

## Recovery and Post-Operative Care in Hospital

My arterial line was removed before leaving ICU, as was the heart monitors. The Flotron boots (leg massagers) and PCA of morphine followed me to the ward, but was removed a few days later with its cannula. That was some good stuff by the way, granted I was clicking it at regular intervals but it is really effective pain relief. Because it was going in intravenously I could feel the cold dosage as it passed through into my hand, but considering I was burning up every so often it was a nice relief. Other side effects included dizziness, audio hallucinations, drowsiness, adrenaline surges (feeling like you are dropping down horizontally really fast) and itching. For the latter I had to start taking Piriton because it was quite uncomfortable.

It became evident I wasn't going anywhere fast, and my discharge date was continuously postponed, not that I was complaining at all. I knew I was in the best place with impeccable care. I was too out of it to even be bothered about how undignified I was dressed, and trust me, wearing nothing but a hospital gown (all open at the back) and a crop top with tubes restricting movement is not the most comfortable attire. I was in too much pain to even care when a student nurse and her mentor gave me bed-bath, it was just a relief to feel fresher. It is surprising what barriers come down when you are that out of it, either the drugs or Midwifery did that to me, because I can tell you for a fact then when I was a teenager having surgery, I would rather have died than be put in that scenario.

Once it was established the drain in my neck had very little coming out of it, and it had received approval from my medical team, the drain was removed on a second (very weak) cough. I was glad to be another tube down, being that that was the one that had blood in it, I think my mother and sister were glad that the sight of that was gone too. Slowly I was beginning to look less dire. Things like talking, laughing, swallowing, passing air (sort of like burping but not quite that much – you do it when you eat and speak etc. without realising) hurt so in those initial days I tried to avoid it as much as possible.

It would take me ages to eat, and occasionally I would find myself thinking if it was even worth the effort then reminding myself I needed the protein for good recovery. The hospital menu was a highly devised, nutritionally balanced, seven page booklet of choices, just my appetite and want to eat was completely non-existent. Even on the day I was being discharged from hospital it took me 90 minutes to eat a yoghurt because by that time I really didn't have any energy left to stay upright to keep swallowing. It was only manageable through chewing excessively, even though I was only having small bites anyway – opening my jaw was painful. After swallowing for a while those muscles would hurt too so finishing was never comfortable either, but it was important. I could only manage very small sips of water too, again because anything going down the oesophagus led to increased pain, but I was just really glad I could do so, I knew it was very early days and it would all improve with time – I just had to follow my instinct and body's cues.

When I was more conscious, the Physio came to get me mobile. I cheated and asked to be sat up before getting out the bed rather than lifting myself up, then sat upright for a while whilst the dizziness passed, having had the Flotrons removed and my slippers put on for me (wasn't allowed to bend down), I was aided on standing up and then taking two steps to the chair where I had to sit for 30 minutes. When it came to lying back down the physio had already left and the nurse said, lie back down the way you got up, that was when I regretted having cheated. In my defence, the physio never told me how important that bit was. Basically after an ACDF you are not allowed to lift yourself up sit-up style, you have to roll on

to your side then come up, so that the side muscles take the pull and not the anterior muscles (for 6 weeks). The nurse luckily knew this was what I had to do and instructed me to do so, I felt safer in bed, mostly because everything kept spinning around me.

Next in line was regaining bladder and bowel functioning. I was given laxatives before I went to bed one night and then basically waited for the need to go the next day. Eventually, after visiting hours had passed, and more laxatives later the time finally arrived. My nurse bought me a commode but I asked if she would let me go to the actual toilets instead, she very kindly agreed and got me another gown to cover up the back. For those of you that don't know, they cut your underwear off of you when they insert a catheter, which is why they give you those white half-boxer type ones with your hospital gown before going to theatre. She wheeled me to the toilets, ensured I was okay then left me be. Nerves gone, that goal was accomplished, then when she returned I told her that if she removed the catheter I would be more comfortable. That nurse was absolutely lovely, she checked she was allowed to, then came back with the syringe to remove the fluid from the balloon holding it in place then took it out, that too was a relief. The first time I emptied my bladder again it stung a little for a second or two, but then luckily for me it was regular functioning again.

