Six Week Rehabilitation Program

Before you begin your post operative recovery program, keep in mind three very important points over the six-week program:

1. Remember, every body heals at a different pace. You will heal. Be patient.
2. Listen to your body. If you experience pain or weakness, do not think twice about delaying your rehabilitation by a few days or even a week or two.
3. Don’t feel like you’re in your rehabilitation alone. Work with your doctor and/or therapist.

I advise my hernia patients to adhere to the recovery program below, which is adapted from the most current British Hernia Society Consensus Statement. It’s a sound program that when followed will result in a remarkable recovery and get you back on the ice, in the field, on the court or wherever you play—quickly and safely.

Week 1: Take it easy

- Rest. Give your wounds a chance to begin the healing process
- Walking, climbing stairs and carrying up to 20 lbs (10 Kg) is perfectly acceptable if you can tolerate them
- Resume normal daily activities

Week 2: The sports hernia rehabilitation program starts

- Begin isometric abdominal exercise, working transversalis and oblique muscles
- Add isometric hip flexors, extensors, abductors, adductors and rotators
- Start your spinal mobilization program

If you have questions on how to properly perform any recommended exercise, consult your doctor or therapist for directions. Exercises performed incorrectly can cause re-injury, putting your recovery at risk.
Week 3: Gently ramp up week 2’s exercises

- Increase walking using time as a limiting factor, increasing by 5 minutes each day
- Continue isometrics and active spinal work, 10 repetitions four times daily provided you’re experiencing no unusual pain
- At the end of week, initiate active assisted Cliniband isokinetic work in functional standing position

Week 4: Mix in functional rehabilitation activities

- Do mobility work, both active and passive
- Do stability work
- Add hydrotherapy
- Do cardiovascular exercises
- Swimming is okay
- Cycling is okay
- Initiate a running program, progressing from aerobic to anaerobic over the next 3 weeks
- Do submaximal to maximal isometric hip work (isokinetics if available) using bias towards presurgical isokinetic test results as guide
- Begin active concentric work once 25% or lower deficit between limbs

Additional functional rehabilitation activities can include those unique or complementary to your sport. Again, if you’re unsure, check with your doctor or therapist.

Week 5: Re-educate your muscles

- Return to active assisted work to re-educate concentric/eccentric functional pattern
- Progress your week 4 functional rehabilitation work
- Begin early sport/occupation-specific rehabilitation phase (for runners this could involve running forwards, backwards, cutting and sprinting)

Week 6: Return to play and work according to your functional ability

- Add a concentric and eccentric lower limb muscle workout
- Continue with manual, Cliniband and isokinetics
- Do general weights work with abdominal belt and lumbar support
- Soccer players enter full soccer-specific rehabilitation

Do not hesitate to contact Dr. Brown if you have questions by email (drbrown@hernia-surgeon.com) or call (650)703-9694.