

Sweetwater Pain & Spine

Home Exercise Handout

Lumbar Spinal Stenosis

Lumbar spinal stenosis occurs when the spinal canal in the lower back narrows, compressing the nerve roots and causing pain, cramping, or weakness in the legs — typically worsened by standing or walking and relieved by sitting or bending forward. These exercises open the spinal canal through lumbar flexion, provide immediate relief from neurogenic claudication, and build endurance through low-impact activity. Perform them consistently throughout the day, especially before and after walking.

1 Knees-to-Chest Lumbar Decompression

1–2 sets • Hold 20–30 sec • 1–3x daily

1



START POSITION

Lie on your back with both knees bent. Feet flat on the floor, arms at your sides. Breathe slowly and relax.

2



DRAW KNEES TO CHEST

Place hands behind both knees (not in front) and draw them gently toward the chest. Allow the lower back to round and flatten completely. Hold the position.

3



HOLD & BREATHE

Hold 20–30 seconds. Breathe slowly and deeply. Perform immediately before walking to pre-open the spinal canal and extend walking tolerance.

2 Seated Slump Decompression

1–2 sets • Hold 10–15 sec • Every 1–2 hours

1



START POSITION

Sit on the edge of a chair with feet flat on the floor. Hands rest on your thighs. Sit tall and relaxed. Take a slow breath in.

2



SLUMP FORWARD

Round your entire spine forward into full flexion — chin drops, shoulders round, lower back rounds fully. Arms hang between knees. Relax and breathe.

3


HOLD
10–15
SECONDS



HOLD & RETURN

Hold 10–15 seconds. Breathe slowly and deeply. Return to upright slowly, vertebra by vertebra. This gently decompresses the spine.

3 Forward Lean Walking (“Shopping Cart” Posture)

Use as needed • During walking or standing • Multiple times daily

1



WALKING POSTURE

When walking, adopt a slight forward-lean position — like pushing a shopping cart or holding a walker handle.

This positions the lumbar spine in slight flexion, opening the posterior canal and reducing neural compression during ambulation.

2

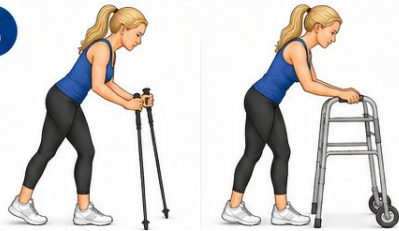


AT REST

At rest, lean forward over a countertop or fold at the hips between walking bouts.

This maintains lumbar flexion and helps keep the canal open.

3



USE ASSISTIVE DEVICES

Using trekking poles or a walker that promotes a forward-lean posture further opens the canal and significantly increases walking tolerance.

4 Stationary Cycling / Aquatic Walking

3–5× per week • 20–30 minutes • Gradually increase as tolerated

1



STATIONARY CYCLING

Places the spine in a slightly flexed, load-off position — ideal when walking is too painful.

Begin with 10–15 minutes.

Increase by 5 minutes per week as tolerated.

Lean slightly forward on the handlebars.

Maintain a comfortable pace and good posture.

2



AQUATIC WALKING

Chest-to-waist-deep water reduces axial spinal load by 50–75%, allowing longer, less painful activity without symptom flares.

Walk forward, backward, and sideways.

Use any water depth that keeps water between chest and waist.

Maintain upright posture and comfortable rhythm.

3



COMBINE FOR BEST RESULTS

Alternate cycling and aquatic walking for balanced conditioning.

Consistent, low-impact movement builds endurance and reduces stenosis symptoms.

Listen to your body and progress gradually.

■ Stop any exercise that causes sharp pain, new numbness or weakness, or worsening of symptoms, and contact our office. These exercises supplement but do not replace your provider's individualized plan.

Questions or concerns? Call Sweetwater Pain & Spine: (775) 870-1480

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