



Post-Natal Exercise and Advice



Physiotherapy Department

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www.nhsggc.org.uk/obstetricsphysiotherapy

Introduction

This exercise and advice programme is designed to help:

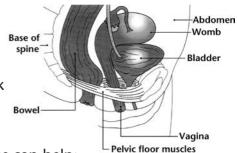
- promote healing and comfort
- prevent back or pelvic aches and pains
- prevent bladder, bowel and prolapse problems
- improve your fitness and well-being

Your physiotherapist will explain the exercises more fully, and this leaflet will act as a reminder when you go home. Once you have learned this programme it is easy to do and takes only a little time each day. Try to find time to do it every day, and start now.

Pelvic Floor Muscles

Where are they?

They are located underneath your bladder, bowel and womb. They are attached like a hammock between the pelvic bones.



What do they do?

Strong healthy pelvic floor muscles can help:

- Prevent leakage from bladder and bowel.
- safeguard against prolapse.
- increase pleasure during sexual activity.
- reduce discomfort and swelling.
- promote healing.

Following Pregnancy and Birth

- the pelvic floor can be weaker and unable to function as described above.
- to restore strength and endurance start pelvic floor exercises once you have passed urine 3-4 times after the birth of your baby or 3-4 times after a catheter has been removed.
- Pelvic floor exercises are safe to practise if you have stitches, start gently.

Pelvic floor exercise

Lie, sit or stand with your knees slightly apart. Imagine that you are trying to stop yourself from passing wind and at the same time trying to stop your flow of urine. The feeling is one of 'squeeze and lift', closing and drawing-up at the back and front passages. This is called a pelvic floor contraction.

Do not:

- hold your breath
- squeeze legs together
- tighten buttock muscles
- practise this exercise while passing urine

For comfort, tighten pelvic floor muscles before coughing, sneezing or moving.

Design your own pelvic floor exercise programme

Gradually build up:

- strength
- endurance
- co-ordination

	First,	find	your	'starting	block'
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Thist, into your starting block
Tighten your pelvic floor muscles as previously described and hold for as many seconds as you can (maximum of 10 seconds).
How many seconds can you hold this contraction?
Release the contraction and rest for four seconds, then repeat as many times as you can (maximum of 10).
How many times can you repeat this?
Now perform the basic pelvic floor exercise but squeeze and lift quickly and immediately let go and fully relax. This is called a fast
contraction and will help your muscles react quickly when you laugh, cough, sneeze, exercise or lift.
How many quick contractions can you do? (maximum of 10)
This becomes your 'starting block'.

- Next Repeat 'starting block' four to six times each day.
 - Link with feeding or other activities to help you remember.
 - 'Starting block' will gradually change. Hold time and repetitions will increase.
 - Continue to include pelvic floor exercises as part of daily routine, for life.

Problems

Speak to your GP, physiotherapist or midwife if you are worried.

Comfortable Position for Opening Bowels

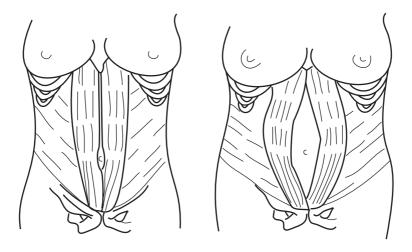
- When sitting on the toilet make sure your feet are on the floor or foot rest. Relax and give yourself plenty of time.
- When moving your bowels you may find that some extra support will make you more comfortable. Try holding a sanitary towel firmly in front of your back passage maintaining even pressure.
 Supporting a wound with a folded towel can also help.
- Do not strain.
- Breathing out as you move your bowels or pass urine may help.
- The ideal position is shown in the diagram.



Abdominal Muscles

Why Exercise?

- These muscles are stretched by pregnancy.
- They help to support and protect your back.
- For some women pregnancy can cause a widening of the abdominal muscles, commonly known as **DRAM**-Diastasis of the Rectus Abdominus Muscle.
- This can occur due to the expanding size of the tummy and the effects of hormones that are produced in pregnancy.



Abdominal widening reduces the strength of the abdominal wall and can contribute to low back pain and pelvic pain.

A small amount of widening of the abdominal muscles, three fingers wide is common after most pregnancies and is not a problem. But if:

- The gap is more than four fingers wide, or
- A visible small bulge protrudes at your midline
- Your fingers sink deeply into your abdomen

then you need to take a few precautions during exercise and other activities.

Factors that may increase the risk of developing abdominal diastasis include:

- Twin pregnancies or larger babies.
- Petite women.
- Poor posture.
- Stretching in previous pregnancies.
- Poor abdominal muscle tone.

