

## General Stretches

These exercises may be used to relieve some common aches and pains experienced during the post natal period.

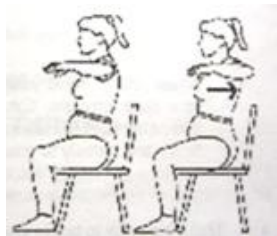
### **Pelvic Roll**

Lying on back with knees bent, keep knees and feet together, roll knees to left and right - just as far as is comfortable to start with, gradually increasing the movement each day until lower knee touches the floor on each side.



### **Upper Back Extensions**

Sitting or standing upright, raise arms to shoulder height, out to sides. Squeeze shoulder blades together. Hold 30 seconds. Relax. Repeat 6 times



### **Neck Side Flexion**

Sitting upright, gently tip your head towards one shoulder. Once you start to feel a stretch stop. Hold this position for 30 seconds. Relax. Repeat 6 times.



# Women's Health Physiotherapy



*A guide to post natal recovery*

Physiotherapy Department  
Swan Hill District Health  
P.O. Box 483  
Swan Hill, 3585  
ph—(03) 5033 9390

Publication Date: April 2011



## Congratulations!

What an exciting time for you and your family as you welcome a new little person into your lives.

During this amazing time, it is important to remember that pregnancy and birth, while completely natural, can cause many changes in your body. This booklet contains information for mothers following both vaginal and caesarean delivery. Please don't hesitate to contact the following departments if you need further information or assessment.

### Physiotherapy Service

Swan Hill District Health (8.30-4.30 Mon to Fri)  
Ph: 5033 9390

### Specialist Continence Physiotherapist

Swan Hill District Health  
Ph: 5033 9390  
Stephanie Kennedy

You will require a 6 week check-up with the physio if you have had:

- \* 3<sup>rd</sup> or 4<sup>th</sup> degree laceration
- \* A large baby ( $\geq$ 4000g)
- \* Instrumental delivery (forceps or ventouse)
- \* Prolonged 2<sup>nd</sup> stage labour (>2hrs)

This appointment will be made before discharge.

Anyone can access this service and is welcomed to make an appointment by contacting the department.

### Continence Nurse

369 Campbell St, Swan Hill.  
Ph: 5036 1908  
Jodie Kerr (Bendigo Health Care Group)

## Feeding Your Baby

Always try to sit up straight in a high, well supported chair rather than sitting in bed. Place a rolled up towel (only about 5-6cm diameter) in the hollow of your back for support and try to keep your shoulders relaxed.

A pillow on your lap may be useful to support the weight of the baby. You might like to try different thickness pillows or even a tri pillow until you find what suits you best.



Sit in a comfortable chair with a good back support particularly when feeding your baby.

Poor feeding postures can lead to shoulder, back and neck soreness

In the early days, especially after a caesarean delivery it may be more comfortable to breastfeed while lying on your side in bed rather than sitting upright.

## General Activity

Avoid high impact activity (ie high impact aerobics, jogging or horse riding) and contact sport for the first 2-6 months. This is because hormone changes can cause ligament laxity.

Low impact activity including brisk walking and swimming can be resumed when you feel comfortable.

When walking with your pram try to ensure your elbows remain bent in order to allow your body to be as upright as possible and reduce the pressure on your lower back.

Please ensure that your vaginal bleeding has stopped and any wounds are well healed prior to swimming.

## Practical Tips For Home

Pelvic tilt and abdominal bracing exercises are important for maintaining a good posture and preventing back ache. It's also very important to be aware of the postures you use and to get into good postural habits related to lifting and carrying.



*Try to make your standing work surfaces about waist or elbow height*

Try to avoid sudden or repetitive movements. Also try to bend your knees when picking things up from the floor. Perhaps try to alternate standing tasks with seated tasks.



Stand 'tall' with your stomach muscles tucked in and your bottom tucked under. Imagine a string pulling you up as tall as you can be from the crown of your head.

For the first 2 weeks after delivery 'stand tall' each time you get upright out of a chair or bed. This will help you to return to good posture more quickly. Another tip can be to stand upright against the wall, with your heels, bottom, shoulders and back of your head touching the wall each time you go into your own bedroom.

When lifting, bend your knees and keep your back straight, tighten your stomach and pelvic floor muscles and hold the object firmly and closely to your body.

Try not to lift anything heavier than your baby for the first 4-6 weeks, but always remember to 'brace' before bending or lifting, especially if you have a DRAM greater than 3cm.

