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## Therapeutic exercise in the physiotherapy treatment of lumber discectomy

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Ashe has completed five sessions of pharmacological treatment and improved but still she was having paraesthesia from her left leg to her left foot. A magnetic resonance showed a L4-L5 extruded hernia to both sides. She received five corticoid infiltrations, but paraesthesia continued and heel movements started to fail. Two weeks later, she returned to the clinic with huge pain and an exacerbation of the paraesthesia. She was referred to a spinal specialist. After consultation the specialist suggested the best course of action was surgical intervention. This was completed in the form of a lumbar discectomy (L4-L5), two days after the procedure she left hospital. After she had recuperated sufficiently from the operation, she was referred to RHB service. After 26 analgesic sessions she finished treatment but one month later pain returned and she went back to RHB. She carried out adapted and specific therapeutic exercises for lower back and left leg. A total of 47 sessions of mobilization exercises, strengthening and stretching were carried out, the final recuperation was achieved. We can conclude that analgesic physiotherapy after discectomy is essential to establish good muscle recuperation and specific and adapted lumbar muscle toning, as therapeutic exercise, is the key of the physiotherapy treatment to obtain long term and definitive results.

## **Biography**

Inés Llamas Ramos has completed her PhD from University of Salamanca, Salamanca, Spain. She develops her professional work in Salamanca. She has been Professor of the University of Salamanca, in the Department of Nursing and Physiotherapy. She has published articles about cancer and dry needling in reputed journals.

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