Anterior Cervical Discectomy and Fusion (ACDF): Planning and Preparing for Surgery

This handout will review anterior cervical discectomy and fusion (ACDF), planning and preparing for surgery.

What is an ACDF?
ACDF is a front neck surgery that is used to remove either a disc material or overgrown bone that is putting pressure on a spinal nerve or less likely, the spinal cord. This pressure can cause arm pain, numbness, tingling, and weakness.

The surgery removes the disc between the vertebral bodies above and below it. Then, something is put into that space in place of the disc. Usually the graft used is machined, pre sized, company processed no longer living bone. Rarely, graft is used from the patient. the front iliac crest. Over the graft a plate is placed. 2 small screws are placed in the vertebral body above, and 2 small screws in the vertebral body below secure the plate.

Preparing for Surgery
Please refer to your booklet “Having Surgery at UW Hospital” for general instructions.

To prevent constipation after surgery read these instructions:
- Please begin taking a stool softener two days before surgery. We recommend the stool softener called Docusate with Senna-take this with at least 8 ounces of water.
- Do not take any fiber or stool softener on the morning of surgery.

Returning Home
Most people who have an ACDF will leave the hospital the same day or the next morning. You will need to arrange to have someone spend 24-48 hours with you when you return home.

What to Expect After Surgery

Cervical (neck) brace
You may need to wear a brace. If your doctor orders a brace, you will wear your brace even during a shower. Do not drive until you no longer wear the collar. The collar will restrict your driving ability.

Pain
To help decrease pain in your neck/between your shoulder blades:
- Change positions often.
• Use heat or ice. If you use ice cover the ice pack with a cloth and apply for 20 minutes per hour
• Take pain medicines as prescribed
• Your sore or hoarse throat will go away over time. Each person varies, but it may take weeks for it to feel normal.
• Your incisional pain should improve over time. As this happens, you will need to decrease the amount of pain pills you take.
• If you are still feeling severe pain or more pain, numbness, tingling or weakness, call your doctor.
• Do not take any non-steroidal anti-inflammatory medicines for six (6) weeks. Taking these will slow the healing process.
Examples: ibuprofen, Advil®, Aleve®, Naprosyn® or Naproxen®, aspirin, Celebrex®
• You should never start a new drug, even those you can buy over-the-counter, without talking with your doctor or pharmacist first.

Work
You may need to make plans to be off 2-6 weeks depending on the work you do. Heavy lifting may not be allowed for 12 weeks. Check with your doctor before returning to work.

Preventing 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. Use food like prunes or prune juice instead of the Milk of Magnesia. Be sure to drink several 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 plastic strips of tape called Steri-Strips, or Dermabond skin adhesive (clear glue).

You should remove the dressing that was placed in surgery, 3 days after surgery. Under the dressing you will have the Steri-Strips, skin glue, sutures or staples.

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

Do not take tub baths until instructed to do so.

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

Check your incision daily. Call your doctor if you notice any of these signs of infection. This includes:

Activity

• Do not lift more than 10 pounds. Your doctor will tell you when you can lift more
• No pushing or pulling motions
• Sexual activity can be resumed after 2 weeks
• You may drive when you are no longer taking narcotic pain pills and you are not wearing a cervical brace. Limit driving to short trips and slowly increase your driving time.
• Increased redness, swelling, or drainage
• Large increase in pain
• Fever greater than 100°F for two readings, 4 hours apart.

Reasons to Call Your Doctor
• Severe or increasing pain
• New weakness
• Fever
• Concerns with your incision such as increased redness, swelling, or drainage

Important Phone Numbers
Neurosurgery Clinic, is open Monday-Friday, 8:00-5:00pm, and can be reached at (608) 263-7502.

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

If you live out of the area, please call 1-800-323-8942 and ask for the Neurosurgery Clinic.