

Day Procedure Unit

Lumbar Spine Micro-discectomy or Decompression

Why is the operation being done?

These operations are a treatment for leg pain or numbness caused by a 'slipped disc'. Pressure on the nerves in the back causes leg pain (sometimes called sciatica) or numbness. This usually settles without invasive treatment but sometimes needs an operation which may be either a micro-discectomy or a lumbar decompression, both done under a general anaesthetic.

What does the operation involve?

In a micro-discectomy the part of the disc that is protruding (not the whole disc) and any disc fragments that are pressing on the nerve root are removed. It involves removing the damaged disc through a small incision at the back of the spine. The incision is repaired with dissolvable stitches and covered with a small adhesive dressing.

A lumbar decompression is indicated if your spinal canal is too narrow, and pressure causes leg pain and numbness. The narrowing may be due to extra bone from arthritis or a shift in alignment of the bones of your spine. The operation removes the material causing pressure on the nerve and widens the spinal canal.

What are the risks of the surgery?

There are risks involved in having any form of surgery, especially those requiring a general anaesthetic. Common problems in spinal surgery involve

- Wound site infection
- Blood clots in the legs
- Infection
- Leak of the fluid which surrounds the nerves in the spinal cord
- Injury to the nerves as they leave the spine
- Worsening back pain

Your doctor will go through these with you when highlighting the risks of surgery. Do ask if more information is needed.

Day Surgery management

You will be asked to attend the pre-admission assessment clinic 1-6 weeks prior to admission to ensure you are fit for surgery. You will be seen in the pre-admission clinic by the nurse for any necessary pre-operative tests, which may include blood tests, cardiogram (ECG) and a chest x-ray.

You will be admitted and discharged on the day of surgery so you will need someone to drive you home and someone to look after you, for at least 24 hours. However, it may be necessary for you to stay in hospital overnight, so please bring an overnight bag.

When can I drive?

You can start driving again when you feel comfortable and confident enough to operate a vehicle and perform an emergency stop. If you have any noticeable leg weakness or persistent numbness in your leg or feet, we advise you to delay going back to driving.

When can I return to work?

Returning to work as quickly as possible is generally beneficial. This is usually between 2 to 6 weeks depending on how physical your job is. You should aim for a gradual return to your previous duties at work. It may be a good idea to consider returning on part-time hours for a few days at first.

When can I resume normal activities?

You should keep moving after your surgery and return to full activities as soon as possible. When you return home, you should gradually increase your fitness and activity levels. At first this may be a little uncomfortable, but as you gradually increase your activities it will become easier.

When will I have a follow-up appointment?

You will be seen at 1 week post-operatively in an outpatient clinic for a wound check. If all is well at this stage, you will have a further appointment at 6 weeks after your operation.

What should I watch out for after the operation?

Recovery after your operation may be gradual; you will not get better overnight. You may experience "off" days where you appear to be in discomfort, do not despair - this is normal. If you experience any of the following symptoms, you must contact the Spine Team immediately (see below):

- Constant pain which gets worse
- New numbness or worsening of existing numbness
- New muscle weakness or worsening of existing numbness
- Change in bladder function
- Dressings repeatedly being soaked by blood

Who should I contact after the operation if I am worried?

If you experience any of the symptoms above, then please call the Hospital Switchboard on **01603 286286** and ask to speak to the **Orthopaedics Senior House Officer On- Call**. They will be able to advise you as any further action that may be required and can be contacted 24hrs a day.

If you have any other concerns after the operation, then please contact NHS Direct or your GP.

Further Information:

British Association of Spine Surgeons: www.spinesurgeons.ac.uk/patients/patient-information/lumbar-discectomy-and-decompression

British Association Day Surgery: www.daysurgeryuk.org

Anaesthetic Website: www.youranaesthetic.info

For help Giving up Smoking: NHS Smoking Helpline 0800 169 0169 or contact local service 'CIGNIFICANT' run by Norfolk Health Authority NHS 0800 0854113 or www.norfolk-hospital.net/depart/anaes