

Back in Action

Six-pack abs may get all the glory, but a stronger spine will ensure your staying power
BY STEVE CASIMIRO

ONLY HEAD COLDS KEEP more people from work than back pain. Half a million Americans go under the knife annually, but conventional wisdom on back health is proving to be more conventional than wise: A 2006 Dartmouth Medical School study showed that herniated disk procedures, the most common back operations in the U.S., are no more effective than noninvasive treatments.

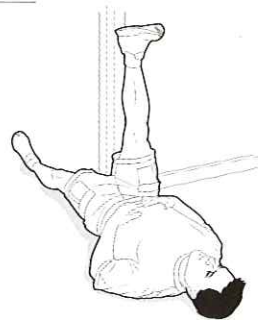
Like 80 percent of my fellow adult *Homo sapiens*, I suffer sporadic back pain. Mine is serious enough to keep me off skis, off the trail, or out of the water two or three times a year. Instead of continuing to wince and whine, I resolved to visit the Aspen Back Institute (aspenback.com) in search of a solution that didn't involve scalpels or the caprice of my insurance company. The innovative two-year-old Colorado clinic (which counts skier Bode Miller and model Elle Macpherson among its clientele) hopes to stem a dramatic increase in back surgeries with such basic techniques as, well, exercise. In fact, some 95 percent of ABI clients—many who'd been told they needed surgery—found recovery through strength training, stretching, massage, and stress reduction.

At ABI I was put through the paces on a hulking MedX back-strength tester. Convinced my performance was a feat of spinal fortitude, I was chagrined to learn that not only were my back muscles weaker than average, they weren't even what ABI considers minimally acceptable. And my spirits plummeted further when my spine-stabilizing transverse abdominal muscle was rated a miserable two out of ten. A flexibility assessment and posture analysis confirmed that I wasn't hopeless—just rubbery. The understructure supporting my spine was more like popsicle sticks than steel. For all my daily cardio exercise, strong legs didn't mean a strong back. But, says ABI founder Clint Phillips, "twenty minutes of back-specific exercise a day makes a critical difference." Sure enough, after six months of dorsal training, I noticed a marked improvement. Stick to ABI's plan (see sidebar) and you'll up your odds of staying outdoors—and out of the operating room.

{ \$15 billion is spent annually on treatment of lumbar pain in the U.S. alone.

THE WORKOUT

■ GET SOME BACKBONE with this at-home regimen. Targeting the weak points for 20 minutes a day will help keep the surgeon at bay.



THE STRETCH

Relieves pressure on spine

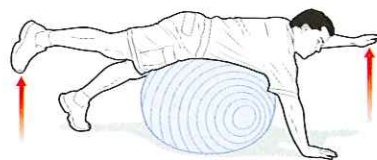
Lie on your back in an open doorway. With your left leg flat on the floor, straighten your right leg against the doorjamb (you should feel the stretch in your hamstrings). Hold for 30 seconds. Switch legs and repeat.



THE SQUEEZE

Develops core strength

Lie on your back, knees bent, feet on the floor. Place your palms beneath your lower back, take a deep breath, and flatten your back against your hands. As you exhale, draw in your navel and raise your pelvis. Hold for ten seconds. Repeat 12 times.



THE EXTENSION

Strengthens lower back

Lie over an exercise ball, face-down, with both legs straight. With your right hand on the floor for balance, raise your left arm and your right leg for three seconds. Keep your lower back contracted (and glutes relaxed). Repeat 20 times, alternating sides.