



Dallas Neurosurgical & Spine

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FAQ for Anterior Cervical Fusion

Should I alter my diet for surgery?

Recommend high fiber diet starting three days before surgery and in the postoperative period since constipation is common. A healthy option is flax powder or seeds sprinkled on food or MiraLAX.

After cervical discectomy and fusion, may I move my neck?

Yes, you may move your neck 2 or 3 inches in any direction to prevent muscle tightness. Please do not be excessive with neck movement. You will have feedback from your neck if the movement becomes excessive.

What can I do to improve fusion rates on a cervical fusion surgery?

First and foremost, avoid smoking. Secondly, avoid taking NSAIDs, medications which include ibuprofen (Motrin), aspirin, Excedrin, Meloxicam (Mobic), and naproxen (Aleve). Your insurance company may approve a bone growth stimulator, which also enhances fusion rates.

Do I need to wear my cervical collar in bed after fusion surgery?

No, you do not. Neither is it required when sitting. Only necessary when walking, as a precaution.

What are the common side effects of cervical fusion?

Perhaps the most common side effect is swallowing difficulty, which is usually temporary. Most patients will have significant relief within two or three weeks. To accommodate this side effect, we suggest taking small bites and softer diet. Other side effects include sore throat which typically improves within a week as well as tightness between the shoulders and shoulder blades. The latter symptoms typically improve within 4 weeks of surgery.

After cervical fusion surgery, may I lay in any position when sleeping?

Yes, you may. Most patients prefer to lay on their back with a small towel rolled up in the small of the neck. Many prefer to lay on their side supporting the neck with pillows.