FITNESS & EXERCISE

How to Keep Moving When Your Back Hurts

Exercise can help chronic low back pain, but the safest starting point depends on what happened, how long it has hurt and how severe it is.

The sofa starts to look sensible

Your back hurts, and suddenly every form of movement looks suspicious. The sofa offers a persuasive alternative: stay still, protect the sore place and wait. That instinct is understandable. It is not always helpful.

Back pain is extremely common, affecting about eight in 10 people at some point. It may feel like a constant dull ache or arrive as sudden, sharp pain. Acute pain generally lasts from a few days to a few weeks; pain lasting longer than three months is considered chronic. Those are very different situations, and the exercise evidence does not apply equally to both.

Most back pain eventually goes away on its own, although that can take time. Short-term rest and over-the-counter pain relief may help, but staying in bed for more than a day or two can make matters worse. Exercise is among the options used to manage back pain, alongside hot or cold packs, medicines and other care.

That does not mean you should ignore pain or force your way through the workout you had planned. It means the choice is not simply "exercise" or "do nothing." The useful question is what kind of movement fits the pain you have-and whether you first need medical advice.

First, work out which problem this is

Exercise research offers its clearest answer for adults with chronic low back pain. A 2022 network meta-analysis included 118 randomised trials and 9,710 participants aged 18 to 65. Compared with control conditions, nearly every type of exercise studied improved both pain and disability. Stretching was the exception for pain, while the McKenzie method was the exception for disability.

That finding is encouraging, but it has boundaries. It concerns chronic low back pain, not every new ache, sports injury or painful back after an accident. Back injuries can include strains, sprains, herniated discs and broken vertebrae. They can limit movement, and their care may involve anything from icing and physical therapy to surgery.

Back pain following an injury needs medical attention. You should also contact a healthcare

professional if the pain is severe or has not improved after three days. At that point, choosing an online workout is no longer the main task. The cause and appropriate care need attention first.

The dividing line matters because "keep moving" is broad advice, not permission to diagnose yourself. Exercise may be part of care, but the kind of pain and its cause shape that care. A plan supported by trials for long-standing low back pain cannot be casually transferred to a suspected fracture or a sudden injury.

Exercise is therefore not a test of toughness.

There is no single magic movement

For chronic low back pain, the 2022 analysis compared a wide range of exercise approaches. Pilates, mind-body and core-based exercise performed best for reducing pain. Pilates, strength and core-based exercise performed best for reducing disability. Pilates had the highest statistical likelihood of being the most effective option for both outcomes.

That sounds like a winner's podium, but it is better read as a shortlist. The analysis found that most forms of physical exercise helped. Its ranking describes average results across many trials and participants; it does not identify the perfect movement for your particular back, circumstances or preferences.

The distinction between pain and disability also deserves attention. Pain is what you feel. Disability is how much the problem gets in the way of what you need or want to do. An exercise approach can matter even if it does not erase every ache, because improved ability is an important outcome in its own right.

Stretching deserves similar nuance. In this analysis, stretching did not reduce pain compared with control conditions. That does not prove that every stretch is harmful, nor does it mean stretching can never be included in a broader activity. It means stretching alone did not have the same supporting result for pain as the other exercise categories.

The best evidence is not a personal instruction

Trials answer a group question: what happened, on average, when people with chronic low back pain were assigned to different kinds of exercise? You still have an individual question: what can you reasonably begin when bending, sitting, work or ordinary movement already hurts?

Work can complicate that decision. Survey findings reported in 2019 suggested that more

than one in four working adults experienced low back pain. Physical job demands, poor supervisory support and job dissatisfaction may contribute. Among workers with back pain, between 6% and 10% had stopped working, changed jobs or made a major change in their work because of it.

If your work repeatedly aggravates your back, the exercise you do away from work is only one part of the picture. Workplace factors may also need attention. Lower-back support while sitting may help prevent some injuries, while lifting objects with your legs is another practical precaution identified in general back-injury guidance.

Exercise is therefore not a test of toughness. Pain that is severe, persists without improvement or follows an injury moves the decision into medical care. For chronic low back pain that has already been assessed, the evidence supports exercise broadly-but it does not require you to select the statistically highest-ranked option or pretend that every movement feels the same.

Make Monday's first move smaller

For the coming week, choose one evidence-supported category-core-based, strength, mind-body or Pilates exercise-as the subject of a conversation with a healthcare professional or physical therapist if you are uncertain what fits your back. If your pain followed an injury, is severe or has not improved after three days, make that conversation the first move rather than starting an exercise session.

Write down three things before you speak: when the pain began, whether an injury preceded it and which ordinary movements it limits. Those details keep the discussion attached to your actual life. They also help separate long-standing low back pain-the condition covered by the large exercise review-from a new injury that may need different care.

Then make the place where you pause as sensible as the movement itself. Use a sturdy chair with lower-back support rather than retreating to bed for a prolonged stretch. The chair is not a cure, and it does not decide which exercise is right. It simply gives you something practical to use while you begin moving more thoughtfully.

You do not need to defeat back pain in one heroic session. You need an appropriate first movement, a clear reason for choosing it and a sturdy chair with lower-back support for the pauses between.

Where this comes from



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