

Anterior Lumbar Interbody Fusion (ALIF)

Patient post-operative instructions

Typical hospital course

Usually 1 to 2 nights in the hospital. More complex cases may stay longer or occasionally be staged across 2 days.

Key limits / reminders

Brace is commonly worn when out of bed. No lifting more than 10 pounds. Avoid bending, twisting, and NSAIDs during early fusion healing unless specifically cleared.

Before surgery

- This approach is through the abdomen, often with an access surgeon helping with the front exposure.
- Many patients also have posterior screws placed through small incisions in the back.
- You will receive detailed bowel medication, pain medication, and arrival instructions at your pre-op visit.

After surgery

- Abdominal soreness, back soreness, and temporary constipation or bloating can happen after surgery.
- You will usually get up and walk with therapy on the first day after surgery.

Incision and showering

- Keep all abdominal and back dressings clean and dry. Call if they become soaked or start draining.
- Showering is allowed if the dressings and incisions stay dry. No soaking until cleared.

Brace and activity

- Wear your brace when out of bed if one was prescribed. It may usually be removed when sitting or lying down unless you were told otherwise.
- Walk every day starting right after discharge. Begin with short walks and gradually increase.
- Do not lift more than 10 pounds and avoid excessive bending or twisting during the first 6 weeks.

Medications, driving, and work

- Pain medication is commonly tapered over 1 to 3 weeks.
- Because this is a fusion procedure, avoid NSAIDs unless your surgeon specifically says they are okay.
- Do not drive while taking opioid pain medication or muscle relaxers.

Follow-up

- Typical follow-up is around 2 weeks and 8 weeks, with later visits for x-rays and fusion healing.

Constipation

- Opioid pain medication commonly causes constipation. Start a stool softener and/or gentle laxative if needed, drink fluids, and stop these medicines if you develop loose stools or diarrhea.
- If you go several days without a bowel movement despite over-the-counter treatment, call the office.

Smoking / nicotine

- Do not smoke, vape, or use nicotine after fusion surgery. Nicotine can significantly interfere with bone healing and increase the risk of failed fusion.

Call right away for

- Increasing pain that is not controlled with the prescribed medication plan.
- New or worsening weakness, numbness, tingling, loss of balance, or new trouble using your arms or legs.
- Redness, swelling, warmth, drainage, or a bad smell from the incision.
- Fever of 101 F or higher.
- Inability to urinate, loss of bowel or bladder control, or new saddle numbness.
- New calf pain or swelling, chest pain, coughing up blood, or shortness of breath.
- Increasing abdominal pain, persistent vomiting, or inability to pass gas or stool if severe.

Questions or concerns: call the office. For chest pain, severe shortness of breath, or another emergency, call 911 or go to the nearest emergency department.