



Updated on – Sep 10, 2018 by Dr. Rick Morris

The 5 Worst Exercises If You've Herniated Your Disc

By Dr. Rick Morris

Anyone who's herniated a low back disc will do anything to prevent it from coming back. The pain's excruciating and its effect on your life can be overwhelming. You may squirm if sitting too long, cringe when coughing, and your arms or legs may feel numb, burn, or give out from weakness. So after you've begun to heal from your last flare-up, you start an exercise program. But, where do you start? Which exercises are helpful and which aren't?

Not All Low Back Problems Are The Same and Will Not Be Helped Or Hurt By The Same List of Exercises

Of course, you know that; but it still needs to be said.

Disc herniations usually occur between the ages of 25 and 50. The tough, fibrous material that surrounds and protects your disc (called the annulus fibrosis) begins to break down from injury, bad posture, being over weight or just from having bad "annulus fibrosis genes."

Weak discs cause your back to "go out" and causes severe spasms that may refer pain down one or both of your legs. Coughing, sitting, lifting and quick movements may all of a sudden, drop you to your knees.

These are **the five worst exercises for those with weak lumbar discs** that are commonly performed. Take note if this applies to you and make the necessary changes.

#1. Straight-Legged Forward Bends



Most herniated discs occur when we're bending forward-especially when twisting to the side or lifting something. So, don't make it an exercise until your disc is strong enough to support this position and when all other forms of flexion feel comfortable (e.g. the double knee to chest and fetal positions). Even then, employ this position slowly and only with your legs apart and knees slightly bent. Never force yourself forward or challenge yourself to see how close your fingers can get to the floor (it may not be the only thing left remaining there).

#2. Seated Straight-Legged Bends



Reread the last paragraph as these points apply here as well. Even being seated is not a protection for your discs. Again, in the later stages of "rehab" it may be employed if your discs are strong and you don't force flexion. It must feel very easy and the pulling sensation must be in your hamstrings, not your back.

#3. Deep Squats



Sure, we all like strong "gluts," but this exercise is hard on your knees and low back discs. Try using a long, deep, walking-type lunge instead while keeping your back tall and not bent forward. Eventually you can hold a few pounds in each hand as your doing the exercise for a better challenge. But, build your buttocks muscles slowly. As your gluteul muscles get stronger they can pull on you're lower back, so spend more time stretching them out. Strong "gluts" are fine, tight "gluts" aren't.

#4. Unsupported Sit-Ups



Ouch... Keep your lower back on the ground while doing sit-ups! Upper abdominal exercises should keep your lower back on the ground while slowly lifting and rounding your upper back. The V-Up demonstrated in this picture should only be done slowly and held and only in those whose low back discs are strong.

#5. The Wood Chop



Isn't this exactly what you did when you hurt your disc in the first place (alright, maybe you were in the shower or putting on your shoes; but, it's the same motion isn't it?) Whether you're using a pulley, a ball or nothing at all--never bend, rotate, stand-up and repeat unless you've got discs made of steel. Of course, some of us get away with it, but if you're reading this article, you're probably not one of them.

Of course there are many more exercises that deserve "honorable mentions". But, I promised only the top five.

As I previously mentioned, most acute disc herniations occur between the ages of 20 and 50 and usually while bending forward or being bent for prolonged periods (such as occurs during sitting). As we age, acute disc herniations are less common and are replaced by its offspring—degeneration, arthritis and Spinal Stenosis (often caused by the years of disc injury while they were young). We'll have a new "top five" for these problems next month. So fix your disc problems while you're young. If you're doing any of these exercises, change them.

Many disc herniations and protrusions heal with early rest and physical medicine such as chiropractic and physical therapy. But, some do not. Instead, they get worse, occur more frequently and become more painful and disabling. Eventually impacting your entire life.

The Spinal Stenosis and Disc Center developed a non-surgical approach for these types of disc problems that is possibly the most effective to date and taught to doctors and therapists who practice around the country. If you have a disc that is not healing, be sure to see us as soon as possible. The longer your disc is damaged, the more difficult it is to treat and the lower the chance for a complete recovery.

Have fun with rehab. A good rule of thumb to practice—if it feels worse when you're done or

while doing it, reconsider.

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