

Notes



Department of Orthopaedic  
Physiotherapy

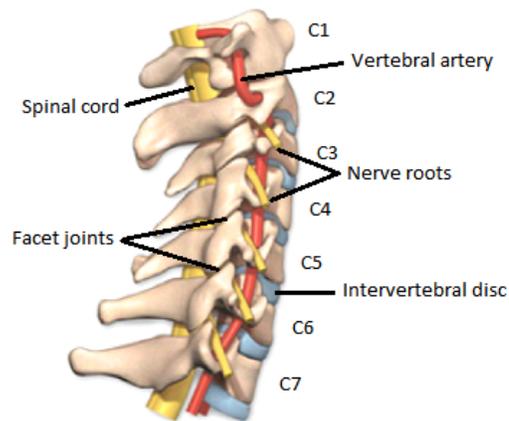
Neck Surgery:  
Physiotherapy  
Information and Advice  
for Patients

Produced by the Orthopaedic Physiotherapy Team,

University Hospital Llandough

## Introduction

Neck surgery is required when one or more of the structures in the neck are compressing the spinal cord or nerve roots. The aim of the surgery is to remove the structures compressing the nerves in order to relieve your pain. The most common neck surgeries involve 'fusing' two or more of the bones in your neck together to stabilise the neck and prevent painful movement. Cages, plates, screws and rods can all be used to achieve this fusion.



## What you can expect after your operation

- Physiotherapy usually starts the day after surgery. If it is safe, you may get up with the nursing staff before this. The initial physiotherapy session consists of an assessment of your muscle power and sensation as well as getting you out of bed and walking. We will gradually progress the distance you walk.
- To help your posture we try to avoid using walking aids. Following neck surgery you are unlikely to need any walking aids unless you are already using them prior to surgery, in which case, you may still require them afterwards.
- Your physiotherapy treatment in hospital ends when you have achieved your discharge goals. These include walking safely, moving on and off the bed independently, performing your exercises well and climbing stairs if necessary.

- You may be referred for ongoing physiotherapy treatment at your nearest out-patient department. This will be arranged prior to your discharge.

## Driving

- We would usually recommend waiting until your follow up with your surgeon before you resume driving.
- According to rule 90 of the Highway Code, you must “make sure that you are fit to drive. You **MUST** report to the Driver and Vehicle Licensing Agency (DVLA) any health condition likely to affect your driving.” **Law RTA 1988 sec 94.**
- Also, rule 96 states: “You **MUST NOT** drive under the influence of drugs or medicine. For medicines, check with your doctor or pharmacist and do not drive if you are advised that you may be impaired.” **Law RTA 1988 sec 94.**
- If you choose to resume driving before your follow up appointment with your consultant then it is your responsibility to ensure that you are able to perform all actions necessary to drive safely.
- We also suggest contacting your insurance company before you resume driving to ensure you are covered under your policy.

If you have any further questions about your surgery please contact your ward via:

**West 5: (029) 20715336 (physiotherapists) or  
(029) 20715007 (reception/nursing station)**

If your question is regarding an out-patient physiotherapy appointment, please contact your local physiotherapy department first.

### **Exercise 3: Nerve Glide**

- After spinal surgery the nerves in your spine can become less mobile. This exercise helps to gently move the nerves running down your arm.
- Start off in a 'salute' position with your elbow bent and your palm facing forwards. Slowly straighten your elbow, turning your palm upwards until you feel a 'pull' anywhere from your neck, down the length of your arm or into your hand.
- Do not hold this position. As soon as you start to feel a 'pull' take your hand back to the starting position. **Repeat up to 10 times.**



### **Return to activities**

- You may be referred for ongoing outpatient physiotherapy to review you after surgery and progress your exercises and activity. This will be at your nearest outpatient department.
- Walking is unrestricted and will be your main form of exercise for the first 6-12 weeks. Returning to activities is guided by your comfort but we recommend increasing your physical activity gradually over the next 6-12 weeks.

### **Sports and Exercise**

- After 6-12 weeks, a gradual return to sport and exercise is possible. Ensure you have had a follow-up X-ray and your pain levels are under control before you try this.

- Seek advice from your consultant and out-patient physiotherapist if returning to any sports, especially contact sports.

### **Postural Advice**

- After your surgery it is important to maintain a correct posture to allow your spine to heal correctly and reduce your pain.
- When you are not lying down, we advise you to keep an upright posture at all times with your shoulders relaxed. Pillows can be very useful to help your shoulders relax by supporting your arms in sitting.
- To reduce the amount of force going through your spine and to give your neck muscles a rest, we suggest you do not sit or stand in one position for long time periods and change position every 30 -40 minutes.
- If you plan on taking any long car journeys we suggest regular breaks to move and walk around. If you are required to wear a neck collar after your surgery you should wear it at all times in the car.

### **Precautions:**

After your operation, **YOU ARE ALLOWED TO MOVE** your head and neck. You will naturally move your head and neck as far as you are comfortable doing so during everyday activities and this will aid your recovery. However, to allow the operated area to heal properly, it is important to adhere to certain precautions:

- No heavy lifting for up to 12 weeks. Start with lifting 1kg (a full kettle) for 4-6 weeks. Lift light loads only for the duration of your precautions.
- **Discectomy/Decompression:** avoid excessive and repetitive bending or twisting of your neck for 6 weeks, especially combined bending and twisting. This will allow any weakness in the disc to scar up and soft tissues to heal.
- **Fusion:** avoid any forced or excessive repetitive movements of your neck for 3 months. This will allow the vertebrae in the neck to fuse solidly together.

- If you are required to wear a brace or collar after your operation, your physiotherapist will discuss with you when, and for how long, it needs to be worn.

### **Log Roll**

You can use a log roll technique to get in and out of bed for 4-12 weeks. This prevents any excessive twisting.

- Bend your knees and roll onto your side (if your incision is at the front of your neck you may find it easier to roll onto the side of your incision).



- Slowly move your legs over the bed edge.
- At the same time push up from your elbow into an upright position.



### **Exercises**

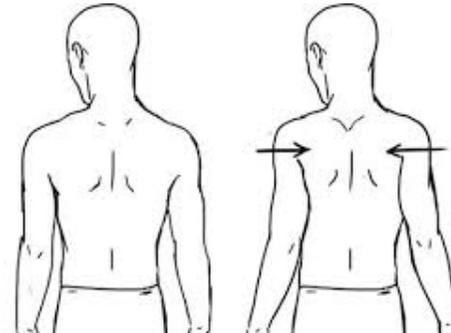
There are 3 exercises to aid in your recovery and help you keep a good neck and shoulder posture.

Your physiotherapist will teach you these exercises following your surgery and then you can start these exercises as soon as you feel comfortable. They can be performed in sitting or standing.

***Aim to complete each set of exercises 3-4 times a day.***

### **Exercise 1: Shoulder Setting**

- This exercise works the muscles in between your shoulder blades to maintain a good posture. Move your shoulders backwards and down, squeezing your shoulder blades together and hold for 5 seconds. ***Relax and repeat 10 times.***



### **Exercise 2: Neck Retraction**

- This exercise works the deep muscles in your neck and helps to maintain a good neck posture.
- Move your head and chin backwards (avoid tilting your head up or down). This may be a very small movement.
- Hold for 3 seconds. ***Relax and repeat 10 times.***

