


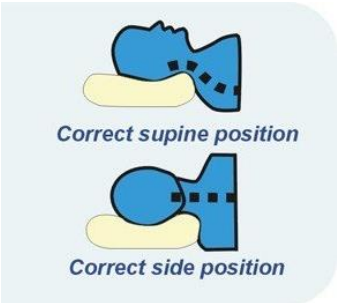

SLEEP POSITIONS FOR SPECIFIC CONDITIONS

Condition	Sleep Position	Relevance
Osteoarthritis of the lower back (Facet Joint)	Sleep on your side with your knees curled up in the foetal position. Alternatively, sleeping in a reclining chair or an adjustable bed that allows the head and knees to be elevated is ideal. (Figure 1)	Helps to open up and relieve pressure through facet joints of the spine.
Degenerative Disc Disease	Sleep on your stomach using a relatively firm mattress and place a pillow under the stomach and hips. Back sleepers may find placing a pillow beneath their knee's to be beneficial. (Figure 2)	Reduces compression of the discs at the back of the spine.
Hip Bursitis (inflammation of fluid filled sac on outer hip)	Side sleepers can find relief by placing a pillow between their knees. Furthermore, a softer mattress with padding on top can help provide some relief. (Figure 1)	This reduces contact stress on the bursa.
Bulging or prolapsed lumbar (lower back) disc	Variation exists depending on position of the prolapse. <i>Central disc bulge</i> – sleep on your stomach <i>Lateral disc bulge (to the side)</i> – sleep on your side in the foetal position. (Figure 1)	These positions minimise compression on the discs of the spine.
Pregnancy	After the fifth month try to avoid sleeping on your back and stomach. Side sleeping is recommended, preferably on the left hand side. Propping a pillow under your stomach or between your knees can assist with comfort, and using an extra-long pregnancy pillow can prevent rolling back onto your stomach or back. (Figure 3)	Sleeping on your back puts pressure on the blood vessels returning blood to the heart. Sleeping on your stomach can put pressure on your expanding uterus. Lying on your left can reduce pressure on your liver and improve circulation back to the heart.
Thoracic (mid back)/rib dysfunction	Sleep on your side (on the opposite side to the dysfunction), or on your back. Try to avoid tucking your arms underneath the pillow when sleeping on your side. Instead, try hugging a pillow. (Figure 3)	Curling your arms under the pillow can increase tension in the front of your neck and cause compression neural supply down your arms. Sleeping on the side of a rib dysfunction can put pressure through the rib joints
Acute facet sprain (neck)	Maintain a neutral spine by ensuring your chin is not protruding too far forward or back. Using an appropriate pillow is essential for this. In pain persists, sleeping on your back with an increased pillow height may provide some relief. (Figure 4)	Keeping the chin and head in a neutral position allows the muscles of the neck to relax.
Chronic neck pain (degenerative)	Always position your pillow beneath your head and neck, not your shoulders. The space between your chin and top of your shoulders should be completely supported. You can also position a small rolled up hand towel under the curve of the neck for additional support. (Figure 4)	Supporting the neck with a pillow reduces the over-activation of the shoulder muscles (upper trapezius) which is a common region of pain and tenderness amongst patients. Using a hand towel can help maintain the normal lordosis (backward curve) of the neck.

REFERENCE FIGURES

Figure 1	Sleep Position	Condition Assisted
	<ul style="list-style-type: none"> • Side sleeping • Legs in foetal position • Pillow between knees 	<ul style="list-style-type: none"> • Osteoarthritis of the lower back (Facet Joint) • Hip Bursitis (inflammation of fluid filled sac on outer hip) • Bulging or prolapsed lumbar (lower back) disc
	<ul style="list-style-type: none"> • Back sleeping • Pillow beneath knees 	<ul style="list-style-type: none"> • Degenerative Disc Disease
	<ul style="list-style-type: none"> • Side sleeping • Pillow propped under stomach & between knees • Hugging pillow 	<ul style="list-style-type: none"> • Pregnancy • Thoracic (mid back) / rib dysfunction
 <p>Correct supine position</p> <p>Correct side position</p>	<ul style="list-style-type: none"> • Pillow beneath head & neck, not shoulders • Space between chin & top of your shoulders completely supported 	<ul style="list-style-type: none"> • Acute facet sprain (neck) • Chronic neck pain (degenerative)

*Talk to your GP or Osteopath for further information about these conditions

*Talk to your Osteopath about the difference between memory foam and latex pillows, and whether a contour would be useful for you.