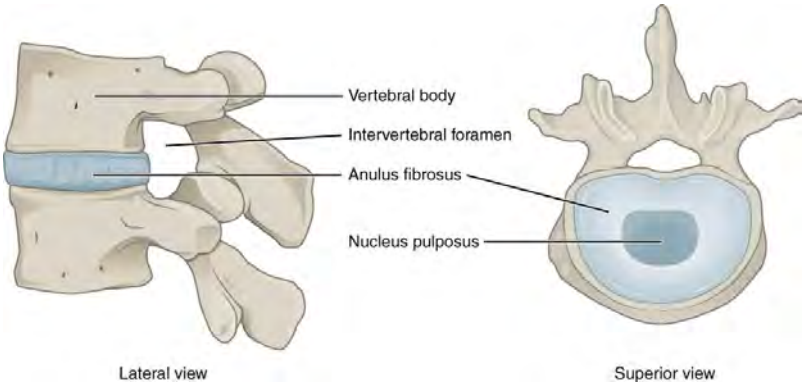
Cervical disc replacement advice and exercises

This advice is for patients who have had cervical disc replacement. This information is designed to help you get back to full fitness as quickly as possible after your operation.

Before you leave hospital a physiotherapist will teach you all the exercises on this leaflet and make sure that you do not have any problems.

Introduction

The cervical spine consists of the upper seven vertebrae and the discs in between. Each vertebra consists of the body at the front and a bony arch at the back which encloses and protects the spinal cord and nerves. It also has small joints which attach the vertebra to its neighbours above and below (facet joints).



The vertebral disc is made up of two parts: the annulus fibrosus (outer part) and the nucleus pulposus (inner part). The annulus consists of layers of collagen fibres (similar to the layers of an onion), the fibres in each layer lying in the opposite direction to those in the next layer.

The nucleus is a semifluid gel which can be deformed without loosing volume. The intervertebral disc gives height and stability to the spine and acts as a joint and shock absorber.

An artificial disc replacement is designed to replace your own cervical disc and to preserve normal movement at that level as well as relieve your symptoms.

You may be fitted with a collar, which should be worn at all times during the first 4-6 weeks.

Before you leave hospital a physiotherapist will teach you the exercises on this leaflet and make sure that you do not have any problems.

On discharge

Continue with you exercises as shown, avoiding extreme end of range.

Avoid heavy lifting for 3 months or as advised by your surgeon.

If you have a collar you will be seen after the collar is removed for physiotherapy, if you have no collar you will be seen between 2 to 4 weeks after your surgery.

You will be seen by your surgeon at 6-8 weeks for a review.

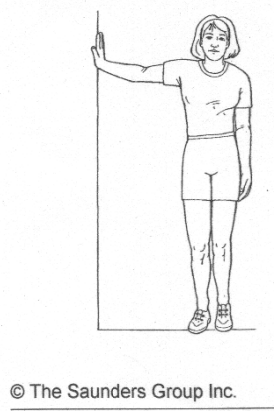
Work – return to work is dependent on the nature of your job. If you have a desk job you may feel comfortable to return at 6-8 weeks post op; a heavy manual job your return to work is likely to be after a minimum of 3 months. Always check with your surgeon before returning to work.

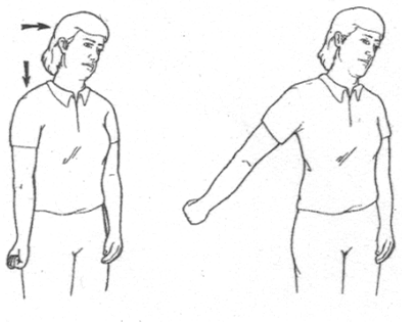
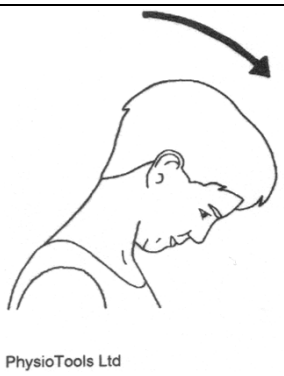
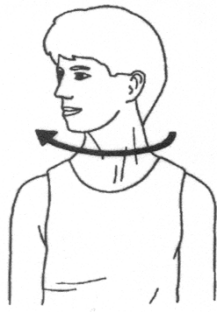
Driving – never drive if you have a collar. Once the collar has been removed and you have sufficient range of movement to check the blind spots you may return to driving. If you have had cord compression resulting in weakness of the legs, you must also be able to do any emergency stop before driving.

Day 1 – discharge

- You may mobilise freely round the ward if safe to do so.
- Your may begin the exercise programme gently as shown.
- All the exercises should be repeated 3-5 times per day or as tolerated.
- Once you are mobilising safely and have managed the stairs if you need to do so, you will be discharged home. This can be within 24 hours of your surgery.

Exercises:

<table>
<tr><td>Deep neck flexors
Within the collar, keeping head upright, pull your chin in. Hold the end position and gently nod head downwards 10 times. Relax.</td><td></td></tr>
<tr><td colspan="2">Nerve mobilisation
These exercises are designed to keep the nerves in the arm moving and preventing them from becoming trapped in scar tissue.</td></tr>
<tr><td>Median nerve mobilisation
Raise your arm to shoulder height.
Start with the elbow bent then gently straighten it with the palm of your hand against a wall. To increase the stretch slightly you can tilt your head to the other side.
Hold for 5 seconds, relax and then repeat 4 more times</td><td>
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Ulna nerve mobilisation Raise your arm to shoulder height. Bend the elbow and rotate the forearm so the palm of your hand rests against the side of your head, with your fingers pointing downwards. Hold for 5 seconds, relax and then repeat 4 more times.	
Radial nerve mobilisation Keeping your arm by your side, twist the arm inwards, bend your wrist and then take the arm backwards, angling slightly away from your side. Hold for 5 seconds, relax and repeat 4 more times.	
If you have **no** soft collar you may also do the following exercises.	
Neck flexion Gently bend neck forward. Do not force to end of range. Relax, return to the upright position. Repeat 10 times.	
Rotation Gently rotate your head to one side, do not force to end of range. Rotate to the other side and relax. Repeat 10 times.	

Useful numbers and contacts

Royal Berkshire NHS Foundation Trust
Orthopaedic Physiotherapy Department
Royal Berkshire Hospital
London Road, Reading RG1 5AN
Tel: 0118 322 7812
Email: rbft.physiotherapy@nhs.net

Visit the Trust website at www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Physiotherapy Department
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