### **Be Particularly Careful With:**

Laundry – only carry a small amount at a time

Groceries – Ask at checkout for bags to be packed lightly

Baby Bath – Place it where you want to use it first, and then fill/empty it using a jug.



## First 48-72 hours

### **Rest**

Lie flat for at least 30 minutes twice a day. This will help to minimize discomfort, reduce swelling and take extra weight off your pelvic floor and lower abdominal muscles. Try to rest whenever your baby is sleeping. Resting lying on your stomach with a pillow under your hips can also take weight off a sore perineum.



### **Ice**

Following a vaginal delivery or labour, ice will help to reduce pain and swelling around the perineum and is crucial in the first 72 hours. Ice should be placed inside your pad for 20 minutes every 2 hours.

### **Compression**

Firm supportive underwear will help to support the perineum and lower abdominals and reduce pain and discomfort. This can also help to start the healing process. Control briefs or bike pants can and should be worn for up to 6 weeks. As a guide, these should be two sizes larger than your pre-pregnancy size. Also, sitting on firm chairs and mattresses is important to compress the area. Sitting on a ring cushion is NOT recommended.

### **Exercise**

Pelvic floor and deep abdominal exercises will help you return to your pre-pregnancy shape and assist with healing around any stitches you may have. These can be safely started one to two days following the birth of your baby, provided there is no increase in pain. These are outlined on the following pages.

## Protection

It is important after giving birth, either vaginally or by caesarian section that your abdominal and pelvic floor muscles are not subjected to high increases in pressure while they are healing. Getting out of bed and using your bowels are two situations in which this pressure can be increased.

### Getting in and out of bed safely

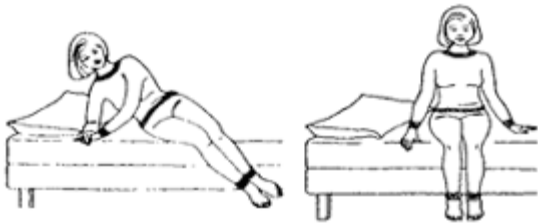
The most comfortable, and the best way for you to get into and out of bed is to log roll.

#### How to log roll

- \* Bend your knees and roll onto your side. Keep your shoulders and hips in line.



- \* Slide your feet over the side of the bed and push yourself up using both of your hands in front of your body.



- \* Do the same in reverse to get into bed.

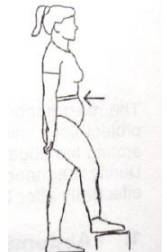
## Abdominal Exercises

### 3. Exercise Progression

Gradually increase the level of difficulty for the abdominal muscles by bracing them and holding in the following positions. Commence these exercises as you feel able, using the timeline as a guide only.

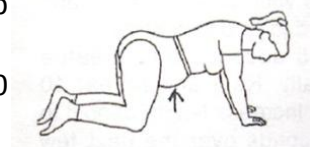
#### From Day 3 or 4

Stand with one foot raised on a step or block. Tighten lower abdominal muscles, flattening your tummy towards your spine. Hold 10 seconds. Repeat 10 times.



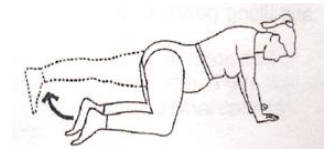
#### From Week 2 or 3

Kneeling on all fours, pull tummy muscles up towards your spine. Hold 5 seconds. Repeat 10 times. Gradually increase hold to 10 seconds.



#### From Week 3 or 4

Increase the level of difficulty in the four-point kneeling position by raising one leg (or one arm) whilst holding the abdominal muscle contraction.



#### From Week 4 or 5

Increase the level of difficulty in the four-point kneeling position by raising one leg (or one arm) whilst holding the abdominal muscle contraction.



**NOTE:** These exercise progressions are only to be completed once your DRAM is less than 2cm

## Abdominal Exercises

The most important function of your abdominal muscles is to stabilize and protect your spine and to support your internal organs. These muscles wrap around the abdomen like a corset and protect the spine against injury and pain.

During pregnancy, these muscles are highly stretched and so for them to work effectively after birth, it is necessary to restore their strength and contractility.

### 1. **Abdominal Bracing**

Tighten your tummy muscles by pulling your belly button in and upwards towards your spine. Hold 5 seconds and breathe normally. Rest and repeat 10 times. Increase the length of the hold and hold up to 10 seconds over the next few days.



