Physiotherapy
Patient Information

Exercise programme following surgery of the lumbar spine

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The spine is split into three curvatures or sections. The cervical curve is the upper part of your spine, your neck. The thoracic curve is the middle section of your back and the lumbar curve is the lower portion of your back.

Pilates Classes

Pilates focuses on building your body’s core strength and improving your posture through low impact condition exercises.

Your core muscles are your back, abdominal and pelvic muscles. Pilates strengthens and conditions these muscles to increase agility and support your back.

The best way to get started with Pilates is to join a class and learn from a qualified Pilates teacher. Classes are run at local leisure centres and physiotherapist led classes are run across Cambridge.
Daily Exercises

Knee Rolling

Lie on your back with your knees together and bent. Slowly roll your knees from side to side, keeping your upper trunk still.

Repeat this 10 times, three times a day

Knee Hugging

Lying on your back, bring your knee towards your chest and hold it there with hands if needed.

Repeat this with both legs 10 times, three times a day

Transversus Abdominals

Lie on your back with your legs bent and feet together. Pull your stomach up and in by hollowing your lower abdominal wall to flatten your back gently onto the floor.

Assist this contraction by pulling up and in with your pelvic floor muscles. You should feel a pulling sensation low in your groin. Do not allow your back to flatten too hard onto the floor or let the stomach bulge forward.

Hold and sustain a consistent contraction with minimal effort for 10 seconds. Repeat this 10 times, three times a day.
Return to normal activities

Avoid heavy lifting for six weeks. When lifting, bend at your knees not your back. Keep the object close to your body, do not twist or strain and ensure you push up through your legs.

Gradually build up your activity level, continue to increase your walking distance daily. If you have a sudden increase in pain during or after a particular activity, stop and rest before building up to the activity again over the next couple of days. If you are experiencing more pain, think back to the activities you did in the previous days. This may help you identify the cause and suggest how pacing the activity next time may help.

Returning to sport should be gradual and graded as your pain allows. If returning to swimming, allow your wound to heal and vary the stroke if you feel discomfort.

You may resume driving when you feel comfortable and safe. This is usually about two to four weeks following your surgery and provided you have no altered sensation or weakness in your legs. You must be able to complete an emergency stop if necessary. If in doubt discuss driving with your GP or await your clinic appointment with your consultant.

After your operation

Following your operation it is advisable to get out of bed and walk as soon as possible.

Sitting is the position that puts the greatest pressure on your back therefore you are advised to sit for short periods only (less than 30 minutes), maintaining a good posture. Gradually increase the time you spend sitting as comfort allows. You may find a perching position is more comfortable. If you become uncomfortable, change your position for example stand up, walk, lie down or sit.

Pain control

You may experience pain in the area of your surgery in the first few days. Ask for pain relief if required. A degree of discomfort and stiffness is normal. However, any activity that produces sharp pain or persistent increase in pins and needles or numbness should be treated with caution.