



ORTHOPAEDIC
& SPINE CENTER
Open MRI Center



THE RECOVERY PROCESS

PART II

If you're considering a major Orthopaedic surgical procedure to relieve pain in your back, knee, or hip, there's a lot to consider. These procedures, while common, do come with their own risks. While surgery can greatly improve your function and help you get much closer to living pain-free, the surgery itself is only part of the solution. **Understanding what you can expect from your surgery and recovery is extremely important.**



Recovery from Surgical Spine Procedures

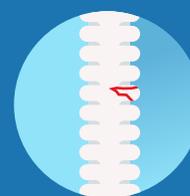
Spine surgery is usually a last resort for persistent pain. Surgery is never an option for the back pain caused by muscular strain, which most of us will have at some point in our lives. Pain can be caused by a variety of reasons, but surgery may be needed as a treatment for the following:



Spinal Stenosis – a narrowing of the space holding the spinal cord caused by development of bone spurs



Scoliosis or curvature of the spine



Compression Fractures of the Spine



Bulging or Ruptured Spinal Discs



Severe Arthritis, Bone Spurs



Tumors of the Spine

Time in the Hospital



There are many different types of spine surgery to consider and because each spine patient is unique, your recovery time can vary in length. Almost all one level spine procedures are done as outpatient surgeries which means you will go home the same day as your surgery. Whether you qualify for outpatient surgery will depend on a number of factors; such as:

- ➔ Does your insurance company approve that this procedure be performed on an outpatient basis?
- ➔ Your overall health status
- ➔ Do you have co-morbidities, such as diabetes, heart conditions, high blood pressure that need careful monitoring during and after surgery?
- ➔ Have you had adverse reactions to anesthesia in the past?
- ➔ Do you have support at home to care for you after surgery?

If you qualify for outpatient surgery, special care will be taken in the OR by the anesthesiologist to use shorter-acting anesthesia so that you will awaken sufficiently to be discharged to go home the same day.

Here are the average length of stays for the most commonly performed spine procedures done by the Spine Team at OSC:

Anterior Cervical Disc Fusion Surgery

Outpatient for one level

Cervical or Lumbar Disc Replacement Surgery

Outpatient or 1- 2 days in the hospital

Lumbar Decompression Surgery

Outpatient or 1- 2 days in the hospital

Fusion Surgery

Outpatient or 1- 2 days in the hospital

Minimally - Invasive Lumbar Fusion

Outpatient or 1-2 days in the hospital

Laminectomy

Outpatient

Kyphoplasty

Performed at OSC Office; patient goes home immediately

More complex procedures, such as osteotomies or spinal reconstruction surgeries, typically require more time in the hospital. Your surgeon can provide you with more specific details for your case.

Recovery at Home: Bracing



After spine surgery, most patients will be sent home from the hospital with either a neck brace or a lower back brace. These braces provide support and protection for the surgical site and sutures while the patient heals from their surgical procedure. It is important that patients carefully follow physician instructions about wearing the braces for the prescribed length of time.

Please note: Patients who must wear cervical collars are advised not to drive while wearing their brace. If you are in a motor-vehicle accident while wearing a cervical collar, you will be found at fault for the accident, regardless of the circumstances surrounding the accident.

You will be fitted for your cervical or lumbar brace before surgery and it is important that you take time to try it out at home before the day of your surgery. Can you sleep comfortably in your bed or will you need to sit in a recliner or prop yourself on pillows for comfort? Does the brace rub or chafe your skin or fit too loosely or tightly? These braces are expensive and cannot be returned. Wearing them as directed by your physician for many hours a day/night will be an important part of your recovery. If you have problems wearing your brace before your surgery, your surgical scheduler can work with you to help make the brace more comfortable. Make sure that you can tolerate yours well before you need it after surgery.

Exercise and Physical Therapy Routines



Most patients are advised to spend about half of their time resting and half of their time up and moving about to assist in the recovery process. OSC Spine Specialists recommend walking as a great way to gently start exercising after spine surgery. If you are not taking pain medication, a stationary bicycle can also be used.

After your spine surgery, physical therapy may be recommended for you. Your physician will determine if a Physical Therapist can help you to recover more quickly. If so, a Physical Therapist will visit with you either in the hospital or at home to help you develop an exercise regimen that's tailored to your personal needs. It's important to perform your prescribed physical therapy exactly as your therapist recommends. Failure to do so will lengthen your recovery time and may impede the proper recovery process.

Your physical therapist will help you develop a pain management regimen that's suitable for your needs. This may include ice application. Learning how to perform everyday activities with altered body movements can do a great deal to ease pain post-surgery.

Recovery from Total or Partial Knee Replacement Surgery

Total knee replacement surgery, also known as total knee arthroplasty, is a procedure in which the kneecap is replaced and bones in the knee joint are resurfaced and capped with plastic and metal parts. With advances in technology, it is now possible to only replace the portion of the knee joint that is severely damaged, such as the kneecap and the medial side of the knee, instead of replacing the entire knee joint. Patients with severe knee arthritis or a knee injury may be eligible for this surgery, called partial knee arthroplasty or replacement.



During the procedure, the surgeon removes damaged surfaces of the knee and resurfaces them with a prosthesis. The most common choice is a cemented prosthesis, which attaches to the bone with surgical cement. An uncemented prosthesis attaches to the bone with a porous surface that allows the bone to grow into the prosthesis. Surgeons may use a combination of cemented and uncemented prostheses, depending on the case.

