

## LUMBAR DISCECTOMY: POST-OP REHABILITATION PROTOCOL

Week	Restrictions & Precautions	Aims of phase	Physio treatment (1-2 x per week)	Rehabilitation exercises Perform daily (can be spread out across the day).  NB: Not all exercises appropriate for all clients - ex's & reps determined by the physio.	Criteria for progression to next phase/level
1-2	Avoid spinal bending/twist ing (flexion/exten sion/rotation) first 2 weeks  No lifting first 2 weeks  Log-roll for getting out of bed	Neutral spine awareness in static exercises and daily tasks Diaphragmatic breathing Deep core activation (pelvic floor and TA)	Real time ultrasound for core activation (TA and PF)  Massage for muscle spasm  Education on daily task modifications	<ol> <li>Diaphragm breathing</li> <li>Side lying clams</li> <li>Calf raises</li> <li>Hip hinge to wall/chair (neutral spine)</li> <li>Supine alternate foot lifts</li> <li>Gentle walking (&lt;10-mins per walk)</li> </ol>	☐ Can activate core muscles ☐ Neutral spine in hip hinge ☐ 10-mins walking with minimal pain ☐ Able to use diaphragmatic breathing in daily tasks ☐ Wound healing satisfactory
2-4	Small range of motion for spinal bending/twist (avoid end ROM)  Lifting maximum of 10% bodyweight  Keep feet/legs supported in supine/kneeli ng exercises  Avoid prolonged periods in one position (e.g. excessive sitting/lying)	Neutral spine in dynamic exercises  Diaphragmatic breathing during exercises  Commence gentle ROM  Improve walking tolerance	Teach rehab exercises  Massage for muscle spasm/tone  Manual therapy for hip and thoracic mobility	<ol> <li>Bodyweight squats to chair</li> <li>Bodyweight upright lunges</li> <li>Small ROM cat/cow</li> <li>4pt-kneeling: rocking, single arm lifts, single knee lifts (neutral spine)</li> <li>Light reformer supine leg-work</li> <li>Supported SL balance</li> <li>Increase walking tolerance to 20-mins</li> <li>Lower limb stretches (neutral spine, avoid hamstring stretch if ongoing sciatic nerve irritation)</li> <li>Hydrotherapy optional</li> </ol>	<ul> <li>Minimal pain with small ROM spinal movements</li> <li>Can maintain neutral spine in exercises</li> <li>Able to use diaphragmatic breathing in all exercises</li> <li>20-mins walking with minimal pain</li> <li>Can lift up to 10% bodyweight without pain</li> </ul>



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4-6	Medium range of motion for spinal bending/twist (avoid full/end ROM)  Lifting maximum of 15% bodyweight  Keep exercises slow  Avoid prolonged periods in one position (e.g. excessive sitting/lying)	Increase range of movement  Increase exercise demands of core muscles  Increase walking tolerance	Teach new rehab exercises  Massage for muscle spasm/tone  Manual therapy for hip and thoracic mobility  Low grade manual therapy to lumbar segments adjacent to operated levels (avoid op-site)	<ul> <li>1. Bird dogs</li> <li>2. 4pt-kneeling knee hovers</li> <li>3. Supine and standing reformer exercises (light springs)</li> <li>4. Bodyweight lunge and squat (bigger ROM)</li> <li>5. Glute bridge with neutral spine</li> <li>6. Supine tabletop hold &amp; breathe</li> <li>7. Isometric standing wall plank (front and side)</li> <li>8. Increase walking tolerance to 30-40-mins</li> <li>9. ROM: kneeling and standing lumbar ROM (50-75% full ROM: flex/ext/LF/rot)</li> <li>10. Lower limb stretches (neutral spine, avoid hamstring stretch if ongoing sciatic nerve irritation)</li> <li>Minimal pain with larger ROM with larger ROM spinal movements</li> <li>Can maintain neutral spine exercises</li> <li>Jable to use diaphragmatic breathing in all exercises</li> <li>30-40 mins walking with minimal pain</li> <li>Can lift up to 15% bodyweight without pain</li> </ul>
6-8	Full range of motion for spinal bending/twist  Lifting maximum of 20% bodyweight  Keep exercises slow  Minimise sedentary behaviour	Functional movement  Introduce light resistance training  Progress core and glute strength  Commence light cardio (swim, stationary bike, light jog)	Teach new rehab exercises  Massage/ne edling for muscle spasm/tone  Manual therapy for hip and thoracic mobility  Low grade manual therapy to	<ul> <li>1. Bird dogs with hips forward</li> <li>2. Bear pose</li> <li>3. 8-pt plank</li> <li>4. Prone extensions</li> <li>5. Supine/prone/st anding reformer exercises (light-medium springs)</li> <li>6. Lunge and squat with weights</li> <li>7. Standing rotations with theraband</li> <li>8. Glute bridge</li> <li>Minimal pain with full ROM spinal movements</li> <li>S-point plank for &gt;1-min</li> <li>Standing wall side-plank &gt;1-min</li> <li>G0-mins walking with minimal pain</li> <li>Can lift up to 20% bodyweight without pain</li> </ul>



