# **Patient information**



# Pelvic Health Physiotherapy Post Natal Information and Exercise Sheet

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# **Congratulations**

Congratulations on the birth of your baby. The Pelvic Health Physiotherapy Team would like to encourage you to start simple post-natal exercises following your delivery. The exercises suggested are to improve your wellbeing and regain physical strength safely as a new mother.

#### **Circulation / Posture**

- Elevate your feet if they are swollen. Move your feet and ankles up and down briskly ten times every thirty minutes, to keep the blood flowing.
- Avoid sitting with your legs or ankles crossed, and standing still for long periods of time.
- To avoid back ache try to stand tall with your weight in your heels and avoid slumping of the shoulders. When sitting down, support your lower back with pillows, and rest your feet on a footstool when feeding your baby. Try supporting your neck/shoulders by placing pillows under the arm of which you are holding the baby.

### Getting in and out of bed / rest

- Always roll on to your side with your knees together and gently push yourself up with your arms – do not sit directly forwards to get up while your abdominal muscles are weak, as this can strain your lower back.
- It is important to rest regularly throughout the day and night. Use pillows for support. Always accept any offers of help and support from family and friends, to enable you to have some good quality rest within the first 6 weeks.

#### **After a Caesarean Section**

- Follow all of the information above. However, you will be more tired as you have had major abdominal surgery. Take regular pain relief for as long as you need it.
- Support your wound by holding a pillow or small towel over your wound if you need to cough, sneeze or open your bowels.
- Avoid any activity that causes abdominal strain and do not lift anything heavier than your baby for the first six weeks.

#### **Post-natal exercises**

Gentle exercise is advised up to six weeks postnatally (e.g. walking, pelvic floor exercises, pelvic tilts, abdominal hollowing and knee rolling). At six weeks you may be ready to introduce low impact exercise gradually (e.g. swimming, yoga and Pilates).

With regards to returning to impact exercise we recommend waiting until you are at least 12 weeks postnatal. This is due to an increased risk of vaginal prolapse following pregnancy and childbirth. If you are concerned about this please speak to your midwife, health visitor or GP.

Please refer to the general guidelines below for further details on returning to running and exercising postnatally;

<u>Physios' postnatal running guidance recognised and aligned with government advice | The Chartered Society of Physiotherapy (csp.org.uk)</u>

Physical activity for women after childbirth (birth to 12 months) (publishing.service.gov.uk)

#### Pelvic floor exercises

Your pelvic floor muscles have given you support throughout your pregnancy and may be weaker due to the extra weight carried during pregnancy and labour. It is important that pelvic floor exercises are completed by all women throughout life, regardless of your type of delivery. By exercising these muscles, you can help prevent future weakness which can lead to incontinence and prolapse.

After a vaginal birth it is normal to feel discomfort and your bladder function may take a number of weeks to return to normal. Try and start your pelvic floor exercises as soon as you can after delivery but you must only do so within comfort and so they must not cause you any pain. This will help improve circulation and muscle function. You will be more comfortable lying down or sitting on a soft cushion to start with. If you have a catheter you must not begin pelvic floor exercises until it has been removed.

# How to exercise your pelvic floor

Imagine that you are trying to stop yourself from passing wind and the flow of urine. This feeling of 'squeezing and lifting' or squeezing and drawing inwards is called the basic pelvic floor contraction. Try exercise in different positions: lying, sitting or standing. You will need to do fewer than the numbers outlined below if you feel discomfort or if your muscles tire quickly when you do your exercises.

Do not tighten your buttocks/ thighs or hold your breath as you work the pelvic floor muscles. Ensure the muscles 'let go' and relax fully when you stop tightening.

#### Your home programme

Aim to complete one set (long squeezes and short squeezes) of pelvic floor exercises whenever you feed your baby. At six months post-delivery, aim to continue your pelvic floor exercises at a maintenance level of one set daily.

If you have a catheter, wait for this to be removed and you are passing urine normally before commencing your pelvic floor exercises.

Work in a comfortable position and try different positions (lying, sitting and standing).