Patients may experience considerable pain following knee replacement surgery and should be prepared for a longer recovery. After about 3 months, most patients should feel that they are at or near a complete recovery. Patients report a much shorter recovery time with partial knee replacement and a shorter duration of physical therapy.

Time in the Hospital



The average recovery time in the hospital after knee replacement surgery varies. Partial knee replacements are performed by OSC surgeons on an outpatient basis. Total knee replacements can be done on an outpatient basis or most often the patient will spend

1-2 nights in the hospital. The exception to the rule is if the patient has Medicare and will be going to a rehab facility after hospital discharge. In this case, the Government requires that they stay in the hospital for 3 days.

You will be given elastic compression stockings in the hospital to wear on your legs for four to six weeks after surgery. These stockings help your blood to circulate and help to prevent Deep Vein Thrombosis. While in the hospital, you may also be given Sequential Compression Devices to wear on your calves. These inflatable devices help to provide additional support to patients while they recover from joint replacement surgery.

Recovery at Home



Most of your recovery will take place at home. Your physical therapist will come to your home for the first two to three weeks after your surgery to help you learn how to use your new knee. You will be given specific exercises to perform multiple times a day that will aid your knee in regaining its range of motion and to help it heal. How much motion you regain is largely up to you and your determination to complete your exercises every day.

Physical Therapy Routines and Exercise



Your physical therapist will visit you in the hospital on the day of your surgery to assess your individual case. The physical therapist will get you out of bed and walking soon after your surgery. You will use a walker as you take your first steps with your new knee. Depending on your discharge date, you must demonstrate that

you can walk up and down a few steps before you can leave the hospital for home. You will also learn the right movements that will help prevent blood clots immediately following surgery. Other exercises will prevent the formation of scar tissue, strengthen your knee muscles, and help the new joint heal.

Physical Therapy Evaluations



After the first 2-3 weeks, you will go to the physical therapist's office for treatment for several more weeks. You will work closely with your therapist to evaluate your progress and pinpoint any particular activities that you're having trouble with. Let your therapist know about your pain levels and ability to move. Expect your physical therapist to ask you about popping or clicking noises in the knee, swelling, and pain.

Your physical therapy appointments will gradually become less frequent. After several months, your therapist will release you for regular activity. You will be given instructions on how to proceed with exercise to keep your knee in good shape. You will not need to return to the physical therapist again unless you experience further pain or problems.

Recovery from Hip Replacement Surgery

Hip replacement is becoming increasingly common. Minimally-invasive surgical techniques now make it possible to enjoy a fast recovery and zero restrictions after hip replacement. Direct anterior hip replacement requires a short incision just three to four inches long at the front of the hip. The surgeon does not have to cut or detach any muscles or tendons, and patients typically experience quick rehabilitation. The anterior approach has become the method of choice for many surgeons, while other surgeons have failed to embrace the approach.



Time in the Hospital



The length of the hospital stay varies greatly from one patient to the next depending on the case. Orthopaedic & Spine Replacement Center (OSC) uses the direct anterior approach to hip surgery, which is typically associated with a shorter stay in the hospital. This method does not require the same restrictions required with traditional hip replacements.

You will be given elastic compression stockings in the hospital to wear on your legs for four to six weeks after surgery. These stockings help your blood to circulate and help to prevent DVTs. While in the hospital, you may also be given Sequential Compression Devices to wear on your calves. These inflatable devices help to provide additional support to patients while they recover from joint replacement surgery. Patients must be able to walk up and down stairs before they are discharged from the hospital. This shows that you will be able to safely move around your home by the time you are discharged.

Recovery at Home



Patients are able to return to normal activities as soon as they feel they can do so safely. The biggest concern following a hip replacement is patient safety. The minimally-invasive, direct anterior approach to hip replacement does not put patients at a risk of hip dislocation, however.

Patients are sent home from the hospital with a cane and walker to assist them during the early stages of recovery. You should use these as often as you feel the need, but don't hesitate to move away from them as soon as you feel comfortable. Patients may walk with the cane and walker anywhere from a day or two to several weeks. Patients will be restricted from driving for two weeks or less. You should plan to return to work within four weeks.

Physical Therapy



Most patients find that they do not need physical therapy after hip replacement surgery. In fact, they typically feel much better than they did prior to the surgery. Patients often find that they can engage in activities they haven't done in years. You may meet with a physical therapist in the hospital that can show you exercises to do at home, however, it is unlikely that you will need ongoing physical therapy after this procedure.

If you're preparing for spine, knee, or hip surgery, it's important to discuss the surgical procedure with your doctor so you know exactly what to expect. This guide gives you an informed starting point to begin your preparation. By working closely with your physician, you can learn more about what to expect in your individual case.

The right surgical procedure can make an immense difference in your pain and activity levels. Whether you're facing the quick recovery associated with a hip replacement or a longer recovery from a total knee replacement, the final outcome will leave you feeling much better. Consult with your doctor to learn more.

About Orthopaedic & Spine Center

Orthopaedic & Spine Center, located in Newport News, Virginia, is a full-service orthopedic practice with 32 patient exam rooms, three x-ray suites, a Lunar DPX Bone Densitometer Room, an Open 1.2Tesla Magnetic Resonance Imaging (MRI) Center, and a Physical Therapy Center on campus. OSC physicians have full staff privileges at Mary Immaculate Hospital and Riverside Regional Medical Center and active clinical staff privileges at Peninsula Surgery Center. Between 8% and 12% of OSC patients have surgery per year while the rest are treated with conservative approaches. To learn more, visit www.osc-ortho.com.



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