I was anxious that I wasn't going to be able to empty my bladder and they would have to re-insert the catheter, so you can imagine how glad I was when it became evident that it was not necessary. Of course, after that it meant I was then up every few hours taking the walk to the toilets myself. Good news was I was mobile again, and after giving me a dose of antibiotics the final cannula could be removed, the not so delightful side was that every time I had to get up, the Flotron boots and oxygen had to be removed and put back on each time – mildly annoying when you are drugged senseless and having fitful sleep with additional interruptions for observations. I was that happy when I got back to my bed the first time and was able to actually put underwear and clothes back on, that I shared my news with my sister at whatever ridiculous hour it was, my dignity had been returned!

The oxygen tube and Flotrons were the last of tubing to be removed, but they didn't seem so bad now that I was properly clothed. Blood was taken every day, so much so, I lost interest in what they were being taken for, I was just glad they kept getting it first time. Once all the wires, tubes and dressings were gone, I kept surveying the bruises, when they came to give me Clexane every night (blood thinning injection to prevent blood clots), I was adamant it was going in my biceps because my abdomen was one of the very few places that was unscathed and I wanted it to remain that way. For obvious reasons my neck was bruised and swollen, my arms though were ridiculous – they were all shades of purple up and down from everything that had been forced through them.

It was a happy day when I had a shower myself, it felt very good indeed, even if it was half assisted. When I washed my hair that felt even better though because up until that day no matter how much I had tried to wipe it out, I just couldn't get rid of all the blood and iodine that was in it from the spinal monitoring. I don't know how many electrodes they inserted into my scalp or why most of it seemed to be left-sided but being a clean freak it made me feel creepy. I am immensely grateful that through all of that my sister cared for my personal hygiene and appearance with a lot of love, not a single complaint and much dedication. She did my hair bi-daily and was there whenever I needed her, I couldn't have gotten through those days without her.

Bless them both, my mum and sister put up with all my random cravings, often sat there silently in the hospital watching me sleep because as much as tried, most of the time I didn't even realise I was dosing off despite the effort I exerted in attempting to remain conscious. Even when I was awake I made little sense, my phone was on permanent silence, and for

once in my life I didn't even care who was trying to contact me or with what urgency, they were having to wait for when I had both the physical and mental energy to care for me to respond.

Other care included changing the dressing, so I got to see the incision – it had 17 clips in it, (they look more like staples) and was very neat. My medical team had cleaned all the blood and iodine etc. away from it before they had dressed it so it was beautifully clear, there was no signs of infection and it was healing very well, so that was incredibly pleasing. The clips were removed on day 10 post-surgery with a special remover and I barely felt a thing, didn't hurt at all, there was only slight oozing and a tug on one of them but it was nothing. And of course another set of x-rays, which I assume were fine but never actually got to see.

The biggest problem before I could be discharged was pain control, finding the right balance of Morphine was proving quite hard, especially when it was combined with the weekend and increasing mobility, but we eventually got there too. I was on a continuous release Morphine called MST – taken every 12 hours, a short term one to combat all the 'breakthrough' pain, Paracetamol (which when combined with Morphine is amazing!) and of course, my saviour – Piriton. They increased the prescription before I left. An extra set of very annoying DVT stockings (flight socks), and a load of paperwork (which covered my ongoing recovery) later, I was almost ready to go.

The only thing left was to pass Physio, because I have stairs at home I had to prove I could go up and down them, I had already passed personal care and all the other requirements. A porter came to take me to the physio stairs where I proved my ability under the careful instruction of the physio and then returned me to the ward where I was told the dos and don'ts. Further reassurance from my medical team that surgery had gone to plan, heartfelt thanks, and goodbyes later, I was taken on a motorised wheelchair to my sister's car to travel the 15 minute journey (which seemed like an eternity) to the flat. I was so glad to have had the foresight of renting it prior to surgery so that I didn't have to take the ordeal of coming back up North straight away, because there was just not way I would have made it home at all.