### 2. **Pelvic Tilt**

Tighten tummy muscles as above, then flatten your lower back, tucking your bottom under and tilting pelvis towards your ribs. Repeat this exercise 5 times, holding 2-3 seconds while breathing normally. Gradually increase the number of exercises to 10 repetitions and then try to hold 10 seconds.



This exercise can also help relieve wind pain or

**NOTE: Sit-ups are not recommended for at least 6-8 weeks**

## Healthy Bladder and Bowel Habits

Try not to use your bowels for the first 48 hours, as this can put a lot of pressure on your pelvic floor and abdominal muscles. When you do empty your bowels, you may need to use a stool softener as it is important that it is not difficult or painful to pass.

To avoid constipation and straining, remember to:

- \* Drink between 1.5 and 2 litres of water each day
- \* Avoid drinking too much caffeine or alcohol.
- \* Eat plenty of high fibre foods (eg. Fruits and vegetables).
- \* Exercise regularly.
- \* Don't ignore urges to empty your bowel.
- \* Avoid straining – take your time and follow the instructions below:

### Using your bowels safely and comfortably

When toileting, always empty your bladder first. If you have had labour or vaginal delivery, after emptying your bladder, use some rolled toilet paper or a clean pad to hold over and support your urethra and perineum, lifting towards the pubic bone.

- \* Sit leaning forward, elbows on knees, straight back, tummy relaxed
- \* Use a foot stool or lift your heels so knees are higher than hips
- \* Sigh out deeply or make a hissing sound, do not hold your breath



**Remember NOT to strain, as this puts more force on your pelvic floor and nerves which may lead to damage, prolapse and incontinence.**

## After a Caesarian Birth

While you are resting in bed more than usual and have a wound on your abdomen, it is important to do bed exercises and deep breathing to prevent problems developing in your chest and blood circulation.

### Circulation

Pumping your ankles and leg movements every hour will reduce with risk of blood clots forming. Squeezing the buttock together and holding this for a few seconds will help to relieve discomfort and increase circulation while you are less mobile.



### Chest Management

Following any abdominal surgery pain may cause shallow breathing, reducing air entering the bases of the lungs. Therefore, it is important to take regular deep breaths every hour to help keep your chest clear.

- \* Sit in a upright position
- \* Take 5 big, deep breaths every hour while you are awake
- \* If you need to clear your throat, try a small huff first.
- \* If you do need to cough, support your stitches well with a folded towel, your hands or a pillow and cough gently.

## Diastasis Recti of Abdominal Muscles (DRAM)

### Why Correct a DRAM?

The abdominal muscles play an important role in the integrity of the back and in stabilising the lower trunk and pelvis, thereby supporting the spine. They are also vital in maintaining good posture, enclose and support the abdominal contents and assist with lifting, moving, coughing and voiding (toileting).

### Management of a DRAM

- \* Pelvic tilt and abdominal bracing should be started 2-3 days after the birth of your baby (See Exercises 1 & 2 on page 12)
- \* An Abdominal corset may be of use in the initial postnatal period to assist in supporting the abdominal wall. Corsets may help to stimulate abdominal muscle activity.
- \* Use your hands to support the DRAM when coughing, sneezing or straining
- \* When getting in and out of bed it is recommended that you log roll over onto your side and then pivot up to sitting using your hands and arms to assist yourself rather than using your abdominal muscles (see page 4).

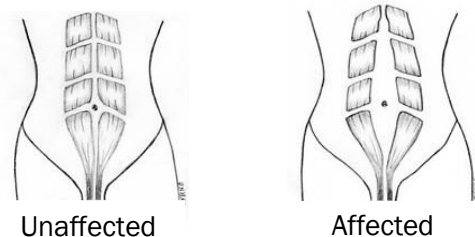
If you feel you need further assistance or would like to be assessed then please contact the physiotherapy department.



## Diastasis Recti of Abdominal Muscles (DRAM)

### What is a DRAM?

The term DRAM refers to the separation of the abdominal muscles down the midline of the tummy. This is something that occurs naturally during pregnancy.



This is a natural response to the changing mechanical stress on the abdomen combined with increasing level of the Relaxin hormone in the body. The DRAM is generally not painful and actually prevents the muscles from being damaged.

