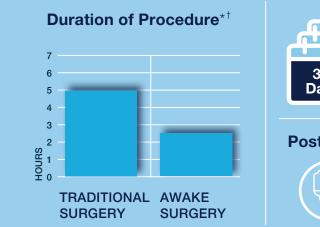
Awake Spine Surgery

www.ucsfhealth.org/spine



Shorter surgeries result in decreased lengths of stay, faster recovery times and less reliance on narcotics





Postsurgical IV Narcotic Use*





AWAKE SURGERY 0 Days

AWAKE SPINE SURGERY OFFERS FASTER RECOVERY TIME, LESS RELIANCE ON POSTOPERATIVE NARCOTICS

A new spinal anesthetic enables awake, minimally invasive spine surgery for decompression and/or fusion. Combined with technological advances in the equipment used in spine surgery, awake surgery results in dramatic reductions in time for surgery and recovery.

WHAT IS AWAKE SPINE SURGERY?

- Awake, minimally invasive spine surgery is a procedure that allows patients to stay awake during surgery without experiencing pain.
- A long-acting local anesthetic (liposomal bupivacaine) that was recently approved by the Food and Drug Administration (FDA) provides 72 hours of incisional pain control.
- Awake surgery is available for one- or two-level lumbar procedures for decompression and/or fusion to treat stenosis and spondylolisthesis.

MORE →

[†] Wang MY, Grossman J. Endoscopic minimally invasive transforaminal interbody fusion without general anesthesia: initial clinical experience with 1-year follow-up. Neurosurg Focus. 2016;40(2):E13.



^{*} Average

Awake Spine Surgery

WHAT ARE THE BENEFITS OF AWAKE SPINE SURGERY?

- Since no general anesthesia is necessary for awake surgery, patients do not need to be on a ventilator. This results in a lower risk of side effects (such as postoperative nausea or pneumonia, and postanesthesia confusion) and faster recovery time.
- Awake spine procedures take one to three hours, compared with four to six hours for open spine surgeries.
- Postoperative IV narcotics are not needed with the awake procedure.
- Patients walk on the day of surgery and usually go home within 24 hours, instead of three to four days for standard spine surgery under general anesthesia.
- Faster recovery rates mean patients can rapidly return to daily recreational and work activities.

WHICH PATIENTS ARE CANDIDATES FOR AWAKE SPINE SURGERY?

- Many patients who are candidates for traditional open spine surgery under general anesthesia may also be candidates for awake spine surgery. The treatment is appropriate for one- or two-level lumbar stenosis or spondylolisthesis.
- These include patients who have stenosis or instability symptoms

 such as back pain, leg pain, weakness or numbness who have
 not responded to nonoperative management.
- Awake surgery may be the preferred option for patients with other medical conditions that prevent them from undergoing general anesthesia.
- Awake surgery should be avoided in patients who have comorbid conditions that would make the procedure unsafe (such as obstructive sleep apnea).



Awake Spine Surgery at the UCSF Spine Center

UCSF is one of the first major medical centers in the United States to offer awake spine surgery through an Enhanced Recovery After Surgery (ERAS) protocol.

The surgery is performed by Praveen V. Mummaneni, MD, Joan O'Reilly Endowed Professor and Vice Chair of the UCSF Department of Neurological Surgery and Co-Director of the UCSF Spine Center.



LEARN MORE ONLINE

To view a presentation by Dr. Mummaneni on awake spine surgery, visit ucsfhealth.org/awake-treatment

1.19-WDV-138

