Spinal Fractures

Information for patients who have sustained a spinal fracture

The following guide is designed to help you understand more about your fracture and the therapy you will receive
Therapy Services
Patient Information

Name ....................................................................................................................

Ward .....................................................................................................................

Type of Fracture ....................................................................................................

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Management Plan
The majority of spinal fractures can be treated conservatively. You may require a brace and occasionally surgery is needed. The orthopaedic team will discuss the management options with you.

Spinal Brace
Should you need a spinal brace, you will be fitted with the appropriate brace by the Therapist or Senior Clinical Nurse.

- You will be provided with written instructions about your particular spinal brace
- The brace can be taken off when you are lying flat on your back, but must be worn at all other times, including sitting up in bed
- If necessary a relative or carer can be taught how to assist you with your brace
- If you have any problems with your brace once you are at home please contact the therapist for advice (see telephone numbers on back page)

Once you are allowed to get out of bed the Therapy Team will assess your mobility and provide you with any equipment you might need. You may initially feel dizzy and weak, but this will wear off the more mobile you become. If you have stairs at home the therapy team will practice these with you prior to your discharge.

Pain Management
The orthopaedic team will work with you to ensure your pain is controlled as effectively as possible. You will be sent home with the appropriate medications but if you require more or further advice about your pain control you should talk to your GP.

Discharge Planning
The team of health professionals involved in your care will discuss your discharge with you. Where possible we will aim to get you straight back to your usual residence. You may need some support at home initially. The therapy team treating you will decide if this is necessary.
Early Exercises

Whilst you are on bed rest, you will be taught how to log roll (turn from side to side), which will help to protect your back and allow you to move in bed more comfortably. During this time you are at risk of muscle wastage and developing Deep Vein Thrombosis (DVT). Therefore we recommend you do the following exercises at least three times per day.

1. To assist good circulation
   - Move both ankles and toes up and down as much as possible.
   - Repeat x……………

2. To maintain muscle strength
   - Pull your toes towards you and push the back of your knees into the bed. Hold for 5 seconds. Repeat x……………

3. To keep your chest clear:
   - Take a deep breath in and hold for 3 seconds before exhaling.
   - Repeat 3 times followed by a cough/huff.

Additional Exercises

Core muscle activation
   - Lying on your back with your knees bent and feet hip width apart
   - Gently pull your stomach muscles down towards the bed whilst continuing to breathe normally. Hold for 5 seconds and then release
   - Practice this contraction regularly and progress to doing in sitting and standing as able.

Pelvic Tilts
   - Whilst on your back, lift your tail bone up to flatten your back into the floor/bed
   - Slowly lower back down again gently arching your lower back.
   - Repeat x………

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Bridging

- Lying on your back with your knees bent and feet hip width apart
- Slowly lift your bottom off the bed keeping your pelvis level
- Hold for 5 seconds keeping your pelvis level and then slowly lower
  Repeat x……..

Knee flexion/extension

- Lying on your back with your knees bent and feet hip width apart
- Slowly slide one foot out to straighten the knee and then return to starting position then repeat with the other leg
- Try to make sure your pelvis remains level throughout the exercise
- Repeat x……..

Mini Squat

- Holding onto a chair with your feet hip width apart, slowly bend your knees keeping your back straight
- Go down as far as you feel comfortable, then stand up tall slowly
- Repeat x……..

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Everyday Activities

Mobility
Gradually increase the amount of walking you do but avoid hills initially. Providing you are not in pain, this is an excellent form of general exercise to restore fitness after your injury.

Sitting

- Try to sit in a supportive upright chair with a cushion in your lower back.
- Avoid low soft chairs and sitting for more than 20 minutes initially as it may be uncomfortable and put excess strain on your back.
Lifting and handling

- Avoid lifting anything heavier than the weight of a filled kettle for the first 6 weeks following your injury.

Dressing

- If you have a spinal brace we recommend wearing a vest or T-shirt underneath it to protect your skin.
- Sit or lie to get dressed initially.
- The therapy team will be able to offer further help and advice on dressing.

Washing

- You will not be allowed to have a bath or bend over the bath to wash your hair for at least 6 weeks following your injury. We recommend strip washing with an appropriate stool at the sink and long handled aids.
- Depending on the type of brace you are wearing, you may be able to have a shower with your brace on using a long-handled sponge. You must then however, return to lying on the bed so that you can remove the brace and allow it to dry. Use of a non-slip mat in the shower is recommended.

Sleeping

- Try to sleep on your back if possible.
- You may take the brace off in bed but if you normally get up to use the toilet at night we recommend you sleep with the brace on.
- It may be advisable for men to use a urinary bottle at night.
- It is a good idea to take a drink to bed in a drinks bottle, rather than trying to drink from a cup lying down.
Driving
- Your consultant will inform you when you can resume driving. You should inform your insurance company about your injury and check that you are covered.
- Once you do resume driving it is advisable only to drive short distances initially.
- You should be able to travel as a passenger for short journeys (i.e. up to 30 minutes). Be guided by your symptoms but it is advisable to avoid low sports cars and only travel for essential journeys.

Household Jobs
It is important that you avoid doing any heavy housework activities initially such as hoovering. Check with your consultant prior to resuming any household activities including lifting and carrying.

Working
You are likely to need some time off work initially. Check with your consultant and employer before you return to work. You may need to modify your activities at work for a while when you return, especially if your job is active or involves a lot of driving. Please ask for a sick note, if you require one, before you go home.

Sexual Activity
You will need to check with your consultant about resuming sexual activity. Generally this is not advised for at least 6 weeks.
Contact details

If you require further advice please feel free to contact us:

Therapy Team: 01202 448179

For further general health-related information, please ask the relevant department for an Information Prescription or contact:

The Health Information Centre
Poole Hospital NHS Foundation Trust
Longfleet Road
Poole
Dorset
BH15 2JB
Telephone: 01202 448003

www.poole.nhs.uk

We can supply this information in other formats, in larger print, on audiotape, or have it translated for you. Please call the Patient Advice and Liaison Service (PALS) on 01202 448499, text 07758 272495 or email pals@poole.nhs.uk for further advice.