Complications of surgery:

Surgery carries a very low risk of:

- Infection
- Bleeding
- Blood clots formation
- Recurrent disc herniation
- Urine retention

Before and after operative care:

- Before the surgery:
 - Notify your doctor if you have any medical problem like diabetes, hypertension, or cardiac diseases
 - Inform your doctor if you receive any medication especially antiplatelet medication
- After the surgery:
 - You may feel little pain after the surgery; this pain is usually gone after few days. Pain killer medicine might be given to you regularly to keep you comfortable
 - Maintain your spine in proper alignment by keeping it straight
 - Avoid lifting heavy objects
 - Avoid strenuous exercise for a period of time
 - If your work is an office work you will be able to resume your work within two weeks after surgery.
 - If you work with more physically demanding occupations you may need to wait longer to return to work
 - You may require physiotherapy for some time after your surgery

Lumbar Disc microsurgery



Neurosyrgery Department 4439 2799 Published by: Patient and Family Education Committee

© 2012 Hamad Medical Corporation



Lumbar Disc microsurgery

Overview:

This minimally invasive technique is used to remove the herniated portion of a vertebral disc. It is 95% to 98% effective in eliminating leg pain which causes by nerve root compression. The procedure is performed through a small incision on the back. (See Fig. A)

The procedure's tips:

1- Opening a part of the vertebral bone

After creating a small incision directly over the herniated disc, the surgeon creates a small window in the bone that covers the spinal canal. The pinched nerve root and the herniated disc can be seen through this opening. (See Fig. B–1)

2- Moving the spinal nerve

The surgeon uses a nerve retractor to gently move the spinal nerve away from the herniated disc. (See Fig. B-2)

3- Removing the herniated part of the disc

The herniated portion of the disc is removed, eliminating pressure on the nerve root. Only the damaged portion of the disc is removed, leaving any healthy disc material to perform its function as a cushion between the vertebrae. (See Fig. B-3)

4- Ending the procedure

At the end of the procedure the tools will be removed, and the spinal nerve will return to its normal position. The incision will be closed. (See fig. C).

Fig. A: Disc before the procedure







Fig. C: Disc after the surgery

