

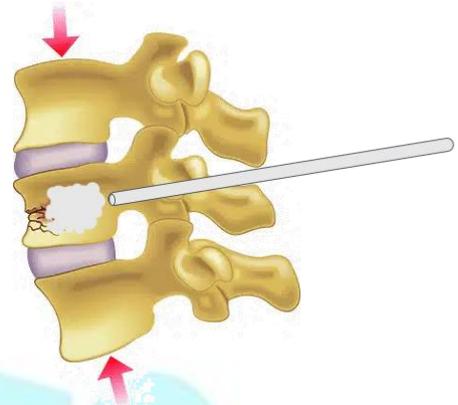


## Operation Information

### Kyphoplasty/ Vertebroplasty

#### Introduction

Kyphoplasty and Vertebroplasty are minimally invasive procedures to treat vertebral compression fractures (VCF) of the spine, to reduce or stop the pain caused by the bone rubbing against the periosteum. The reason for such fractures can be osteoporosis, spinal tumors, or injury. VCFs can result in back pain, reduced physical activity, loss of independence, decreased lung capacity and difficulty sleeping. The procedure may also be used to provide pain relief for patients with vertebral haemangioma and vertebral body tumors.



Source:  
<https://www.spineinfo.com/wp-content/uploads/2023/03/vertebroplasty.png>

#### Outcomes

The expected outcome of this operation is to control pain. Restoring the vertebra height by injecting cement into the fractured bone can reduce the risk of future fractures and recover faster.

#### Procedures

1. The operation is performed under general anaesthesia.
2. After anaesthesia, you will lie on your stomach with your chest and sides supported by pillows.
3. Skin incision will be made over the fractured bone.
4. A hollow needle is inserted with X-ray guidance.
5. For kyphoplasty, a balloon-like device will be inserted and inflated before filling up the space with bone cement. For vertebroplasty, bone cement will be directly injected into the fractured vertebra via the needle.
6. The needles are withdrawn promptly before the cement hardens.
7. Skin will be closed by a sterile strip.

#### Possible Risks and Complications

1. Wound bleeding
2. Wound infection
3. Bone cement leakage
4. Nerve damage
5. Rarely allergic reaction to anaesthetics

\*\* The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all procedures are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operations may be required.

## **Pre-operative Preparations**

1. Good hygiene can prevent surgical wound infection. Therefore, we advise you to clean up yourself on the day of operation.
2. The procedure and possible complications will be explained by your doctor and a consent form must be signed prior to the operation.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation such as Aspirin, Warfarin, Xarelto or Pradaxa, non-steroidal anti-inflammatory drug (NSAID) such as Ibuprofen, Naproxen and Chinese medication.
4. No food or drink six hours before the operation.
5. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
6. Please empty your bladder before the procedure.

## **Post-operative Instructions**

### **General**

1. After general anaesthesia, you may:
  - experience discomfort in the throat after tracheal intubation.
  - experience side effects of anaesthesia includes feeling tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse of wound pain. Proper pain relief treatment by injection or oral medication may be prescribed by the doctor.
3. Keep the incision covered and dry for 24 hours, pat dry the sterile strip after showering. Tub bath is not recommended.

### **Advice on Discharge**

1. Please comply with the medication regimen as prescribed by your doctor.
2. Immediately consult your doctor or return to hospital for professional attention in the event of shortness of breath, wound swollen and leaking fluid, coughing up blood, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms, etc.
3. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

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Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details  
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification