SOUTHERN NEUROSURGERY

(470) 293-9800
southernneurosurgery.com

YOUR SURGERY PACKET

Spinal Cord Stimulator

Patient name: _____

Surgery date: _____

Surgery location: _____

Follow-up appointment: _____

What's in this packet

Part 1 - About Your Surgery: Spinal Cord Stimulation pages 2-4

Part 2 - After Your Surgery: Spinal Cord Stimulator pages 5-7

Part 3 - Questions After Surgery: Our 24/7 Virtual Assistant page 8

Before you go

- Read Part 1 before surgery so you know what to expect.
- Keep Part 2 handy at home. It covers recovery, medicines and when to call us.
- You will also get a separate Surgery Day Guide for the hospital or surgery center where your operation is scheduled. It has arrival and parking details.
- Have a question after surgery? Our Virtual Assistant answers 24/7 (see Part 3).
- Bring this packet to your appointments and write down your questions.

Questions? Our Virtual Assistant is available 24/7:
md-aid.com/c/southernneurosurgery · or call (470) 293-9800

For chest pain or trouble breathing, call 911 or go to the nearest ER.

This packet is for educational purposes only. It is not medical advice and does not replace individualized care from a licensed physician. Always follow the specific instructions Dr. Grunch and her team give you, and contact your provider about your personal symptoms.

ABOUT YOUR SURGERY

Spinal Cord Stimulator

Living with chronic pain that hasn't responded to surgery, injections or medications can be exhausting. A spinal cord stimulator lets you test-drive relief before committing, and for many people it can significantly reduce pain and the need for pain medications.

What Is a Spinal Cord Stimulator?

A spinal cord stimulator is a small implanted device that sends mild electrical signals to the spinal cord. These signals change how pain messages travel to the brain, reducing the pain you feel. Many newer systems work without the tingling sensation older devices produced.

The system has two parts:

- **Leads:** thin wires with small contacts, placed in the space just behind the spinal cord
- **Battery (generator):** a small device placed under the skin of the hip or flank. Many are rechargeable.

You control the stimulator with a handheld remote, and the settings can be adjusted to your pain.

Illustration: Southern Neurosurgery

Who Needs a Spinal Cord Stimulator?

- Back or leg pain that continues after spine surgery (failed back surgery syndrome)
- Chronic back and leg pain when more spine surgery isn't the right option, including chronic low back pain
- Complex regional pain syndrome (CRPS)
- Painful diabetic peripheral neuropathy and other nerve pain
- Pain that hasn't improved with medications, physical therapy and injections

Step One: The Trial

Before a permanent stimulator is placed, you try it for about a week. Temporary leads are placed through a needle in the back, usually in a short outpatient procedure, and connected to a small external battery you wear. During the trial you go about your daily routine and track how much your pain and activity improve. If the trial provides meaningful relief, usually at least half of your pain, you can move forward with a permanent implant. If not, the temporary leads are simply removed in the office.

How the Permanent Stimulator Is Placed

- **Anesthesia:** The permanent implant is an outpatient procedure under anesthesia.
- **Placing the leads:** Through a small incision in the back, the leads are positioned in the space behind the spinal cord using X-ray guidance.
- **Placing the battery:** A small pocket is made under the skin of the hip or flank for the battery, and the leads are connected to it under the skin.
- **Testing and closing:** The system is tested, and the incisions are closed.
- **Programming:** A representative from the stimulator company programs the device and teaches you how to use your remote and charger.

Benefits and Risks

Benefits

- You test it before committing to a permanent implant
- Can significantly reduce back and leg pain
- Can reduce the need for pain medications, including opioids
- Can improve sleep, activity and quality of life
- Adjustable, and can be removed

Risks

- Infection, which may require removing the device
- Lead movement or breakage, which may need a revision
- A spinal fluid leak and headache, which are uncommon
- Pain or discomfort at the battery site
- Pain relief that lessens over time
- Bleeding or, rarely, injury to the spinal cord or nerves

What to Expect

Before the trial

You'll meet with Dr. Grunch or one of her physician assistants to review your pain history, imaging and prior treatments, and to decide together whether a stimulator is a good fit. Most insurance plans require a psychological evaluation before a trial. This is routine and helps make sure you get the most from the therapy. Our team will review your medications (including blood thinners you may need to pause).

