How To Exercise With A Disc Bulge

By
Sam Visnic NMT
SamVisnic.com
Endyourbackpainnow.com

Warning!
This information is NOT medical advice, and does not replace the diagnosis nor treatment of a licensed physician. This report and related content is for information purposes ONLY. Always seek the advice of a qualified health care professional before beginning any health program. Any actions taken as a result of reading this report and/or related information is at your OWN risk. Endyourbackpainnow.com, Sam Visnic, and all related affiliates and associates, assume no liability as a result of actions taken on your part.
**Symptoms of Disc Issues**

Back pain is frankly known to be near impossible to specifically diagnose in terms of the exact cause. Most back pain is “non-specific”, meaning the cause is unknown. (For information on this, download my report: 3 Essentials To Back Pain Relief here: [http://www.endyourbackpainnow.com/blog](http://www.endyourbackpainnow.com/blog))

There is no telling how bad a bulge really is relative to the pain. I have seen people with an 8 mm disc bulge that appear in the same amount of pain as someone with a 2 mm disc bulge.

Just because your MRI shows a bulge, does NOT mean you have a disc bulge that is causing your pain, but it should be viewed as “suspect”.

It’s a safe approach to act “as-if” you have a disc bulge if all the warning signs are present. The most important ones include:

- Pain is worst in the morning, but gets better as the day goes on (provided you are being cautious about not provoking it)
- Any degree of spinal flexion increases the pain, in particular the referral pain down the leg
- Arching your back (lumbar extension) makes your back feel better
- Back feels better standing than sitting (not always the case)
- Lying face down feels like the best position
- Referred pain going to the butt or further down
- The sensation is “sharp” or “tingling” and may produce a “dull ache” when its not sharp, but can quickly become sharp with certain PREDICTABLE movements
- A lateral shift is present (pelvis does not sit under shoulders and appears to be off to one side)

**Who Should NOT Perform These Exercises**

If any of the following occurs, do NOT do ANYTHING without consulting your doctor first:

- If you have developed lower back pain for the first time and it is no better 10 days after onset
- If you have severe pain in the leg below the knee and you experience sensations of weakness, numbness, or “pins and needles” in a foot and the toes
- If, following a recent severe episode of back pain, you have developed bladder problems
- If you are generally feeling unwell in conjunction with the attack of lower back pain
Approach

Just like anything else I see out there, proper progression of movement is extremely difficult to find. Let me be clear here:

**IF YOU WISH TO TAKE CARE OF YOUR DISC ISSUE NATURALLY, YOU MUST FOLLOW A PROPER PROGRESSION AND DO EVERYTHING STATED HERE AND LIKELY MORE TO GET THE JOB DONE.**

I hope you read that loud and clear. Some people think if they do 50% of the instructions their problem will get fixed. Good luck with that. Dealing with disc issues requires 100% and NO LESS to be successful. Sorry if you don’t want to hear that, but it’s the truth.

Even if you have had no “episodes” in 4 weeks after doing the protocol, you may still be at risk of setting yourself back to the starting point until the disc has re-absorbed. I recommend being consistent with the approach for 6 months (roughly the amount of time at which you would get a 2nd MRI). You will, however, feel MUCH better long before then if you are the type to respond well to this approach.

**NOTE!!**

You may need to correct your SI joint if you are currently imbalanced prior to initiating extensions.

It is very common to have both problems, and likely that an SI joint imbalance contributed to the disc bulge. If you don’t correct this first, you will likely have increased pain during extension, and add the possibility of pinching the disc because of having an existing rotation in the spine!

See here for PDF on SI joint dysfunctions: [SI Joint Link](#)

Centralization Effect
The further your pain goes down your body, the worse off the situation may be. As the problem corrects, you will notice a “centralization effect”. This means that the average of the pain will begin moving up toward the spine where the bulge is.

This feels like a bizarre sensation, because the pain may in fact INCREASE slightly at the spine, but the pain will reduce in the leg while receding toward the spine. This is a very positive effect.

This may not happen right away, but instead over days or weeks of sticking with the program.

As you can see in the picture, the red lines depict that the pain may go all the way down the leg, and of course into the foot, as the lumbar spinal nerves control that area. The green arrows demonstrate the recession of the pain toward the lumbar spine.

**Phase 1: Reduce Stressors**

Phase 1 may last 1-2 weeks before adding anything else in.

**Anti-inflammatory diet**

The primary focus of reducing inflammation via food intake is to identify and eliminate foods that promote prostaglandin imbalances. This includes foods that are high in omega-6 relative to omega-3. These foods include:

1. Polyunsaturated oils: Soy, Corn, Canola, and others
2. Nuts and nut butters
3. Mayonnaise and Salad dressings
4. Excessive meat intake (excessive has different meaning for each person)

If you are willing to go a bit further: Avoidance of the most common food allergies and intolerances, including:

1. Wheat-Gluten
2. Dairy
3. Eggs

Lastly, all of the proper elements of healthy eating need to be applied, which is beyond the scope of this report, but more information on it can be found on my blog at:

http://www.endyourbackpainnow.com/blog

**Elimination ALL provoking factors**

Movements that must ABSOLUTELY be avoided include:

1. Flexion of the spine
2. Side bending of the spine

3. Rotation of the spine

Yes, by doing this, you are to a degree becoming “mummified” for a period of time. You said you wanted relief, didn’t you??

Finding a position of relief and doing it consistently

You will find this quickly as you begin to perform the corrective movements. A position of relief is simply a body position that imposes the least amount of stress on the painful area.