			lumbar segments adjacent to operated levels (avoid op-site) Whole body alignment check	with curl up  9. Supine dead bugs (small ROM)  10. Isometric leaning wall side plank  11. Hammy curl and quad extension machines  12. Increase walking tolerance to 60-mins  13. ROM: kneeling and standing lumbar ROM  14. Lower limb stretches (neutral spine, avoid hamstring stretch if ongoing sciatic nerve irritation)	
8-10	Full ROM Lifting maximum of 30% bodyweight Keep running slow	Increase strength and endurance  Commence light running  Increase lateral and rotational demands	Teach new rehab exercises  Perform new objective strength measures  Massage & needling for muscle spasm/tone  Manual therapy for hip and thoracic mobility  Low grade manual therapy to lumbar segments adjacent to operated levels (avoid op-site)	<ol> <li>6-point plank</li> <li>Bear pose with alt leg lifts</li> <li>Prone extensions on ball (bigger ROM)</li> <li>Supine/prone/st anding reformer exercises (heavier springs)</li> <li>Lunge and squat with weights</li> <li>Standing rotations with cable</li> <li>Single leg glute bridge</li> <li>Supine dead bugs with bigger ROM</li> <li>Side plank (knees down)</li> <li>Light RDL's</li> <li>Walking tolerance &gt;60-mins</li> <li>Introduce light</li> </ol>	<ul> <li>No pain with full ROM spinal movements</li> <li>6-point plank for &gt;1-min</li> <li>Side-plank on knees &gt;1-min</li> <li>&gt;60-mins walking with no pain</li> <li>Can lift up to 30% bodyweight without pain</li> </ul>



10-12	Full ROM Lifting maximum of 40% bodyweight Care with lifting technique	Increase strength and endurance Increase exercise speed/power Increase lateral and rotational demands Return to pre-injury levels by end of phase	Whole body alignment check  Teach new rehab exercises  Retest objective strength measures  Massage & needling for muscle spasm/tone  Manual therapy for	swimming 13. Lower limb stretches  1. Plank with alt arm/leg lifts 2. Push-ups 3. Reformer Pilates 4. Lunge and squat with heavier weights 5. Standing rotations with cable (heavier and bigger ROM) 6. Single leg glute bridge 7. Supine dead	Clearance from Surgeon  No pain with full ROM spinal movements  Can perform all exercises pain free  Can lift up to 40% bodyweight without pain  Discharge testing reflects pre-injury
		μnase	hip, thoracic and lumbar mobility  Testing for clearance of return to sport and/or discharge	bugs with crunch  Side plank (knees up)  Heavier RDL's  Walking tolerance unrestricted  Progress swimming  Lower limb stretches	capacity
12+	Await surgeon and physio clearance for sport  No other restrictions, but must continue core strength exercises ongoing	Avoid re-injury  Continue to improve capacity	Consolidate ongoing strength and core program  Manage any impairments with manual therapy and soft tissue releases	<ol> <li>As per week         <ul> <li>10-12 program,</li> <li>but increase</li> <li>speed, load,</li> <li>power demands</li> </ul> </li> <li>Introduce         <ul> <li>jogging and</li> <li>cycling</li> </ul> </li> <li>Sports specific rehab.</li> </ol>	N/A