Fit for Pregnancy

Exercises and advice to stay fit and healthy during pregnancy

POGP
PELVIC OBSTETRIC & GYNAECOLOGICAL PHYSIOTHERAPY

EXCELLENCE MATTERS

EDUCATES, SUPPORTS AND PROMOTES SPECIALIST PHYSIOTHERAPISTS

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Getting help

Ask your GP to refer you to a physiotherapist with expertise in treating patients with pelvic health conditions if:

- your ability to follow advice in this booklet is affected by any health problems;
- you have any difficulty with any of the exercises; or
- you find that find that your symptoms are not improving.

In some regions, you may be able to refer yourself to an NHS pelvic health physiotherapy service – check your local hospital website – or you may choose to go to a private clinic.

To find your nearest specialist NHS or private physiotherapist visit:
thepogp.co.uk/patients/physiotherapists/

Further advice and information booklets are also available from:
thepogp.co.uk/resources/booklets/

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Glossary as the words occur in the booklet

bladder - where urine is stored until you go to the toilet to pass water

uterus - the hollow organ in which the foetus/baby develops in pregnancy (sometimes called the womb)

transverse abdominals (transversus abdominis) (TA) - the deepest abdominal muscle running across the front of the lower tummy working with the lower back muscles to support the spine

neutral spine - the position of the lower spine when it is midway between arched and curved.

pelvic floor muscles - the group of muscles spanning the base of your boney pelvis, held in place by ligaments which support the pelvic organs. Pelvic floor muscle exercises / Kegels will help keep these muscles strong

pelvic organs - the bladder, bowel or uterus which may move downwards in the vagina in a pelvic organ prolapse

vagina - a muscular tube from the external genitalia (labia and vulva) to the end of the uterus (cervix)

anus - the opening at the end of the rectum where the stool comes out

perineum - the area of tissue between the vulva and the anus

intra-abdominal pressure - an increase in the pressure in the tummy which causes strain downwards

Lying on your back in pregnancy

Subsequent to recent published research POGP suggest that in the early weeks of a normal healthy pregnancy women should be reassured that resting and sleeping in any position they find comfortable is safe for mother and baby.

The same advice applies when exercising during pregnancy.

After 28 weeks lying on your back should be for a short time only and alternative positions considered particularly if you have been told of any complications in your pregnancy.

If during exercise you experience any dizziness or begin to feel unwell you should change to lying on your left side or into a sitting position or stop until you feel better.

Fit for Pregnancy

This booklet is designed to help you understand how to reduce the strain of pregnancy on your body and provide you with information on postures, positions and exercises that when done regularly may help to make you more comfortable.

If you have problems, ask your midwife or doctor to refer you to a specialist physiotherapist.

Exercise and pregnancy

Mild to moderate exercise is good for both you and your baby and most healthy women will find a programme of moderate exercise beneficial. Pregnancy can be a good opportunity to improve your level of fitness. Brisk walking and swimming (or aquanatal classes) are excellent. If you are used to exercising you can continue with your normal routine if you feel well.

If you are not used to exercising, you may wish to start with some low impact exercise/activities such as walking, swimming, static bike, gym ball, core stability exercises or chair based exercises with small hand weights and/or therabands. Begin with 15 minutes continuous activity, 3 times a week, gradually increasing to 30 minutes at least 4 times a week. As your pregnancy progresses continue with familiar activities and remember that it is natural to slow down. Any activity which produces significant pain should be avoided.

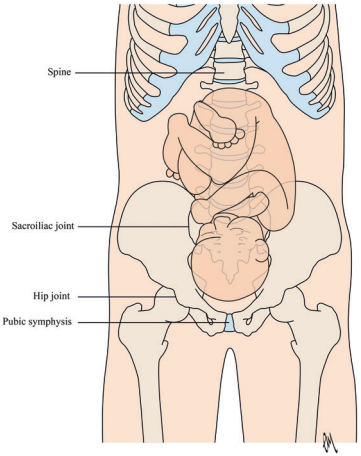
Exercising tips:

- drink plenty of water to avoid dehydration
- work within your own limits to avoid getting too hot or too breathless
- listen to your body - stop if you are uncomfortable, tired or feeling unwell

- if you were running regularly before you became pregnant, it is safe to continue during pregnancy possibly at a lower intensity but might get uncomfortable as you get larger
- be cautious in the gym - ask for help on which machines to use and how to use them correctly
- competitive / contact and new sports may be risky, and should be avoided
- hot/ humid/high altitude and low depth conditions are generally not suitable for pregnant women
- rapid twists and turns and changes of direction may cause pain - take care

Stop any activity that produces pain, especially in the back or pelvis.

It may help to attend a specific pregnancy exercise class instructed by a qualified, specialist professional, which should include work on posture, stabilisation for the spine and pelvis and functional techniques in standing.



Pelvic joints and spine

Your pelvis consists of three bones and three joints; one of these joints is at the front and two are at the back. The bones form a protective cavity or basin for your **bladder**, **uterus** and bowel.

The spine consists of many small bones (vertebrae).The joints of the spine and pelvis are supported by ligaments and muscles, which provide stability and help to maintain a good posture.

Hormonal changes during pregnancy soften these ligaments and the joints become less supported; the resultant increase in movement can lead to aches and pains in the back and pelvis. As a result of the increasing weight of your baby and a change in your centre of gravity, your posture may also change, which may place further strain on your back.



Here are some suggestions which may help you to reduce the risk of strain and discomfort:

- sit correctly, and wherever possible change your position between sitting and standing regularly when performing routine tasks, eg ironing, preparing food.

- ensure your work surface is at the correct height, both at home and at work
- when shopping, carry evenly weighted loads in each hand
- try to avoid carrying your toddler on one hip; if you must do so, alternate the hip you use
- to correctly get in and out of a car: sit first then bring your legs in to the car. To get out: place both feet out of the car and use your arms to help push yourself into standing
- use correct technique for lifting and avoid heavy loads
- trying to spend time lying on either side which will help spread the load. Try to get in and out of bed correctly
- use your abdominal/tummy muscles (as described below) for support and protection of your spine and pelvis for all activities which require effort

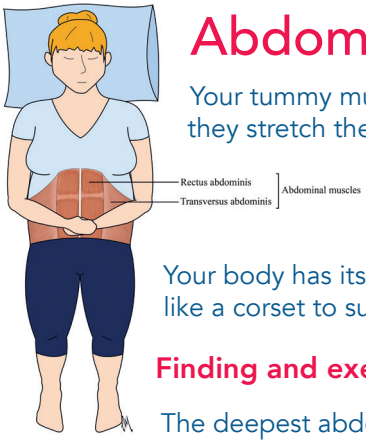




If you experience significant pelvic girdle pain and low back pain, seek medical advice or a referral to a specialist physiotherapist. Your GP or midwife should be able to arrange this (see POGP booklet 'Pregnancy-Related Pelvic Girdle Pain').

Prolonged lying in Pregnancy

Short periods of exercising on your back are safe. Avoid prolonged lying on your back in later pregnancy (after 28/40).



Abdominal muscles

Your tummy muscles will stretch naturally as your baby grows. As they stretch they may weaken. It is important to use these muscles correctly to maintain their strength, to provide support for your back and your baby, and to encourage good posture.

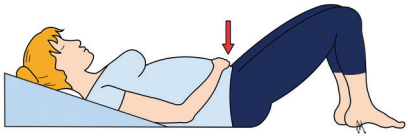
Your body has its own deep abdominal support muscles which act like a corset to support your growing baby.

Finding and exercising your abdominal muscles

The deepest abdominal muscles are called **Transversus Abdominis** (TA) and they work together with the other abdominal muscles and your **pelvic floor muscles** to support your back and help with good posture.

It is important to get the basic TA contraction right. It is not always easy, seek help from a qualified exercise professional or a physiotherapist if you are finding it difficult. (If you are finding lying on your back uncomfortable this exercise can be adapted to a side lying position.)

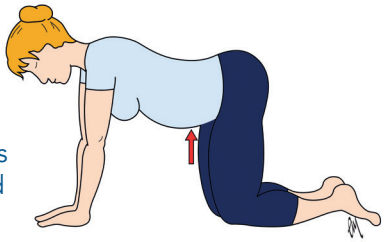
1. Lie on your back propped up on pillows or a wedge support with knees bent, feet on the floor and relax into the floor.
2. Find **neutral spine** - neither too curved nor too arched
3. Lay your hands on your abdominal muscles



4. Breathe in gently allowing your tummy to rise. As you let the breath out, keep your back and ribs relaxed while drawing in your lower tummy (at the navel/ belly button level) towards the spine. You will probably feel the muscles under your fingers tense up. Keep your spine and your pelvis in a neutral position.
5. Keep this contraction in the deep abdominals for 2 or 3 breaths and then relax fully.

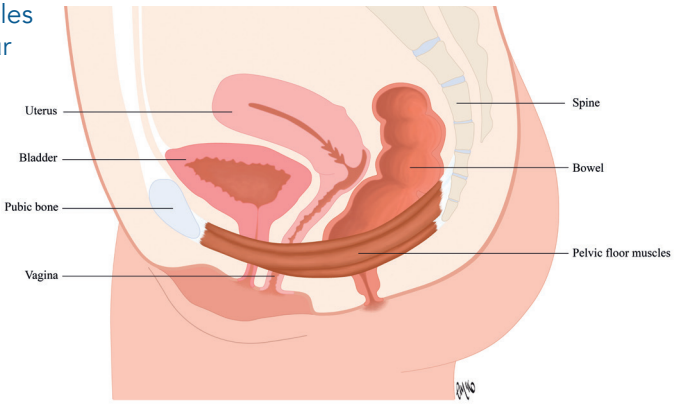
Once you are happy with this exercise, you can try using this muscle in a variety of positions.

This is the muscle to use for support when you are being physically active with bending, lifting, standing for a period of time. You can increase the length of hold of the abdominal contraction as you strengthen these muscles. Be sure not to hold your breath.



Pelvic floor muscles

This is the group of muscles spanning the base of your boney pelvis, held in place by ligaments that support the **pelvic organs**.



They are important for:

- the control your bladder and bowel

- sexual function and pleasure
- the stability of the pelvic and lumbar joints
- the support of your pelvic organs helping to prevent prolapse
- the support of your growing baby

The increasing weight of your baby during pregnancy, followed by the delivery, may weaken your pelvic floor muscles. If this support is reduced you may leak urine when you exert yourself, especially after your baby is born. To try to prevent this you should exercise your pelvic floor muscles every day, especially when you cough, sneeze and lift.

Pelvic Floor Muscle (PFM) Exercises

Imagine that you are trying to stop yourself from passing wind at the same time as trying to stop passing urine. You should feel a squeeze and a lift inside the **vagina**. Do not hold your breath. Do not clench your buttocks.

You can check if you are using the right muscles by feeling inside the vagina with a finger to feel the vaginal walls tighten, or have a look with a mirror as you practice and you will see the area between the vagina and **anus** (**perineum**) move inwards. If you see any significant downward movement or bulging at the vagina then stop and get help to get the right muscles working from a specialist physiotherapist.

Pelvic floor muscle exercises (sometimes called Kegels) should include long squeezes as well as short, quick squeezes. You should aim to work the muscles until they tire and do the exercises regularly to help the muscles become stronger and more effective.

Long squeezes

- Tighten your PFM, hold them tight, then release and let them fully relax. How long can you hold the squeeze?
- Repeat the squeeze and hold until the PFM tire. How many times can you repeat the squeezes?

Short squeezes

- Quickly tighten your pelvic floor muscles, then immediately let them go again. How many times can you do this quick squeeze before the muscles tire?
- Always let the muscles fully relax after each squeeze

Pelvic Floor Muscle Exercises

- Aim to do 10 long squeezes, holding each for 10 seconds, relax the muscles for 10 seconds then do 10 short squeezes
- You may need to start with 'little and often' if you find that you can only hold the squeeze for a short time, or only do a few before the muscles tire
- You should do your PFM exercises at least 3 times a day. Starting in lying and sitting positions and progressing to standing and active positions such as walking and bending.
- Build up your exercise routine gradually over the weeks and months. If your muscles were weak, you should notice an improvement in 3-5 months. Then keep up the practise to maintain the improvement.

The Knack

Draw up and tighten your pelvic floor muscles before any activity that increases the **intra-abdominal pressure** (coughing/ sneezing/ laughing/ bending) to help the pelvic floor muscles resist the downward movement of the pelvic organs including the uterus.

PELVIC FLOOR EXERCISES ARE FOR LIFE - TRY AND DEVELOP A DAILY PELVIC FLOOR MUSCLE EXERCISE ROUTINE

It is easy to forget to do your pelvic floor muscle exercises, particularly when your symptoms start to improve. Try to make them part of a daily routine, doing them at the same time as another activity you already do regularly e.g. brushing your teeth. Try the following suggestions:

- put a reminder on your phone
- try one of the pelvic floor exerciser apps available
- take a moment to do them when you go to the gym
- after emptying your bladder, whilst sitting on the toilet (but don't practise by stopping your urine flow)
- during a regular journey in the car, bus or train

Ideally you will be able to improve your pelvic floor muscles with these exercises.

Some women like to use gadgets to help them remember. There are many available to buy, but they don't always suit everyone. It is best to seek advice from a specialist physiotherapist about what might help if you are finding it difficult to do these exercises.



How to rest comfortably

Relaxation is a technique you can learn to use during your pregnancy and afterwards. Practising it during your pregnancy will help you to rest more effectively and comfortably and can also help to get you back to sleep if you wake during the night.

Sometimes people feel extremely tired or develop aches and pains, which can be related to tension. Tension may cause an increase in blood pressure, heart rate, and rate of breathing which can lead to feelings of panic and loss of control. Using relaxation can help to reduce, or prevent tension from building up. Stress and tension are common in pregnancy, especially as many women choose to work, look after children or are involved in other commitments, into late pregnancy.

Some women who practise relaxation and are able to use it during labour may be able to cope better with the pain and feel more in control (see POGP booklet 'Mitchell Method of Simple Relaxation').

Minor problems



Constipation

Constipation may cause you to strain on the toilet which adds pressure and unwanted stretch to your pelvic floor muscles. Sitting correctly on the toilet can help with emptying your bowels more easily.

Try to drink enough fluids to help prevent this. If you become very constipated and are having difficulty emptying your bowels speak to your GP who may suggest mild medication to help keep your bowels moving. Please refer to our booklet 'Improving Bowel Function' for further tips and support.

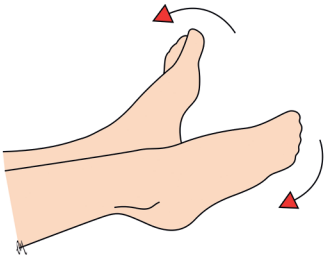
Leg cramps

These are due to changes in body chemistry and changing pressures in the abdomen.

Wearing very high-heeled shoes or sitting cross-legged can make leg cramps worse.

Some women find that it helps to exercise their feet before going to bed:

- Ankle circles 10 times each way briskly
- Calf stretches - leaning against a wall. Alternatively in sitting - with your legs out straight, pull your toes up to stretch the calf, hold for a few moments then release
- Massaging the calf muscles



If this advice does not help, your doctor may be able to give you some medication, so do ask.

Swollen ankles and varicose veins

From about four months (28/40) of pregnancy it is safer for you and your baby if you can avoid lying flat on your back. Try to rest lying on your side with your legs slightly bent. Briskly move your feet up and down for at least thirty seconds at a time, every hour or so. Avoid standing for long periods and consider wearing support tights.

Numb, tingling or painful, hands and fingers (known as Carpal Tunnel syndrome)

This may be a problem, often at night or first thing in the morning, and is due to extra fluid in the body, which increases pressure at the wrist. A physiotherapist may supply you with wrist supports to wear at night, which can help to reduce the symptoms. If swollen ankles and/or fingers are accompanied by puffy face, headaches or flashing lights, seek medical advice immediately.

Ribflare

This is the name given to discomfort over your lower ribs. It is due to your growing baby pushing your ribs away from their normal position. Try to change position frequently and avoid sitting on low chairs and in other positions which bring your ribs close to your pelvis. You may find temporary relief by lifting your arm on the affected side and bending sideways away from the ache.

Emotional changes

The hormonal changes in pregnancy may lead to emotional ups and downs and sometimes forgetfulness. This can have a significant impact on how you feel or cope with pregnancy changes. If you are worried about coping with these emotional changes help is available from your midwife or GP.

Other help available

Please refer back to the 'Getting help' section at the beginning of this booklet for further resources from POGP.

You may also wish to view the patient information on the website of Royal College of Obstetricians & Gynaecologists at **https://www.rcog.org.uk/for-the-public/** and your local NHS Trust website.



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