Before you go home, make sure you are comfortable with the fit of your vest. If not, tell your doctor.

Halo Brace Care

A Halo brace is used most often after a neck injury. This brace holds your neck (cervical portion of your spine) in place to:

- Prevent movement while the neck is healing.
- Help keep you as active as possible.
- Allow you to safely perform limited kinds of daily activities (dining out, walks, movies, school and work).

The Halo brace (See Figure 1) consists of 3 parts:

- A metal ring, or halo, secured to the head by metal pins (screws).
- A vest.
- Two metal rods that connect the halo to the vest.

Applying the Halo

It takes about 1 hour to apply the Halo. The doctor uses medicine to numb the area where the pins are placed. You will feel some pressure when the pins are put into position. Once the Halo is attached to the vest, X-rays are done to check that your spine is aligned.

Before you go home, make sure you are comfortable with the fit of your vest. If not, tell the doctor.

Most often, a Halo is worn for 2 to 4 months. This will depend on:

- Your injury.
- The healing process.

Figure 1
**Taking Care at Home**

**General Guidelines**
The pin sites may be sore for the first few days. You may have a sore neck or back. Some patients have pain in their forehead when they chew or yawn. This is normal. Discomforts slowly go away. As needed, pain medication will be prescribed by your doctor. Until you get used to the brace, you may tire easily. Take frequent rest breaks as needed.

It may take several weeks to get used to being top-heavy and regain your sense of balance during activities. At first, it is easy to misjudge distances between objects and your Halo ring. Take care to avoid bumping into furniture, doorways, cupboards, etc.

**Halo Precautions**
To avoid injury, it is important to follow these guidelines:

**Do not:**
- Allow anyone to hold/pull on rods or vest.
- Try to bend or twist your neck.
- Loosen/adjust your vest or pins.
- Perform activities that put pressure on your neck.
- Lift more than 5 lbs.

**Avoid:**
- Crowds.
- Bending forward at the waist.

**Diet**
It is important to maintain your normal weight; otherwise, vest adjustments will be needed. Protein and dairy products can aid in the healing process. Follow your doctor’s guidelines about your diet.

Swallowing may be more difficult because your head and neck are in a fixed position. It is important to:
- Eat in an upright position.
- Cut food into small pieces.
- Take small bites.
- Chew food well.
Clothing
No clothing can be worn under your vest. Clothing should not be pulled on over your head. Suggested options are clothes that have:

- Full-length zippers or buttons (shirts, jackets).
- Shoulder velcro straps.
- Larger than normal neck sizes.

A scarf can be worn to keep your head, neck and ears warm. Wear tennis shoes with traction to avoid slipping. Women should not wear high heels. Your occupational therapist may give you a reacher or other assistive devices to help with dressing.

Sleeping
Any discomfort or difficulty with sleeping should pass with time.

Do not sleep on your stomach.

Put a rolled towel/pillowcase behind your neck when on your back or next to your cheek when on your side.

It is important that the towel contacts only your head/neck and does not apply pressure (See Figure 2).

A wedge to elevate the head of the bed may increase your comfort. This can be done with pillows or blankets.

Getting In and Out of Bed
Do not sit up by bending at the waist; this puts stress on the front pins.

To get out of bed while lying on your back:

- Bend both knees.
- Bring arms toward the edge of the bed as you roll onto your side.
- Drop your legs off the bed.
- With your arms, push up to sitting position (See Figure 3).

To get into bed, reverse this process:

- Sit back on the bed, not too close to the edge.
- Lean to the side and lower your trunk to the bed.
- Lift both legs off the floor onto the bed.
- Roll over onto your back with both knees bent.
- Remember to keep your spine straight and not twist your body as you roll.
**Pin/Skin Care**

Have a family member/visiting nurse check pin sites daily for signs of infection. Clean only as needed with hydrogen peroxide. It is best to allow the skin to heal naturally. Do not use ointments or antiseptics on your pin sites unless prescribed by a doctor. The pins will be tightened as needed by your doctor. Never use a hard object to scratch under the vest; instead, use a thin towel.

**Bathing**

Do not shower. Instead, sponge bathe by sitting in a chair next to the sink. Keep your vest dry at all times. Protect your vest with a towel during bathing or shaving. If the vest does get wet, use a blow dryer on a cool setting to dry. Clean the skin under the vest as needed:

- Slightly dampen a thin hand towel with rubbing alcohol.
- “Feed” the towel under vest.
- Pull the ends of the towel back and forth in a drying motion (See Figure 4).

