Why do complications happen?

Once a back or neck surgery decision is made; a consent form is signed detailing risks and benefits of surgery. Typical benefits from surgery include a decrease in back-neck &/ or leg-arm pain, more motion, less reliance on medications and improved function.

The downside of surgery involves complications. This typically involves unexpected negative results such as *infection*, *nerve injury*, *failure of screws* and *continued pain*. A common question I am asked is “Why did this happen?” The answer is as varied as the complications. The simplest answer is that unexpected results always occur, a certain percentage of the time. For example, if infection happens 2-4% of the time and you perform 100 surgeries; that is 2-4 infections.

We also know that certain risk factors increase complication rates. Obesity has been shown to increase the risk of infection, failure of hardware, *blood clots* and *non-union*. Smoking has been shown to increase chances of non-union, *wound breakdown*, infection and lung issues with anesthesia. Interestingly, people who smoke or are obese are more likely to have back and leg problems. For instance, smokers are 2X more likely to have low back surgery and 2.5X more likely to have neck surgery.

Other risk factors for complications include prior back &/ or neck surgery, workers comp injury, failure to follow post op directions and narcotic abuse among others. We have not even brought up the risks associated with anesthesia & pain control which are separate from the surgery. This includes heart issues, constipation, lung problems, uncontrolled diabetes and blood clots. ***A general rule of thumb is that the sicker you are, the more likely you are to have a complication.***

The effect of prior surgery is often underestimated. Having had anatomy disturbed which includes nerves uncovered or spine levels fused; increases the complexity of the surgery and alters surgeon decision making. Risks of *unexpected injury to nerves or blood vessels*, infection, *failure of screws or cages*, *lack of pain improvement*, *and longer recovery times* are all more frequent after repeat surgery. Many surgeons will not operate on patients with prior surgery because of the above reasons.

Overall, back and neck surgery has become more effective over time. However, complications still happen. As a surgeon, my job is to treat the individual patient and make decisions based on my training and twelve years experience. If an unexpected event does happen, I will do everything I can to fix the problem. Some complications cannot be avoided and fault belongs to no one. More importantly, a motivated and positive patient helps enormously in overcoming obstacles and achieving a successful outcome.