How to check if you have Diastasis of the Rectus Abdominus Muscle (DRAM)

- Lie flat on your back with your knees bent and feet flat on the bed.
- Place 4 fingers on your abdomen above your tummy button.
- Raise your head and shoulders slightly off of the pillow.
- You will feel the two abdominal muscles coming together against your fingers; this is the size of your gap.
- When the gap has reduced there will be no obvious gap and your fingers will bounce out when checking.

Advice

- Always get out of bed by bending your knees and gently tightening your tummy muscles as you roll on to your side. Place your legs over the side of the bed while pushing up with your arms. Do the reverse to get into bed. Avoid a 'sit-up action'.
- Minimise activities which involve twisting the body.
- Draw in and hold your tummy muscles when lifting your baby.
- Avoid unnecessary heavy lifting.
- You may need tubi-grip support which the physiotherapist will give you. Wearing good supportive underwear will also support the abdomen.

Exercises

Deep Abdominal Exercise

Lie on your side as shown in the picture.



- Place your hand on your lower abdomen between your tummy button and pubic bone, breathe normally and let your tummy sag.
- Breathe in gently to prepare. As you breathe out draw in the lower part of your tummy towards your back, then relax.
- Repeat, but keep your muscles drawn in while you continue to breathe. Aim to hold for a count of 6 seconds. Feel your lower tummy pulling in under your hand.

Progress

- Try this exercise when sitting and standing.
- Gradually increase the length of time holding in and the number of repetitions (10 seconds, 10 times).
- Hold your tummy in when walking, standing, lifting and carrying baby.

Pelvic Tilt

- Lie on your back with your knees bent. Place your hand on your lower abdomen.
- Tighten your deep abdominals as in previous exercise.
- Keep pulling in your deep abdominal muscles, tilting your pubic bone towards your chest and flattening the small of your back into the bed. Hold for 6 seconds then slowly release.
- Keep breathing normally throughout.



Note

- If abdomen bulges out under your hand do not continue. Practise only deep abdominal exercises for a few more days, then try the pelvic tilt again.
- Try other positions; sitting, standing or side-lying.
- This exercise may help to ease backache, after pains and wind.
- Do not try exercises such as sit-ups or lifting both legs up while lying on your back.
- Ask your physiotherapist for advice on advancing your abdominal exercises or check the web-site.

Care for your back

Your back is under increased strain for 5 to 6 months after the birth.

Why?

- During and after pregnancy your body is affected by hormonal changes. These can affect your joints, making them more flexible and at risk from strain or injury.
- Your abdominal and pelvic floor muscles are weaker than normal. They do not provide as much support for your back.
- Many of the activities involved in caring for your baby carrying, feeding, bathing - can put strain on your back.

Early Days

To get in and out of bed:

- bend both knees.
- roll onto your side.
- push up to sit as you allow your legs to fall over the side of the bed.
- reverse above procedure to go in to bed or crawl onto bed on hands and knees.

When Lifting

- Bend from the knees to go down.
- Brace the pelvic floor and deep abdominal muscles before you rise.
- Hold the load close to the body.
- Breathe out before you lift.
- Lead with your head.



Feeding

- Get comfortable before you start by placing a support at your lower back.
- Try a pillow on your lap.
- If breastfeeding the lap pillow may not be required.
- Try a footstool under your feet and avoid crossing your legs.





Nappy Changing and Bathing

- Work at waist height.
- Stand at work surface or chest of drawers.
- Have everything you need handy.
- Never leave the baby unattended on a high surface.

Car Seats

- Try not to carry baby in car seat.
- If you must, use both arms and hold seat close in front of you.

Further exercise

Remember

- Listen to your body.
- Work within your limits.
- Wait at least until your post natal check before returning to sport.
- Avoid high impact exercise for 3-6 months e.g. running, gym, classes, weights.
- Try to go out for a walk each day. Gradually increase distance and speed to improve your fitness.
- Ask the physiotherapist for further advice. This can be a useful web-site for further exercises www.POGP.csp.org.uk
- A good physiotherapy app to support pelvic floor muscle exercises: www.squeezyapp.com

Postnatal Problems?

Contact your local Women's Health Physiotherapist for advice:

- Back, pelvic pain or DRAM up to 6 weeks postnatally (Beyond 6 weeks contact your local general physiotherapy department).
- Bladder or bowel problems up to 3 months postnatally (Beyond 3 months contact your General Practitioner).

Local Women's Health Physiotherapist details:

Cowal Community Hospital 01369 708 340
Inverclyde Royal Hospital01475 504 373
Lochgilphead
Oban
Princess Royal Maternity 0141 201 3432
Queen Elizabeth University Hospital0141 201 2324
Royal Alexandra Hospital 0141 314 6765
Vale of Leven Hospital 01389 817 528

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