

Physiotherapy & Occupational Therapy Advice Mobile Patient

A guide for patients, parents and carers



Scottish National Spine Deformity Service

www.nhslothian.scot.nhs.uk/Services/A-Z/ScottishNationalSpineDeformityService/Pages/default.aspx

What will the Therapy team expect of me after my operation?

Respiratory (lung) physiotherapy: Following your scoliosis surgery you are at risk of lung problems due to anaesthetic, pain / discomfort and not being as mobile as usual. To reduce the risk of this, we will teach you breathing exercises which you should carry out regularly throughout the day and encourage you to get out of bed as soon as possible.

Early Mobilisation: Getting out of bed, as early as possible, will help prevent complications with your lungs, your digestive system, your bladder and help reduce pain / discomfort post operatively.

The physiotherapy team will help you out of bed for the first time by taking you through the following steps:

- 1) Rolling over onto your side.
- 2) Pushing up from your side into a sitting position with your legs over the edge of the bed.

3) From sitting, to standing up and stepping round into a high backed chair. Reverse for steps above for going back into bed.

This technique will be demonstrated to you at your pre-operative assessment.



It can be normal to feel a little sick or dizzy initially, but each stage is taken slowly to allow this to pass.

Before going home you should be: sitting in a chair, for short periods of time, walking confidently around the ward and up and down the stairs, if applicable, and provided with postural and discharge advice.

What can I do to make my recovery easier?

Drinking / Eating: Your appetite will be reduced and you may feel sick after your surgery due to your anaesthetic, discomfort, painkillers and altered posture. It is important that you drink a good amount of clear fluid throughout the day, this will help your digestive and urinary system, reduce dizziness and allow removal of drips. Eating small amounts initially and increasing this as your appetite returns is crucial so that your medication has something to work on; this can reduce the feeling of sickness, give you energy and assist in the healing process.

Sitting up in Bed: Sitting up in bed following surgery, with the assistance of the bed backrest, can help minimize dizziness, aid digestion and improve respiratory health.

Regularly getting out of bed: It is important that you get out of bed on a regular basis and start to get back into a 'normal' routine for going home. As soon as you can you should be sitting up for all meals and taking regular walks around the ward or nearby areas. You should aim to sit for the length of time it will take you to drive home. Being up and about during the day will help with pain / discomfort, aid digestion and also improve night time sleep.

Clothing: It is really helpful if you bring supportive slippers or shoes, clothing that is slightly loose or easy to get on and off and a dressing gown.

When will I be able to go home?

Before going home you should be able to:

- get out of bed, through side lying, without any help
- sit in a chair for approximately 30 minutes at a time
- be walking short distances without any help
- be able to get on and off the toilet without help
- have completed a stair assessment with a member of the physiotherapy team (if applicable).
- have completed a bath transfer assessment (if applicable).
- put your spinal brace on and take it off by yourself (if applicable).

What should I continue to do when I go home?

When you get home you should continue with the following:

Neck / Shoulder Exercises: Continue with the exercises you have been shown in the hospital as these should help reduce / lessen any stiffness that you continue to feel.

Posture: It is normal after this operation to feel you are leaning to one side when sitting or standing. It can be useful to use a mirror to get used to your new posture and learn where your new "middle" is.

If you had one shoulder or hip that was higher than the other before your operation it is normal for this still to be the case after operation. As the muscles that support your spine adjust to your new posture this can get better.

Sitting: Gradually increase the length of time you are sitting every day. Try in a normal seat when you get home. You may find a chair with a firm back and seat will be more comfortable than a softer chair. Once you can do this get back to school or college.

Walking: Gradually increase how far you are walking every day. You may find yourself a little off balance on uneven surfaces such as grass or pavement slabs initially so may want to have someone with you at first.

Are there any precautions I should take when I get home?

Where possible you should minimise any strenuous bending or twisting of your spine.

Continue to get in and out of bed the way you have been shown in hospital: rolling on to your side, and then pushing up from your side to sit on the edge of the bed.

Be sensible with activities such as carrying or lifting, bending forward or twisting as you may experience pain or discomfort early after surgery.

When can I go back to school/college/work/PE/sport?

You can return to school whenever you feel confident and have stopped strong painkillers. Your consultant will advise you when you can return to sports / PE. When returning to any activities you may find the following tips useful:

- Have a phased return (i.e. short periods to start with and build up)
- Organise a locker for your bags, books or belongings; get a "bag buddy"; second set of books for home.
- Arrange with your school to come out of classes a few minutes early to ensure you are not rushed or pushed in the corridors, you may be able to get a "hall pass" or "lift pass".
- Try to sit in a position in class where you can face straight forward and do not need to look over your shoulder or twist your spine.

Frequently Asked Questions (FAQs)

Will physiotherapy make me sore?

Physiotherapy aims to reduce pain / discomfort and restore strength, flexibility and independence.

If I move too soon after my operation will I not damage my back?

Spinal instrumentation is very strong. If there are any particular concerns, your will be advised by your consultant. Patients find that the sooner they get up and start moving after their spinal surgery the easier it is and they experience less stiffness and discomfort.

• What happens if I feel too tired to do my physiotherapy?

Your sleep pattern will be disrupted after your spinal surgery but it is really important to get up as soon as possible to aid digestion, improve respiratory health and restore strength and flexibility. Getting up and being active will help you sleep better at night and get you back into a good routine.

Can I sleep on my tummy?

You can sleep in whatever position you are most comfortable in.

When can I stop the exercises?

There is no set time as every patient is different. You can stop your exercises when your discomfort has improved and as your everyday activity increases.

• How do I pick something up off the floor?

It is safe for you to bend forwards following your surgery, although it may be uncomfortable. It is best to bend from your hips and knees to squat to the floor.

Will I have follow-up from a physiotherapist or occupational therapist?

You will be encouraged by the team to stay active at home and most patients will get back to their pre-operative activity level without any further input from the physiotherapy or occupational therapy team. If you or your consultant feels that you would benefit from further outpatient physiotherapy, a referral will be made.

• I have been given equipment by the physiotherapy/occupational therapy team, how do I get it back to them?

Please contact your local services to arrange a convenient time for uplift.

Additional Notes:

Please note that this information should be used for guidance only and that any differing recommendations or advice given to you by your surgeon should always be
Tollowed.
If you have any other questions or concerns, please contact:
Therapies Department
followed. If you have any other questions or concerns, please contact:

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language

This leaflet may be made available in a larger print, Braille or your community