The Corrective Exercise Movements

**The Prone Position:** Every hour on the hour for 1-5 minutes

Laying face down is the first step in introducing spinal extension. Preferably this would be done on a massage table with a face cradle to avoid rotation in the neck. The floor is the best place to start. I do not recommend doing this on a mattress, as that may cause more extension that you are ready for to begin with.

Simply lay in this position and allow your back to relax. For some people, this may uncomfortable due to loss of extension, but at the same time, it relieves the pain from the disc. If this is the case, start with a low amount of time, as low as 1 minute.

Note: To get in and out of this position, lay on your SIDE first, with the side that has the suspected disc bulge on it facing the sky. (Example, if you suspect a disc bulge on the right side, then always roll ONTO your left side to get up and down).

The Prone Position may be done for a few days before attempting the next part.

**The Sphinx Position:** Perform the Prone Position first, for 1-3 minutes, then the Sphinx Position for 1-3 minutes. Alternate every 1 hour on the hour with the Prone Position and the Prone Position + the Sphinx Position to test. If you feel fine with this, you may perform both the Prone Position and the Sphinx Position every hour on the hour.
The Sphinx Position increases the amount of extension in the lumbar spine, and for some, may be a significant increase in intensity. For this reason, you always start with the previous progression FIRST, then work slowly into the next progression.

If the full Sphinx Position is too rapid of a progression and it causes pain, or you can’t relax into it, then you may move your elbows forward in front of your shoulders, thus reducing the extension in the lumbar spine. I call this the “Half Sphinx”.

**Example Schedule:**

8 am: Prone Position: 1-3 minutes

9 am: Prone Position: 1-3 minutes; Half Sphinx Position: 1-3 minutes (The full version can be tough because disc pressure and pain is highest in the morning)

10 am: Prone Position: 1-3 minutes

11 am: Prone Position: 1-3 minutes; Sphinx Position: 1-3 minutes

12 am: Prone Position: 1-3 minutes

1 pm: Prone Position: 1-3 minutes; Sphinx Position: 1-3 minutes

The Prone Position + Sphinx Position may be done for a few days to a week before attempting the next part.
**The Push-Up:** Perform the Prone Position first for 1-3 minutes, then the Sphinx Position for 1-3 minutes, then add 5-10 repetitions of the Push-Up every other hour until you feel comfortable, then you may perform the Push-Up along with the Prone Position and Sphinx Position every hour on the hour.

The key to the Push-Up is allowing your spine to SAG. Meaning, you must keep ALL of your weight on your hands and your back and butt muscles must be completely relaxed. Additionally, your pelvis must not come up off the ground. A very small amount is ok, but as soon as it really starts moving, stop. That is as far as you need to go. Hold at the top for 2-3 seconds, which is just enough time to be sure you are relaxed, then lower under control with ALL of the weight on your hands.

This will be very challenging, especially for people who have not been getting to the gym to do pushups or other upper body exercises. Well, now is your chance to fix that problem! Now you will know what basic training bootcamp is like!

**NOTE:** At this point, you may back off the volume to once every 2 hours if you are making a lot of progress, and especially if you are feeling spine aching from all of the extensions. At any point, you may regress the exercises if you are too sore or feel your spine needs a break. I am demonstrating how fast you can progress the routine, but by all means you may go slower.

**Troubleshooting: The Lateral Pre-Set**

Some individuals will have a problem with the straight-on extensions as listed above. This will usually be accompanied by a lateral shift of the pelvis under the shoulders that moves away from the painful side.
If this is the case, you may create a Lateral Pre-Set position from which to do the extension movements. For more information, get Robin Mckenzie’s book, “7 Steps To A Pain Free Life” or consult with a Mckenzie-trained physical therapist or chiropractor. This step requires the assistance of a trained professional. Do not attempt on your own.

**Lifestyle Tips**

**Use McKenzie Rolls**

The McKenzie Super Roll is a fantastic tool for assisting you with maintaining your lumbar curve while sitting. Its especially useful for positions where it is particularly tough to maintain your curve such as in a car seat with bucket seats, or long drives.

It is simple to use.

You can purchase a McKenzie Super Roll and from Amazon.com.

**Rules for movement**

Since disc pain is usually worse in the sitting position, I’m sure you won’t argue much about my recommendation to get up every 60 minutes or so just to stand or move around. If you are doing your extension protocol movements every hour on the hour, this may not be necessary, but if you can only do them every two hours, then I suggest you get up and move at LEAST every hour, even if just for a few minutes. This helps pump blood into those stagnant tissues and may speed the healing process.

**Phase 2: Perform Corrective Exercise and Stretching Program**

At this point, you will want to start addressing the postural/movement imbalances that created the problem to begin with.

There are a few rules, however that must be followed:

- No standing exercises that include spinal loading (dumbbells, barbells, medicine balls, etc)

- Phase 1 protocols must remain in place, including all lifestyle instructions
Essentially, the only thing that is different from Phase 1 to Phase 2 is the inclusion of corrective exercises and stretches that restore activity to the deep stabilizer muscles in the spine.

Phase 1 exercises are beyond the scope of a PDF alone. I have created a DVD set to address this part. My DVD set, called **End Your Back Pain Now!** includes an 8 week corrective program for activating and strengthening key spinal stabilizers, that, along with the above protocol, will give back pain sufferers the tools necessary to support not only pain relief in the short term, but a long term strategy to STAY out of pain.

Sincerely,

Sam Visnic  
Neuromuscular Therapist  
Sam@samvisnic.com

**Click here to learn more about my DVD system, End Your Back Pain Now!**

**Further Information and References:**

7 Steps To A Pain Free Life. Robin McKenzie.  