Procedure day

The trial and the permanent implant are both usually outpatient procedures. Most people go home the same day.

Recovery timeline after the permanent implant

- **First week:** Soreness at the back and hip incisions is expected. Ice each incision twice a day for 20 minutes.

- **Two weeks:** Follow-up visit. A representative from the stimulator company joins to fine-tune your settings.
- **Six weeks:** Restrictions lift as the leads settle into place, and most people return to normal activities.
- **Long term:** Settings can be adjusted as your needs change.

Your post-operative guidelines explain how to care for yourself at home, and when to call our office.

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AFTER YOUR SURGERY

Postoperative Guidelines for a Spinal Cord Stimulator

Incision care

- You will have two incisions. One incision will be on your back, and the other incision will be on your hip for placement of the battery.
- Your incisions are closed with sutures (also called “stitches”) on the inside of your skin. These are absorbed over time by your body. The outside of your skin is closed with a skin glue. The skin glue will eventually come off in its own time.
- Sometimes patients may need sutures on the outside of their skin. If you have sutures on the outside, these will be removed at your follow up appointment (10-14 days after surgery)
- You may take a shower the day after your surgery. Do not scrub your wound, but gently cleanse it and pat dry.
- If you have outside stitches, wait 3 days before showering.
- Do not submerge into water or a tub for 6 weeks.
- Leave the wound open to dry. Do not apply ointments or creams to the incision.
- It is normal to have a small amount of brown to reddish colored ooze for a few days.
- Ice the incision twice a day for 20 minutes at a time for the first week. This will help with pain and swelling.

Pain Expectations

- It is normal to expect pain after back surgery. That is why we prescribe medication to ease you through the healing process.
- After surgery, common pain areas are in the middle back and around the incisions.
- This pain will get better with time as your body heals, so it is important to be patient as your body is healing.
- It is normal to have a sore throat after endotracheal intubation, and this will improve over the week after surgery.

Medications

- You will be given prescriptions for a pain medication.
- Do not take pain medication on an empty stomach. This may make you feel nauseated.
- Do not drink alcohol if you are taking pain medication.
- If you feel that your pain is well tolerated, you may begin to wean yourself off of your pain medication sooner than your post-op visit.
- Because pain medication can cause constipation, it is important to have stool softeners and laxatives at home such as Colace or Senna to prevent constipation.
- Take the stool softener daily and use the laxative as needed.
- If you still have constipation after using these medicines, you may use an over-the-counter suppository or enema.

Medications to avoid

- NO blood thinners such as Aspirin, Coumadin, Warfarin, Xarelto, Plavix, etc. for 5-7 days after your surgery. We will tell you when you may resume your blood thinners.

Therapy

- When you are at home, walk between 30-60 minutes a day, but not all at the same time. Divide your walks into smaller intervals of 10-15 minutes at a time.
- It is important to walk for your overall recovery for a number of reasons. Getting out of bed is good for your lungs, it prevents blood clots from forming in your legs, and speeds your recovery.
- Do not sit for more than 30 minutes at a time. Move around to prevent your muscles from tightening and becoming stiff, which can lead to more discomfort.
- Use your common sense, if your body says that it is tired, listen to it.

Restrictions

- Activities such as bending at the waist, lifting >10 lbs, and twisting are restricted during your recovery period, which is about 6 weeks.
- This means NO household chores such as vacuuming and laundry, hobbies such as golfing, and yard work.
- If you have young children or grandchildren, do NOT pick them up. Allow someone else to help you at home.
- You may drive as long as you are not taking narcotic pain medication.
- It is ok to ride as a passenger if you are taking narcotic pain medication.
- If you are unable to work due to these restrictions, please let us know if we need to complete any paperwork for your employer.

Diet

- It is important to remember to eat and drink fluids so that your body may properly heal.
- If you are experiencing nausea, follow a “BRAT diet” which is Bananas, Rice, Applesauce, Toast and advance as tolerated.

Smoking

- Smoking constricts your blood vessels which carry oxygen and nutrients to your healing bone and muscles. This may impair healing.
- Vaping and other nicotine products also slow healing.
- Carefully consider quitting smoking during this time. If you would like help in smoking cessation, please let us know.

