the fingertips

### Telephone Follow up

Your Consultant may place you onto the telephone follow up service. This is when you are expected you recover well with time and you do not routinely need to see the Consultant. The Physiotherapists will arrange this follow up procedure with you at your discharge and make provision to track your progress by telephone.

**Not every patient is routinely followed up in physiotherapy out-patients. It is your responsibility to continue with your exercises and back care independently. If you continue to have any pain, stiffness or weakness you may be referred for ongoing physiotherapy at your local Physiotherapy unit.**

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On hands and knees. Pull stomach up by hollowing out the tummy, do not allow the back to move whilst you do this. Hold this position for 5-10 seconds repeat 10 times or as pain allows.

## USEFUL NUMBERS

Hull Royal Infirmary  
Physiotherapy Department  
(Ask for Neurosurgical Physiotherapists) 01482 67 4539

Hull Royal Infirmary Ward 4 01482 67 4777