

Spinal fractures

Information for patients

This leaflet provides information for patients with spinal fracture(s). It aims to help explain how your fracture will be treated, guide your recovery and answer some common questions. It should be read alongside the information provided by your consultant. If you have any other questions or concerns, please do not hesitate to speak to the team caring for you.

What is a spinal fracture?

A spinal fracture is a break to one of the bones (vertebrae) in your spine. The force from the break also bruises the muscles, ligaments and nerves that surround the spinal bone. Injured muscles and ligaments can cause 'spasm' pains that shoot in all directions.

There are three natural curves in a normal spine:

- a) the cervical spine (the neck) containing seven vertebrae (bones)
- b) the thoracic spine (middle spine) containing twelve vertebrae
- c) the lumbar spine (lower spine) containing five vertebrae

The portion of the spine you have fractured, and the number of spinal fractures you have, will affect where you feel pain and how you are treated.

How is my fractured spinal bone treated?

Your consultant will discuss the type of fracture you have and the options for treating it. There are three main treatment options:

- a) conservative management (a medical treatment that is non-invasive and aims to preserve the function of the spine)
- b) a spinal brace or collar
- c) surgery

a) Conservative treatment

Most spinal fractures are treated conservatively. This means allowing the bone to heal naturally without a brace or the need for surgery. This does not mean recovery is simple and easy; spinal fractures are painful.

Standing, sitting and some movement puts weight across the fractured bone, which can be painful. There is pain from the spinal fracture during the healing period. This healing process can take up to four months, but most of the pain settles between six to eight weeks.

People often find sitting or standing for long periods difficult, so changing position and regular light activity such as walking is encouraged. These actions can spread the weight across your spinal fracture, helping to ease the pain slightly. Your symptoms will guide your degree of movement and the pain your body can take. Usually, the pain is noticeably improved four weeks after the fracture.

Regular pain medication can help to ease the pain, such as paracetamol and ibuprofen (if you can take them). Codeine or tramadol can be added if additional pain is felt. Please discuss pain management options with your consultant, GP or pharmacist.

b) Spinal brace or collar

Some fractures may be helped by a supportive brace. There are different types of spinal braces used at King's College Hospital NHS Foundation Trust. These include: cervical thoracic orthosis (CTO), thoracic lumbar sacral orthosis (TLSO) and lumbar sacral orthosis (LSO). In cervical (neck) fractures, a hard collar may be used (such as an orthotic called a 'Miami-J')

A member of the spinal team will show you how to fit the brace or collar. This may be an orthotist, physiotherapist or spinal nurse. For patients who had a brace or collar fitted by another hospital within South East London and Kent, please see the further information section at the end of this leaflet for contact details of the hospital.

How long do I wear the brace or collar?

Your consultant will inform you how long to wear your brace for and if it can be removed at certain times during the day or night. There may be times when they will ask you to keep the brace on throughout the day and night. On average, a brace is worn for 12 weeks.

Most people are advised to wear the brace when moving but do not need to wear it at night or when sitting comfortably. You may prefer to wear the brace when sitting upright as it can help with pain.

Managing issues with your brace or collar

Spinal braces or collars can cause pressure ulcers. Wearing the brace or collar increases your temperature and may cause excessive sweating in and around the area. Constant moisture can cause skin breakdown. A spinal brace also applies some pressure to your skin, which increases the risk of skin problems.

We recommend wearing a cotton t-shirt or vest underneath the brace to help protect the skin. In most cases, braces do not cause any problems, but it is important to check your skin daily for possible skin pressure effects such as pressure sores.

Early symptoms of pressure sores include skin discolouration and/or pain. These symptoms can develop into a blister or open wound. If skin discolouration continues despite padding, or you think you may have a pressure sore, please seek medical advice from your GP.

c) Surgery

Occasionally an operation or an interventional procedure, such as an injection, is recommended to treat your spinal fracture. If surgery is necessary, your consultant will discuss the operation with you.

How long will it take my fracture to heal?

Most spinal fractures heal naturally without any intervention such as surgery. Fractures usually take up to 12 weeks to heal.

How do I cope with the pain?

If you are in pain, contact your consultant, GP or pharmacist for pain management. This usually means taking pain medication.

