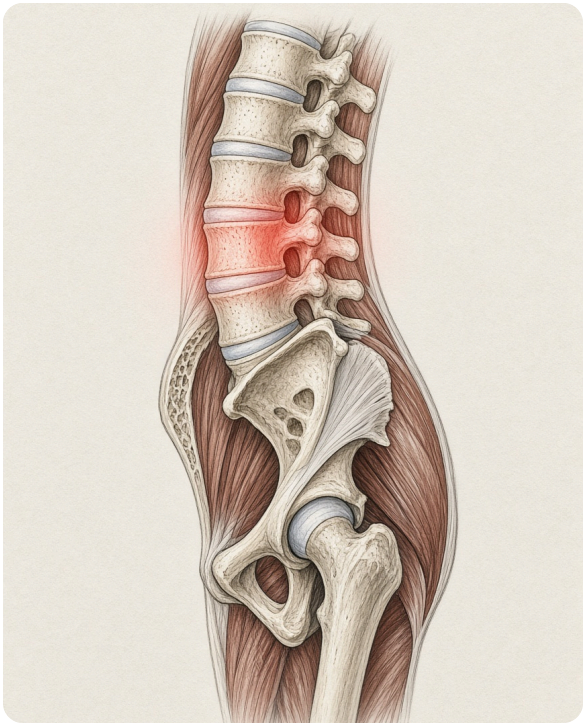
ARMIN PHYSIO



PATIENT GUIDE

Lumbar Lordosis

Notice an excessive curve in your lower back? It could be **increased lumbar lordosis.**

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Physiotherapist · arminphysio.com

What is increased lumbar lordosis?

Lumbar lordosis is the natural inward curve of your lower back. Some curve is completely normal, but in some people an exaggerated curve goes with a forward-tilted pelvis, tight hip flexors and reduced core control, and occasionally low back discomfort. Exercise can help by strengthening the core and glutes, improving hip mobility and teaching better control of the pelvis and spine.

QUICK CHECK

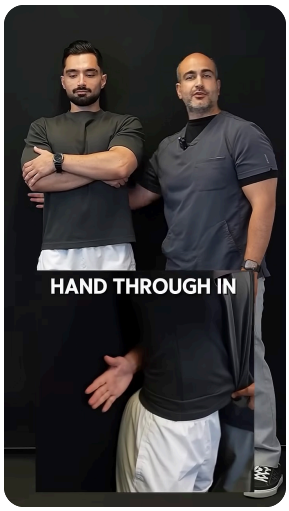
Does this sound like you?

- [ ] An **excessive curve** in your lower back in normal standing
- [ ] Heels, hips and upper back against a wall: you can **fit a hand behind your low back**
- [ ] Lying down, it's **hard to bring one leg flat** to the bed while hugging the other knee
- [ ] Your **pelvis looks tilted forward**
- [ ] **Tightness or discomfort** through the low back

If you ticked a few boxes, an increased curve could be part of the picture. Try the 3 exercises on the next pages.



