Vertebral Compression Fracture – Starting to Heal

You are starting to heal from a vertebral compression fracture (broken bone in the spine). These tips can reduce your discomfort and gently guide you back into your normal activities. Be sure to avoid poor posture. Use good body mechanics and maintain the normal curves in your spine.

Increasing your activity
• Do not stay still in your chair or bed. Complete bed rest will lead to further loss of bone density (makes the bone more fragile). Try to balance gentle activity with rest periods.
• Try to be up and moving in your home 10 minutes out of every waking hour at first. As you improve, gradually increase your activity.
• Resume a walking program. Wear proper shoes and start by walking a few minutes a day inside your home. Add a minute or two every few days or each week. Keep doing this until you can return to your usual walking program.
• As you walk, practice good posture. “Walk tall” and keep the normal curves in your spine.

Additional tips
• For sitting, choose a straight-backed chair with arms that offers firm but comfortable support. Avoid soft overstuffed chairs or sofas that cause you to “sink” into them.
• Review all handouts for posture and body mechanics. Using these instructions now will keep you more comfortable and reduce further pressure on the spine.

• To help reduce discomfort, try to tighten your stomach muscles before moving. Keep them tight until you complete your activity.
• “Slick” or “silky” clothing may help you pivot more easily (for example, in bed or getting in to a car). You should be careful, however, that your clothes are not so slick as to make it difficult to sit with good posture.
• The best way to move in bed is to “log roll.” Be sure you know how to do this and ask your therapist if you are not sure.
• Do not pull on a trapeze bar or another person to help you sit up, even if you have pain. The pulling movement transfers forces to your back and can lead to more pain or another fracture.
• Sleep in your bed instead of a recliner or couch. In bed, you can stretch your body out fully and there is room to change positions. In a chair, the weight of your upper body puts constant pressure on the fracture area. This can increase your pain and lead to further deformity.
• If an exercise or activity does not increase pain, then you are ready to resume it. You may notice that some soreness lingers for several weeks or months. This should not keep you from doing your activities. However, if you notice a true increase in pain during or after an activity, you are not ready to resume that activity. Slowly build on your activity as you can.
• Your doctor may have given you a corset or brace. Wear this when sitting or standing to support you, especially in the early stages of healing. Keep using it for as long as your doctor recommends.

If you are still having pain or limited activity even after following these guidelines, ask your doctor if you might benefit from some outpatient physical therapy visits to improve your mobility and/or decrease your pain.