

Lumbar Spinal Fusion Surgery

This handout will explain lumbar spinal fusion from the back or posterior approach.

What is a lumbar spinal fusion from the back or posterior approach?

This surgery is done on your lower spine. It helps to stabilize your spine by healing or fusing the bones. The doctor may use your own bone for this. Bone from a bone bank might be needed as well. Special hardware like rods, screws, or mesh cages could be used to strengthen the spine. The goal is for new bone to grow at the fusion site so that this part of the spine is stronger. There are many types of fusion surgeries. Your doctor will discuss what might be best for you.

Getting Ready for Surgery

Please refer to your booklet “Having Surgery at UW Hospital.”

Please begin taking a stool softener (docusate with senna) two days **before** surgery with at least 8 ounces of water. Do **not** take any fiber or stool softener on the morning of surgery.

Urination

If you are having any trouble with urination, please let a member of your care team know. They may want to start a medicine to help before surgery.

Going Home

You will go home one or two days after surgery. You will need someone spend at least 2-5 days with you at home. If you don't have anyone to help, you will need to plan for a discharge to a rehab or skilled nursing facility. You will need to have physical and occupational therapy after discharge.

What to Expect After Surgery

Pain

To help decrease pain in your back:

- Change positions often
- Use heat or ice on your lower back
- If you use an ice pack, cover it with a cloth and apply for 20 minutes per hour
- Take pain medicines as prescribed

You should not take any non-steroidal anti-inflammatory medicines such as, ibuprofen, Aleve[®] naproxen, aspirin, Advil[®], Naprosyn or Celebrex[®], for **six weeks** after the fusion.

Taking these will slow down the healing process. After six weeks, you can start taking these medicines for pain relief. Your pain should lessen after surgery. All pain medicines should be taken with food and at least 8 ounces of water.

Activity

- **Do not** lift more than 10 pounds until your doctor approves.
- **Do not** lie on your stomach.
- **No** pushing or pulling motions.
- **No** bending or twisting.
- Sit for only short amounts of time for the first 2 weeks.
- Sex can be resumed after 2 weeks.
- You may drive when you are no longer taking narcotic pain pills. Limit driving to short trips and slowly increase your driving time.

Brace

Your surgery team will let you know if you will need a brace after surgery. If you do need a brace you will be given instructions for wearing it after surgery.

You will need help with your brace. Your family member will be taught how to put the brace on and take it off. Some braces you will not be able to put on by yourself. You should not lie on your stomach. Using pillows for support is helpful.

Work

You may need to be off work for 2-6 weeks. This will depend on the work you do. Heavy lifting may not be allowed for 12 weeks. Check with your doctor before going back to work.

Constipation

When you are home, you may take docusate with senna twice a day while you are on the narcotic pain medicine. If you do not have a bowel movement within two days or beyond your normal routine, take milk of magnesia (6 teaspoons two to three times a day) until you have a bowel movement. You may also eat prunes or drink prune juice instead of Milk of Magnesia. Be sure to drink a few 8 ounce glasses of water or juice daily. This ensures that your body has enough fluids with the medicine.

Wound Care

Your incision may be closed with stitches, metal staples, plastic strips of tape called Steri- Strips, or Dermabond skin adhesive (clear glue).

Please follow the instructions in your discharge packet for incision care.

When to Call

- Increased redness, swelling, or any drainage
- Signs of infection
- Increased pain that does not go away with pain medicine
- Fever over 100° F for two readings taken four hours apart
- Feeling weak
- Any incision concerns

Once the incision is healed, use sunscreen for the next year to avoid the incision turning dark in color.

If you have sutures or staples, they will be removed in 10-14 days by your doctor.

Who to Call

Neurosurgery Clinic
Monday- Friday, 8 am to 5 pm
(608) 263-7502 or **(800) 323-8942**
Ask for the Neurosurgery Clinic.

After hours, this number will be sent to the paging operator. You will need to ask for the doctor who is on call for your doctor.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 2/2020 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5379.