Excessive curve in standing



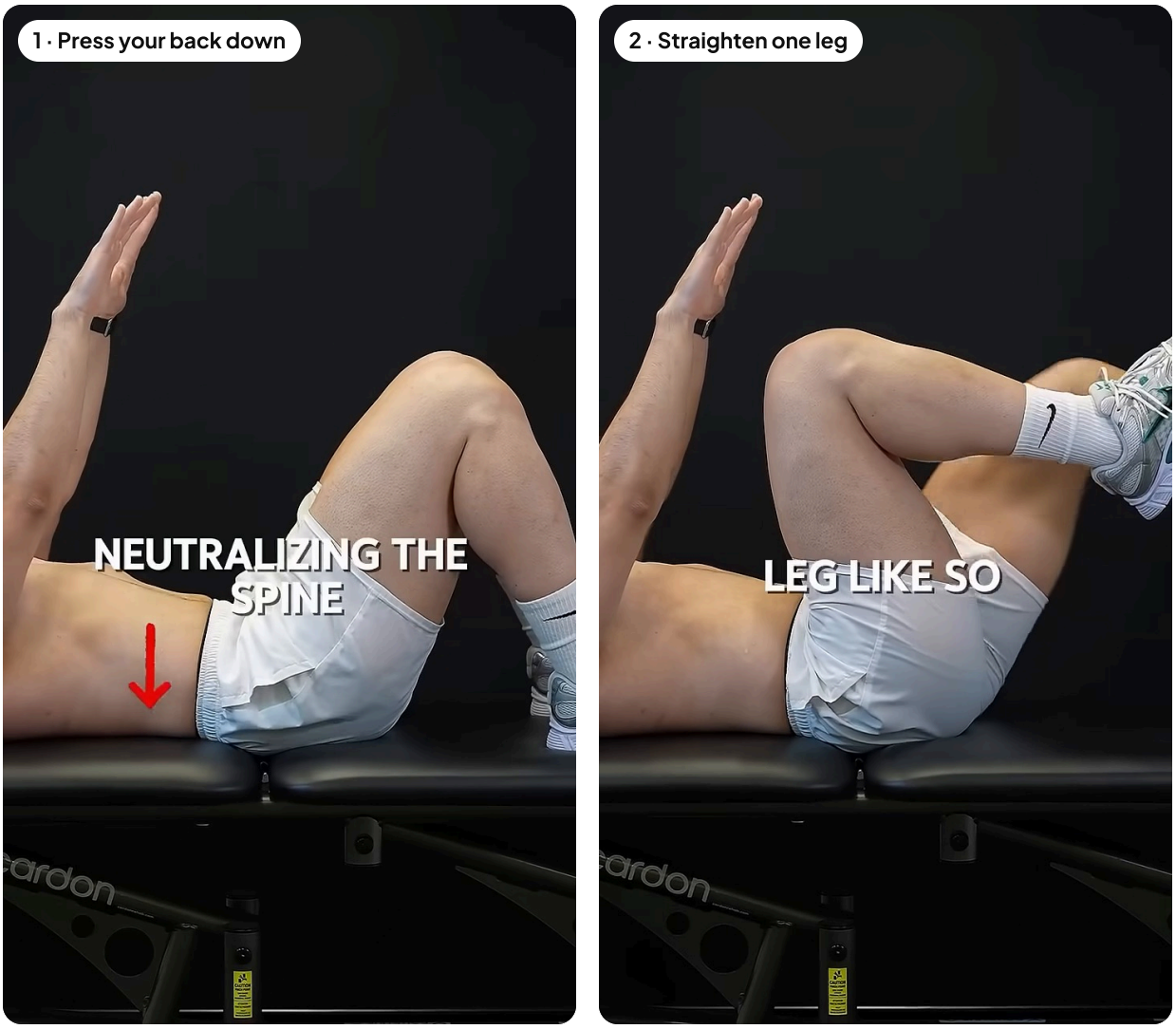
A hand fits behind the low back

YOUR 3 EXERCISES

Try these exercises

1 Lying leg extension (dead bug legs)

Builds core control while keeping the spine neutral



1. **Lie on your back** and **press your back into the bed**, neutralizing the spine.
2. **Bring your legs up** just like so.
3. While maintaining that neutral spine, **straighten out one leg** like so.
4. **Come right back**, then the other side. Repeat.

3 sets of 10–15 reps, hold **3–5 s** where appropriate

From Armin's video description

Stop if you feel sharp pain, pain that goes above about 4/10 or keeps building, or pain, numbness or tingling travelling into your leg.

2 Standing hip flexor stretch

Stretches the front of the hip



1. **Hold on to something** for a little support.
2. **Take a big step with one leg**, just like so.
3. Get a good **stretch right in the front of that hip**. **Hold it for about 30 seconds.**
4. **Come right back**, and make sure you do the other side as well.