Do I need to change the way I do daily activities while my spine is healing?

Avoid lifting anything heavier than the weight of a filled kettle (1.69kg/3.75lbs), during the first 6 weeks following injury.

Be careful with your movement for the first twelve weeks after a spinal fracture. Follow the advice below for lifting, twisting and bending:

- **Lifting:** [Advice on moving and lifting safely can be found on the Royal Osteoporosis Society website.](#)
- **Twisting:** If you need to reach an object that is behind you, make sure you turn your feet. Do not twist from your spine.
- **Bending:** When brushing your teeth at the sink keep a good posture, do not stoop. When getting dressed and putting your shoes on, bring your knees towards your chest rather than bending down to the floor.

When can I return to work?

There is no set time to be off work. Time off work will depend on the work you do, the demands of your job and the symptoms you have. People with office-based work are usually off for four to six weeks. Those with manual jobs may be off for up to three months. You should discuss return to work options with your consultant, GP and employer, and speak to your local occupational health department for further guidance.

If you are self-employed please contact your GP. Your GP is responsible for reviewing and offering you a sick note until you fully recover from your injury.

Do I need physiotherapy and occupational therapy?

Most people do not need routine physiotherapy after a spinal fracture. Once the fracture heals, you will be able to return to normal activity and your pain may improve. However, 50 per cent of patients with spinal fractures have pain that lasts more than six months. With time, the muscular soreness or pain will also fully improve. If problems continue, the team will usually choose to see you again before considering a referral to physiotherapy.

If you were admitted to hospital following the spinal fracture and have any difficulties with your mobility and daily activities, a referral will be made to the physiotherapist and occupational therapist for assessment before you go home.

Do I need to see my consultant again to check progress?

Most people with stable fractures (a bone that is broken with little damage) do not need a follow-up hospital appointment with the consultant. Your GP or local district hospital can provide a follow-up appointment.

What happens if my fracture does not heal?

Most spinal fractures heal within four months. If your pain continues or gets worse after this time, you should talk to your GP.

Advice to improve your bone strength

Your fracture may be a sign of [osteoporosis](#) (a condition that weakens bones and makes them more likely to break). Talk to your GP about steps you can take to strengthen your bones, including making sure you have enough calcium and vitamin D in your diet. They may recommend tests to check your bone health. Depending on the results of the tests, you may be prescribed medication to improve your bone strength.

Further advice and support

For more information, please see the below contacts at King's College Hospital.

Neurosurgery fracture administrative team

Tel: 020 3299 1876

kch-tr.neurosurgeryfractures@nhs.net

Neuro physiotherapists

Tel: 020 3299 2724

Monday to Friday, 8:30am to 4.30pm

Spinal nurse practitioners

Tel: 020 3299 8350

Monday to Friday, 9am to 4.30pm

Support with collars and braces fitted in South East London and Kent hospitals

East Kent NHS Foundation Trust

Tel: 07917 581 606

Email: ekhuft.getraumacoordinators@nhs.net

Guy's and St Thomas' NHS Foundation Trust

St Thomas' Hospital tel: 020 7188 6477

Guy's Hospital tel: 020 7188 6483

Email: gst-tr.patientappliances@nhs.net

Maidstone and Tunbridge Wells

Tel: 01622 228 221, press option 2

Email: Mtw-tr.ortho-spine@nhs.net

Medway NHS Foundation Trust

Tel: 01634 825086

Email: medwayft.traumacoordinator@nhs.net

Online osteoporosis information

NHS online (www.nhs.uk)

[Osteoporosis](#)

Royal Osteoporosis Society (www.theros.org.uk)

[Understanding and living with spinal fractures](#)

This leaflet was produced by King's College Hospital spinal fracture service which is part of the South East London and Kent Spinal Network. The service is led by complex spine neurosurgery consultants, senior clinical fellows and supported by our senior spinal nurse practitioners, physiotherapists, orthotics and occupational therapists.

Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is located on the ground floor of the Hambleton Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: 020 3299 3601

Email: kch-tr.palsdh@nhs.net

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND

Tel: 01689 863252

Email: kch-tr.palspruh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net