

ARTIFICIAL DISC REPLACEMENT - LUMBAR

What is the goal of this surgery?

The goal of an artificial disc replacement is to provide an alternative to spinal fusion for patients with lumbar disc disease. Because the bones are not fused, some motion of the back is preserved. Not everyone is a candidate for this procedure, and your surgeon will recommend which surgery is best to fix your problem.

How is this surgery done?

A cut is made on your lower belly, usually up and down, but sometimes across. An access surgeon will help your surgeon cut through the skin and tissue to get down to the spine (See figure 1). The surgeons make sure to protect important nerves and blood vessels during surgery. Once the access surgeon has gotten to the level of the spine, your surgeon will remove the bad disc and place an artificial disc in the disc space between the bones (See figure 2). An x-ray is taken during the surgery to make sure the artificial disc is in the right position. Once the surgeon knows everything is safely in the right place, he or she will irrigate the area and remove any loose bone or tissue. Your muscle will be closed with strong sutures that you cannot see. Your skin will be closed with sutures under the skin and skin glue.

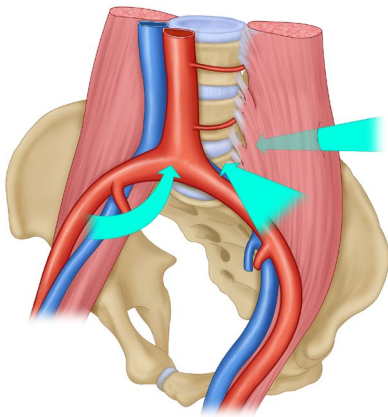


Figure 1 – Anterior approach to the spine. The left most arrow demonstrates the approach for lumbar artificial disc replacement.

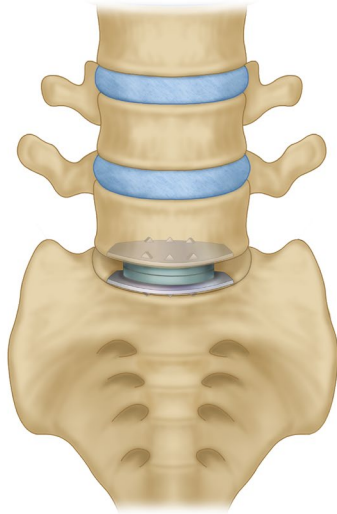


Figure 2 – Artificial disc placed between the L5 and S1 bones as viewed from the front of the spine.

What is the recovery?

You will be admitted to the hospital for a 1-2 days. You will be able to get out of bed the same day as your surgery. Because your surgery was done from the front, near your digestive organs, your doctor will want to make sure you are eating and drinking without problems and passing gas or having bowel movements before sending you home. Your doctor may ask you to wear a brace and restrict your activity after surgery. This usually means no lifting anything above 10 pounds for at least 6 weeks and no strenuous activity. Wound care instructions will be given to you before you go home. You will come back to clinic within 2 weeks for a post-operative visit with your surgeon or an advanced practice provider (nurse practitioner or physician assistant).