

Bed Rest

Information and advice for patients

Physiotherapy

You have been advised by your medical team to complete a period of bed rest following an injury to your spine. This is not unusual for patients to need to spend a period of time lying flat in bed. This is often the case immediately following the injury, to allow optimum recovery. This booklet provides information about being on bed rest and includes some ideas about ways of managing this time.

Why do I have to stay in bed?

Bed rest can be recommended for a number of reasons:

- The doctors are concerned that you have damage to the bones of your back or the spinal cord. The spinal cord is a nerve that runs down your spine and carries messages from your brain to your body and back again. If it is damaged it can bruise and swell, and moving could cause more damage. This can cause problems with how the body functions and is classed as an emergency. You may be put on bed rest until the doctors can complete a scan of your spine to assess if there is damage and decide if it needs any intervention.
- Bed rest is thought to help promote recovery within the spinal cord.
- There is also the risk of your blood pressure dropping when you sit upright from a flat position. The normal mechanism that adjusts blood pressure does not function very well after a spinal cord injury. This can mean the damaged area of the spinal cord does not get enough blood, which starves it of oxygen and can cause further damage.

If the spinal cord has been damaged it is unlikely that bed rest will lead to a full recovery, but it can bring some degree of recovery to some individuals.

What happens to my rehabilitation while on bed rest?

Rehabilitation still continues whilst you are on bed rest and you will normally see the therapists a few times a week. We will teach you bed exercises and breathing exercises (included in this leaflet) for you to practice. During bed rest, therapy helps to maintain your joints and muscles until "active rehabilitation" starts, when you are mobilised out of bed.

Can I move around in the bed?

- The amount you can move depends on the extent of the injury, so you should always follow the recommendations of your doctor.
- You will usually be allowed to move your arms and legs in small movements, but how much you will be able to turn or roll in the bed will again be dependent on your doctor.

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What will I need help with?

- You will need help from the nursing staff to roll in bed without twisting your back. They will help you to change position regularly as it can be uncomfortable staying in the same position for too long and is not good for your skin.
- The nursing staff will also need to help you roll to get on and off a bed pan to go to the toilet, and to have a wash in the bed.
- You may need help to take a drink and eat your meals, and to reach for objects like your phone or TV remote.
- It can be difficult and frustrating being reliant on others for tasks you would normally do by yourself, but it is important to protect your body at this time to prevent causing more damage and allow time for healing. Do remember that the staff looking after you in hospital are used to helping with these tasks, so for them it is a "normal" part of their job. Please don't be afraid to ask for things and do let the staff know what you need.

What can I do to occupy my time?

- Unless you have been told otherwise, you should move your arms and legs in the bed to keep the muscles and joints healthy.

Practice these exercises regularly throughout the day:

1. Ankle pumps.

1. Move your foot up and down as far as it will go.
2. This will help to improve your circulation.
3. Repeat x 10, 3 times a day



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2. Static quadriceps.

1. Lie with your legs straight
2. Tighten your thigh muscle and push your knee into the bed.
3. Hold this for 5-10 seconds
4. Relax
4. Repeat x 10, 3 times a day



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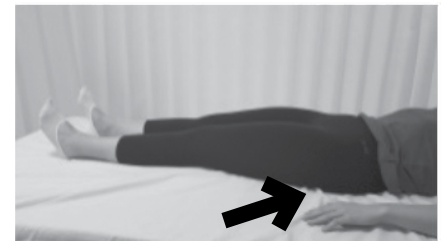
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3. Static gluteals.

1. Sitting or lying, squeeze your buttocks
2. Hold this for 5-10 seconds
3. Relax
4. Repeat x 10, 3 times a day



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- Lying flat in bed puts you at a higher risk of developing a chest infection because of the position and how the body normally clears the lungs. You should:
 1. Take a deep breath in through your nose, pause for a moment and exhale out through your mouth
 2. Take 5 deep breaths every hour or so, trying to expand your lungs as much as you can.
 3. Cough when you need to, aiming to get rid of any phlegm that is on your chest.
- You will be seen by a therapist to check you are doing these exercises.
- Keep your brain busy with some of these suggestions:
 1. Watch TV and films.
 2. Read a book, newspaper or magazine.
 3. Listen to the radio.
 4. Do puzzles and quizzes.
 5. Chat with people, either with visitors, phone calls, texts, emails, social networking websites and video calls.

What happens after bed rest?

- This depends on the outcome of your scans and what the doctors recommend.
- You may be cleared to get up and move as you normally would. If you have any difficulty with this you will be seen by a physiotherapist.
- You may be advised to wear a brace or support for a set period of time to allow for healing or for pain relief. An orthotist will measure and fit you with the appropriate support, and you may be seen by a physiotherapist to help move about with it on.
- You may be referred to a specialist hospital or treatment centre if your case requires specialist input or surgical intervention.

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Sources of Information

- The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust (2016) Information for patients coping with bed rest Midland centre for spinal injuries. Available at: <https://www.rjah.nhs.uk/media/2owfqixb/coping-with-bed-rest-leaflet.pdf> [Accessed 7th September 2023].
- National Institute for Health and Care Excellence (2016). *Spinal injury: assessment and initial management* [NICE Guideline 41]. [Online]. London: NICE. Available at: <https://www.nice.org.uk/guidance/ng41> [Accessed 16 July 2020].
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