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What is an ACDF?

An anterior cervical discectomy and fusion (ACDF) is a surgery where an incision, or cut, is made in the front of the neck and the spine through a path between the breathing and swallowing tubes and the carotid artery. A microscope is brought in, and one or more disc spaces are treated. In this part of the surgery, the disc is taken out, and any disc bulges or bone spurs that place pressure on the nerves or spinal cord are removed. The disc is replaced with a bone graft made from cadaver bone. A titanium plate goes over the bone, and is secured with screws above and below. The incision is closed with buried stitches and a bandage applied.

Who Should Have an ACDF?

The surgery is usually performed for people with severe nerve pain in one or both arms, or signs of spinal cord damage such as weakness and numbness. If pain is the only symptom, non-surgical treatments are usually tried before surgery.

What is Recovery Like?

After surgery, most patients go home the next morning, and can do light exercise such as walking, including going up stairs. Most patients with a titanium plate do not need to wear a collar, and can sleep in any position they find comfortable. Heavy lifting should be avoided, and driving is not permitted while patients are on narcotic pain medication. After two weeks, the patient is seen for a post-operative appointment, after which most people start physical therapy. Most people return to full-time work or vigorous

exercise 4-6 weeks after the surgery. Patients will be seen in routine appointments every few months with x-rays for approximately a year after the surgery.

What Can I Do to Improve My Outcome After the Surgery?

Follow all pre-operative instructions, especially in avoiding any blood thinners before surgery. After surgery, focus on gentle exercise and understand that there will be both good and bad days as part of your recovery. Most patients can eventually return to all normal activities such as work and recreational activities, and have few limitations from the surgery itself.

What are the Risks of the Surgery?

An ACDF is a common procedure, and most patients can leave the hospital the following morning. However, although they are rare, serious complications may occur. These include injury to the structures in front of the spine in the neck, such as the breathing and swallowing tubes, the arteries to the brain, and the voice box nerve. The risks of removing the disc include nerve or spinal cord injury, with a rare risk of paralysis, along with leakage of spinal fluid. After the surgery, bleeding can cause trouble with breathing or damage to the spinal cord. Infection is also a risk, as is prolonged swallowing problems after the surgery. It's normal to have some swallowing issues for a few weeks after the procedure. The surgery is performed under general anesthesia, so the patient is asleep the entire time. There are risks of heart and lung problems with anesthesia, especially in patients with serious medical conditions.



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