Sexual Activity

- Back pain can interfere with your sex life, but we want you to resume normal relations with your partner as soon as possible after surgery. We recommend avoiding sex for 6 weeks after surgery. Once you have begun the healing process, use the position that is most comfortable. You may find that lying on

your back is the most comfortable if you can support your partner's weight or your partner can support him/herself with arms and knees. Side lying may also be comfortable since neither partner is bearing the burden of the weight. Decide if a small pillow at the waist is helpful in supporting the spine and you will probably want a pillow located under your neck and head. Be careful not to twist the lower back. Be sure you communicate your fears and concerns with your partner before you resume sexual relations.

Call our office if you have any of these symptoms:

- Fever over 101°F.
- Constipation that is not relieved by stool medications.
- Redness, warmth, or significant drainage from your incision.
- Pain, swelling, or redness in your calves.
- Unexplained incontinence or accidents involving your bladder or bowel, or if you are unable to urinate.
- Worsening back or leg pain than before surgery.

Call 911 or go to the nearest emergency room for chest pain, shortness of breath or trouble breathing.

Follow up appointment

- We have scheduled a follow up appointment for you that is two weeks after your surgery.
- A representative from the company for your stimulator will also see you at this appointment and work with you to adjust the settings of the stimulator to your liking.
- You will be provided with a card listing the date and time.
- If you need this appointment changed, please call our office.

If you are experiencing any problems or have any questions, please call our office.

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PART 3

Questions After Surgery? We're Here 24/7.

Recovering from surgery often brings up questions between appointments: about your activity restrictions, your collar or brace, incision care, or what's normal and what's not. You don't have to wait for a call back. Our Virtual Assistant answers common post-operative questions 24 hours a day, 7 days a week, using information approved by our clinic.

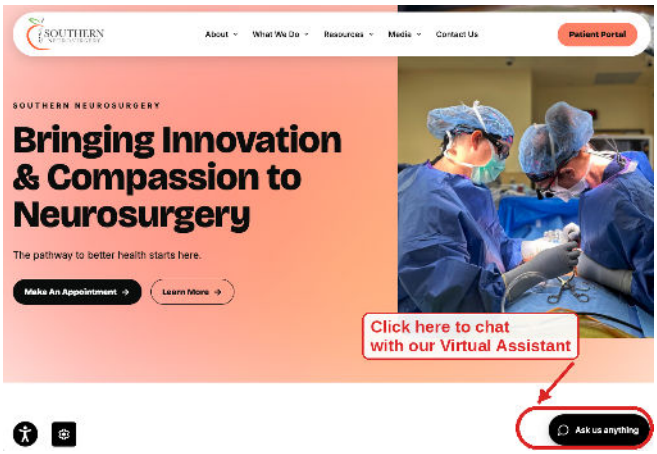
Fastest way: scan the code

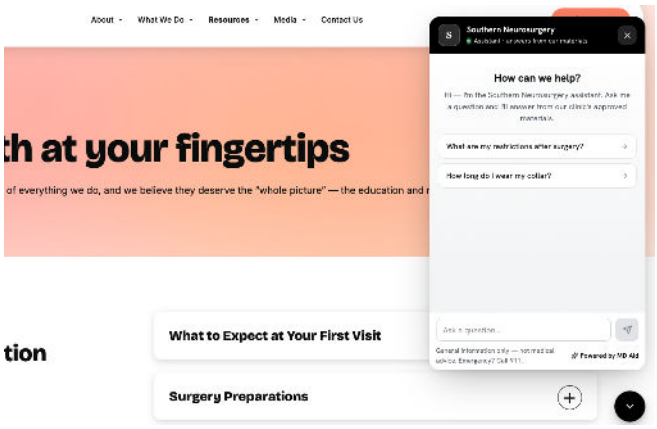
Point your phone's camera at the QR code to open the Virtual Assistant directly, or type this address into your web browser:

md-aid.com/c/southernneurosurgery

Or use our website

1. Go to southernneurosurgery.com and click the black "Ask us anything" bubble in the bottom right corner of the screen (left picture).
2. Type your question, or tap one of the suggested questions to get started (right picture).





Need to talk to a person?

If you don't find your answer or would rather speak with our team, call our office at (470) 293-9800.

Medical emergency? Call 911.

Do not use the Virtual Assistant or wait for a call back in an emergency.

The Virtual Assistant provides general information only. It is not a substitute for medical advice from your physician.