Hold about 30 seconds each side, 2–3 times

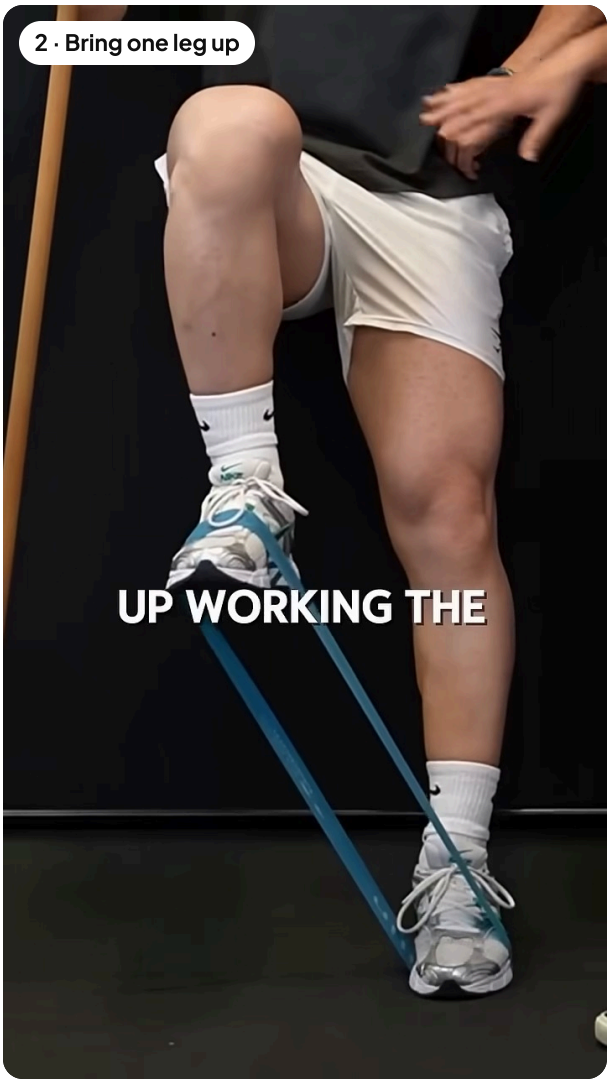
Hold from Armin's video; repeats suggested

Stop if you feel sharp pain, pain that goes above about 4/10 or keeps building, or pain, numbness or tingling travelling into your leg.

3 Wall-supported knee lift

Works the hip flexors and abdominals with the back supported





1. **Lean against the wall.** Make sure your **hip and low back are pressed firmly into the wall**.
2. From here, hold on to something for a bit of support.
3. **Bring one leg up**, working the hip flexors and the abdomen.
4. **Go straight down**, come back and repeat.

3 sets of 10–15 reps, hold **3–5 s** where appropriate

From Armin's video description

Armin uses a light loop band around the feet in the video. Start without one if that feels like a lot.

Stop if you feel sharp pain, pain that goes above about 4/10 or keeps building, or pain, numbness or tingling travelling into your leg.

DAILY ROUTINE · ABOUT 10–15 MINUTES

Put it together

01
Control
Lying leg extension, 3 × 10–15

02
Stretch
Standing hip flexor stretch, 30 s each side

03
Strengthen
Wall-supported knee lift, 3 × 10–15

Sets and reps are from Armin's video description and the 30-second hold is from his video; repeats and doing it once a day are suggestions. Keep good technique. Suggested: mild discomfort up to about **4/10** is OK. Don't push through significant pain.

Stop the exercise if you notice

- Sharp pain in your low back
- Pain, numbness or tingling travelling into your leg
- Pain that lingers or is worse the next day

Your back should stay pressed down (or against the wall) the whole time. If it arches, make the movement smaller.

SAFETY FIRST

Get checked right away if you have

- **Numbness in the groin or saddle area**, or new **bladder or bowel** changes (trouble peeing, or losing control)
- Leg **weakness that is getting worse quickly**, foot drop, or symptoms in **both legs**
- Back pain after a **fall, accident or heavy impact**
- Back pain with **fever**, feeling unwell, or **unexplained weight loss**
- **Constant pain at night** that doesn't ease with rest or changing position
- A history of **cancer**, osteoporosis or long-term steroid use with new back pain

For numbness in the groin or saddle area, new bladder or bowel changes, or quickly worsening leg weakness, **go to the nearest emergency department right away**. For the others, see a doctor promptly. If your back isn't improving after a few weeks, **book an assessment**.

FREE · STAY IN THE LOOP

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NEED MORE HELP?

Book an assessment with Armin

In clinic or virtually. See current options and times at the link.

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Disclaimer: This handout is for education only. It is not a diagnosis or medical advice and does not replace an assessment by a qualified health professional. If you're unsure whether these exercises are right for you, check with your physiotherapist or doctor first.

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