



Neck pain and stiffness is common following thyroid or parathyroid surgery. The neck is composed of the vertebrae and ligaments that provide stability, and muscles that provide support and movement. The neck is a vulnerable part of the spine because it is less protected than the rest of it. Importantly, it supports the head, and is very flexible by necessity.

During your thyroid or parathyroid operation, the neck is extended (tilted backwards) for the duration of the procedure, which may be up to several hours. This can cause muscle spasm, which then leads to pain and tension in the neck, and sometimes also causing headaches.

People with pre-existing neck problems, such as cervical spondylosis, or a previous whiplash injury, are more susceptible. Stretching and exercising the neck muscles before and after your surgery significantly reduces the risk of neck spasms and pain. You should perform the following stretches, holding for 10 seconds each, twice a day, for 10 days before and 10 days after your surgery. In each exercise, the neck should feel a gentle stretch at the maximal range of movement. Do not bounce with the stretches to avoid further tightening of the muscles. Always return the neck to the neutral position after each stretch.

### 1. Rotation (Sternocleidomastoid Muscle)

From the neutral position, turn your head to the left and hold for 10 seconds. Then turn to the right via the centre, and hold for 10 seconds. Repeat 10 times each side. Return to neutral position.



### 2. Flexion / Extension (Posterior Neck Muscles)

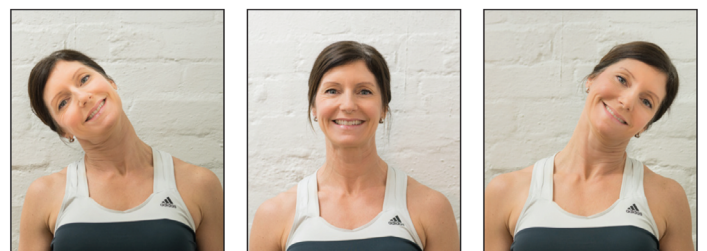
Tuck your chin to your chest. Feel the stretch in the back of your neck, and hold for 10 seconds. Then tilt your head back as far as

you can, and hold for 10 seconds. Repeat 10 times in each direction. Return to neutral position.



### 3. Side Movements (Scalenes and Upper Trapezius)

Tilt your head to the left, as if you are trying to touch your left shoulder with your left ear, without shrugging your left shoulder. You can place your left hand on your head, and right hand on your right shoulder to add a little extra stretch. Hold for 10 seconds. Now repeat the same stretch on the right side moving through the neutral position, and hold for 10 seconds. Repeat 10 times on each side. Return to neutral position.



### 4. Shrugs (Trapezius and Levator Scapulae)

Shrug both shoulders at the same time, and hold for 10 seconds. Relax and repeat 10 times. Return to neutral position.



**Please perform these stretching exercises gently, and avoid bouncing or sudden movements, to prevent straining your neck.**



Name: \_\_\_\_\_  
 Procedure: \_\_\_\_\_  
 Surgery Date: \_\_\_\_\_  
 Time: \_\_\_\_\_

## Preparing for Your Surgery: A Step-by-Step Guide

Now that surgery has been recommended for you, there are a few preparatory steps to undertake, which will help to optimise the proceedings on the day of surgery.

This short guide has been designed to help you remember what you need to do before surgery. It is meant to be a general guide. You should still discuss all the details with Mr Lee. If there are any doubts, please do not hesitate to get in touch with Mr Lee or the rooms.

### ➔ Administrative / Paperwork

- Please return your health questionnaire without delay**, as theatre booking for your procedure can only proceed after the hospital receives your completed health questionnaire.
- Please check with your private health insurance** whether your level of cover includes the procedure you need to be performed in a private hospital, as there are many different levels of private hospital cover. Finding this out early may avoid last minute cancellations or change of plans.

### ➔ Pre-op Tests

Some patients may require additional tests before surgery. These may include some or all of the following:

- Bloods \_\_\_\_\_  Done
- ECG \_\_\_\_\_  Done
- Chest X-ray \_\_\_\_\_  Done
- Other \_\_\_\_\_  Done

These tests can be done anytime before the surgery date, but ideally about a week prior. This is so that if there are abnormal results, the appropriate steps can be taken to rectify the problem.

### ➔ Seeing other doctors Pre-op

- ENT for Vocal Cord Check \_\_\_\_\_  Done
- Endocrinologist \_\_\_\_\_  Done
- Your GP \_\_\_\_\_  Done
- Other \_\_\_\_\_  Done

### ➔ 10 Days Before the Operation

- Start doing the neck exercises**, shown overleaf if you are having thyroid or parathyroid surgery.
- You may need to stop the following medications**, depending on why you are on them:

Medication	Brand Names	Days to Stop	Last Dose
Clopidogrel	Plavix, Coplavix, Duocover	10	
Herbals/Supplements		7	
Warfarin	Coumadin, Marevan	5 (recheck INR)	
Dabigtran	Pradaxa	5	
Rivaroxaban	Xarelto	3	
SGLT2i / Gliflozins	Forxiga, Qtern, Xigduo XR	3 (see Endo)	
Aspirin	Caria, Disprin, Aspro Clear	No need to stop	

- Stop smoking**, for as long as possible before your operation. This would improve the ability of your blood to carry oxygen to the site of the operation and help with the healing process. It would also reduce other adverse effects smoking has on anaesthesia.

### ➔ Fasting Before the Operation

Do not eat, drink, smoke, or chew gum for at least 6 hour prior to your operation.

- Fast from midnight for morning surgery
- Fast from 6 am for afternoon surgery.

### ➔ On the Day of the Operation

- Take all your regular medications on the morning of surgery with a small sip of water, except diabetic medications.
  - If you have type 2 diabetes and are on oral medications (eg diaformin, metformin, gliclazide, glibenclamide, etc), do not take your morning dose as you will be fasting.
  - If you have type 1 diabetes, or have type 2 diabetes but requiring insulin injections, then please ask your surgeon or anaesthetist for specific instructions regarding the dose on the morning of your operation.

- Bring all your medications** with you when you come to the hospital for surgery
- Bring all your scans** with you to the hospital, especially your thyroid ultrasound and/or CT.