![Figure 4](image)

Do not use powder, soap or lotion under the vest because it may cause irritation. Keep your skin and vest clean. Your vest will not be changed unless done for a medical reason.

**Washing Hair**

Do not wash your hair until cleared by your doctor. Wash your hair by bending over at the sink. Keep your vest dry with a towel or plastic. A family member/nurse will need to help you by using a hand-held pitcher or flexible hose to rinse your hair. A damp washcloth with shampoo can be used instead of the sink and hose (See Figure 5).

Do not use any tints, dyes, sprays or conditioners on your hair.
Sexual Intercourse
Talk with your doctor before resuming sex. You may need to assume a more passive role. It is important to avoid:

- Positions that may put stress on the halo or your head/neck.
- Pushing/pulling on rods or vest.

Driving/Transportation
Do not drive a car or ride any 2-wheeled vehicle (e.g., bicycle, motorcycle).

To get into a car:
- Back into the seat and sit with your body bent forward at the waist (see Figure 6).
- Pivot your hips and move your legs into the car so that you face forward.

To exit the car, reverse this process:
- Turn and place your feet on the ground outside the car door
- Bend forward at the waist and move to a standing position.

It may be helpful to have someone standing nearby to assist you the first few times you get in and out of the car. Be careful not to bump your Halo on the door frame of the car when getting in and out.

Always wear a seatbelt.
To avoid injury, limit riding public transportation because of shaking vibrations and pushing and shoving of crowds.

Consult with your doctor before air travel. Note that:
- You will set off metal detectors
- You should ask to pre-board the airplane.

School/Work Environment
Talk with your doctor before returning to school or work. Do not use a shoulder bag or book bag. Do not lift more than 5 lbs. If you will be sitting for extended periods of time, it is important to take standing breaks.

A therapist can review the proper set-up of a work station to avoid injury and increase comfort. It is important to:
- Set computer screen at eye level.
- Support arms on surface with elbows close to 90 degrees.
- Elevate writing surface if needed.
Halo Removal

Your Halo will be removed once X-rays show that your neck has healed. At first, you may feel dizzy and your head may feel heavy. This will pass over time. Your neck muscles will be weak, so you may wear a cervical collar for support. This weakness will slowly go away. Your doctor may recommend physical therapy to strengthen your neck.

Your doctor will advise you when you can resume your normal activities.

When to Call the Doctor

Contact your doctor immediately if you have:

- Persistent pain.
- Change in sensation/feeling (e.g., numbness).
- Decreased ability to move your arms and/or legs.
- A need to adjust the vest/pins.
- Loosening of pins.
- Any neck movement.
- Persistent redness, swelling or drainage at pin sites or under vest.

For other questions, contact Northwestern Memorial Hospital’s Department of Rehabilitation Services at 312-926-2526.

Health Information Resources

For more information, visit one of Northwestern Memorial Hospital’s Health Learning Centers. These state-of-the-art health libraries are located on the third floor of the Galter Pavilion and on the first floor of the Prentice Women’s Hospital. Health information professionals are available to help you find the information you need and provide you with personalized support at no charge. You may contact the Health Learning Centers by calling 312-926-LINK (5465) or by sending an e-mail to hlc@nmh.org.

For additional information about Northwestern Memorial Hospital, please visit our Web site at www.nmh.org.

Para asistencia en español, por favor llamar al departamento de representantes para pacientes al 312-926-3112.

Northwestern Memorial is an equal opportunity employer that welcomes, respects and serves with dignity all people and does not discriminate, including in hiring, or employment, or admission, or access to, or treatment in its programs or activities on the basis of race, color, gender, national origin, religion, disability, handicap, age, Vietnam or other veteran status, sexual orientation or any other status protected by relevant law. To arrange for TDD/TTY, auxiliary aids and foreign language interpretation services, call the Patient Representative department at 312-926-3112, TDD number 312-926-6363. Issues related to the Rehabilitation Act of 1973 should be directed to the director of Employee Relations or designee at 312-926-7297.

Developed by: Department of Rehabilitation Services

© August 2009 Northwestern Memorial Hospital
For more information about Northwestern Memorial Hospital, please visit www.nmh.org.