Factors that contribute to a DRAM include:

- Maternal hormones
- Baby birth weight
- Previous pregnancies
- Exercise levels of the mother

### How to Check for a DRAM

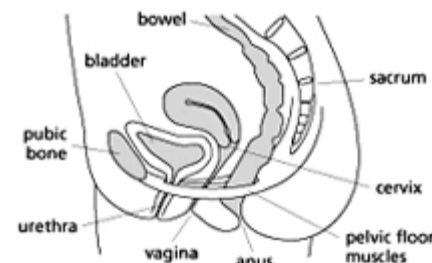
This is best done at least 48 hours after your delivery. Lie on your back on a firm surface with your knees slightly bent. Slowly lift your head and shoulders off the floor while feeling in the middle of your tummy.



Firm pressure is required. You may feel a gap or hollow around the level of your belly button. A hollow or gap of greater than 2 finger widths or 3cm needs attention.

## Pelvic Floor Muscles

The Pelvic Floor Muscles are a sling of muscles which is hidden deep inside our pelvis but which is very important, particularly for women. They attach from your tail bone (coccyx) to your pubic bone and provide support for the pelvic organs (bladder, uterus and bowel).



It is important the pelvic floor muscles are strong and function properly as a support. This will ensure you are able to maintain control of your bowel and bladder function, or 'hold -on' until an appropriate time and place.

### What Causes Pelvic Floor Weakness?

- \* Pregnancy weakens the muscles because of the increasing weight of the growing baby and hormonal changes.
- \* Vaginal delivery, especially the delivery of a large baby or instrumental delivery (forceps/ventouse)
- \* Constipation (excessive straining to empty your bladder / bowel)
- \* Persistent heavy lifting
- \* Excessive coughing which causes repetitive straining
- \* Changes in hormonal levels at menopause may further weaken damaged muscles.

### What Can Happen as a Result of This?

- \* 1 in 3 women - Incontinence (involuntary loss from bladder/ bowel).
- \* 1 in 2 women - Prolapse (falling down of your pelvic organs – bladder/uterus/bowel).
- \* Poor sexual function.

## Pelvic Floor Exercises

***All women should exercise their pelvic floor muscles daily.***

- \* These can be started 2-3 days after the birth of your baby
- \* Do not start these until your catheter is removed
- \* The exercises should not cause any pain or strain
- \* Consult your physiotherapist if you have any queries or problems

### **Getting Started**

Lie on your back with your knees bent and legs slightly apart.

#### **Exercise 1: Long Hold**

- \* Squeeze around your back passage and vagina, as though you are trying to hold wind or urine and think of lifting the perineum up.
- \* Hold this exercise for 2-3 seconds, whilst keeping your abdominal, thigh and buttock muscles relaxed.
- \* Continue to breathe normally.
- \* Relax for 5 seconds, then repeat this exercise 3 to 5 more times.
- \* Repeat this exercise 4 times a day.
- \* As your muscles get stronger, make the exercise more challenging by increasing the hold and the number of repetitions, aiming for 10x10seconds.
- \* Then, progress further by doing them sitting, standing and walking.

#### **Exercise 2: Quick Squeezes**

- Tighten the pelvic floor muscles as above, this time holding for only one second.
- Try to repeat 10 to 20 quick strong squeezes, four times a day.

#### **Functional Bracing**

Tighten your pelvic floor muscles when you cough, sneeze or laugh or when you do things that require effort such as lifting your baby.

## Pelvic Floor Exercises

### **After 6-12 Weeks**

You can test the strength of your pelvic floor by doing the following:

- \* On a full bladder, start urinating, then try to stop your urine mid-stream. Aim to be able to stop your urine flow completely with no drips for 10 seconds.  
**Note:** This test should be done no more than once every 2 weeks to prevent disrupting the way your bladder empties.
- \* Cough or jump on the spot when you have a full bladder. You should not feel any leakage from your bladder or bowel.
- \* If you're able to manage these tests without any leakage you can reduce the frequency of your pelvic floor exercises, however you should continue some pelvic floor muscle exercises for the rest of your life.
- \* If you have problems with the above tests, contact the Continence Physiotherapist who can assist you.

### **Continence Physiotherapist**

It is of utmost importance that you are completely sure you are performing the pelvic floor contractions correctly. If they are performed incorrectly, many women can strain, which can severely damage the pelvic floor muscles and lead to prolapse and incontinence. An appointment with the physiotherapist can check.

***It is NOT normal to leak urine or bowel motions 6 weeks after the birth of your baby and it CAN be fixed. It is normal to only urinate 5-6 times per day and 0-1 times overnight. If you are emptying your bladder more often than this or experiencing ANY leakage, this CAN be helped.***