#### Long squeezes

Tighten your pelvic floor muscles, hold them as tightly as you can for 5 seconds, then release and let them fully relax for 5 seconds. Repeat this squeeze and relax sequence between 3-10 times until you feel the muscles tire.

Over the next 3-6 months try to gradually increase to a 10 second hold.

#### Short squeezes

Pull up the pelvic floor muscles quickly and tightly, then immediately let go fully. Aim for 10 repetitions in a row if you can but if this is too much then just start with 2 or 3 and gradually build up from there.

During a cough, sneeze or during lifting activities, always tighten your pelvic floor to support the pelvic organs.

If you experience any abdominal or pelvic pain during or after exercising these muscles please discuss this with your midwife, pelvic health physiotherapist or general practitioner.

#### **Abdominal exercises**

# Abdominal hollowing (Core exercise)

Your abdominal muscles form a natural corset supporting your back and internal organs. Start to exercise and strengthen them as soon as possible. These exercises will prevent or relieve backache. The deep abdominal muscles often work at the same time as the pelvic floor muscles.

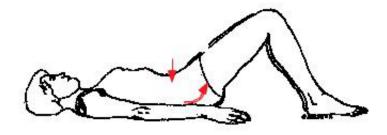
To exercise your deep abdominal muscles lye on your back with your knees bent. Take an in breath and as you breathe out gently draw in your lower abdominal muscles (imagine you are drawing your belly button towards your spine)



This should be a small movement. Repeat a few times and as you feel more confident with this exercise you can aim to hold the contraction for up to 10 seconds and aim to repeat up to 10 times, three times a day. You may prefer to do this exercise lying on your side or sitting up. You can gradually start using this hollowing movement with your normal daily activities such as lifting, bending or walking.

# Pelvic tilting

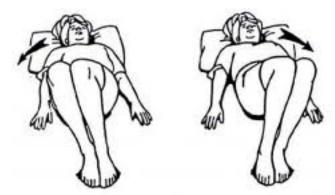
Lying on your back with your knees bent, draw in your lower abdominal muscles and gently tilt your pelvis backwards flattening your lower back into the bed and curling your tailbone upwards. Repeat a few times and as you feel more confident and comfortable with this exercise you can aim to repeat up to 10 times, three times a day. This will help to reduce back ache.



# Knee rolling

Lying on your back with your knees bent. Draw in your lower abdominal muscles and gently rock your knees left to right within a range of comfort. Repeat a few times and as you feel more

confident and comfortable with this exercise you can aim to repeat up to 10 times, three times a day. This is an exercise to clear wind and ease lower back ache.



#### **Bladder and bowel**

Make sure you empty your bladder regularly especially if you have had an epidural. If you cannot empty your bladder, inform your midwife immediately. Do not try to stop urinating mid flow as this may affect normal bladder emptying. If you experience any problems with regaining bladder or bowel control please speak to your family doctor at your post-natal check to discuss a pelvic physiotherapy referral.

Some women experience constipation after delivery. Straining puts pressure on the pelvic floor muscles and can weaken vaginal tissues. Ensure that you have a balanced diet and adequate fluids. The following tips may be helpful in avoiding straining.

Sit comfortably on the toilet with your legs slightly apart. Check that your knees are higher than your hips. A foot stool may help especially if your toilet seat is high. Rest your elbows on your knees and try breathing out slowly as you bear down to empty your bowels. You may want to provide some extra support while you empty your bowels by holding a sanitary towel or wad of toilet paper firmly over the tissue in front of your back passage.

# Further sources of information/post natal exercise

Please look at the pelvic, obstetric and gynaecological physiotherapy website (www.pogp.csp.org.uk) for further leaflets that have further important advice:

- Exercise and Advice after pregnancy
- Fit for the future
- Pelvic floor exercises (for women)
- The Mitchell Method of Simple Relaxation
- Improving Bowel Function

If you have any queries about the exercises and returning to activity please contact our booking office on 0300 131 4700 and request a contact with pelvic health physiotherapy. For any other medical concerns please contact your GP.

#### Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

#### Reference

Pelvic Health Physiotherapy Department

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Responsible clinician/author: Pelvic Health Physiotherapy Team

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