

Exercises and advice after giving birth

Physiotherapy Department

Information for Patients

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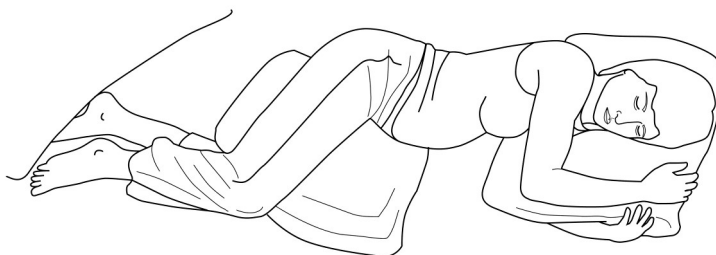
Introduction

Congratulations on the birth of your baby!

This leaflet is for all new mothers regardless of the type of delivery you had. It includes advice to aid your recovery and exercises to maximise your energy levels. It will also help you to aim to return to your pre-pregnancy fitness level, and prevent problems further down the line.

Getting comfortable

Rest is essential to your recovery. Try to catch up on sleep while your baby rests rather than catching up on household chores. The position below will help you to rest comfortably. You may also find it helpful to use the relaxation techniques you may have learnt for labour. Placing pillows under your tummy, in-between or underneath your knees, can ease discomfort from stitches, swelling or piles. They will also take pressure off your back and pelvis.



You may be comfortable lying on your back. Try placing a pillow under your knees, to take the strain off your back and tummy.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

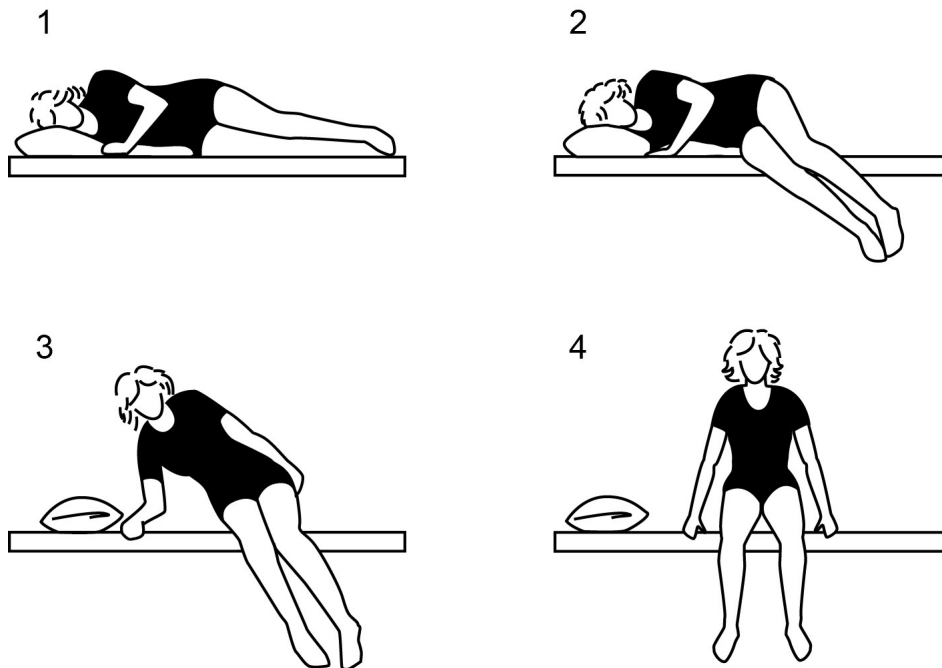
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Getting out of bed

When getting out of bed, bend both your knees and roll onto your side. Let your feet slide over the edge of the mattress, push up on your elbow and use your opposite hand to help you sit up. Continue to do this for up to 6 weeks after a caesarean to protect your stitches.

When you first get out of bed and stand, particularly after a caesarean birth, stand up tall, and gently pull in your tummy muscles (see the “Early exercises” section of this leaflet).

When getting into bed, reverse this by first pulling in your tummy muscles and gently lowering into a sitting position.

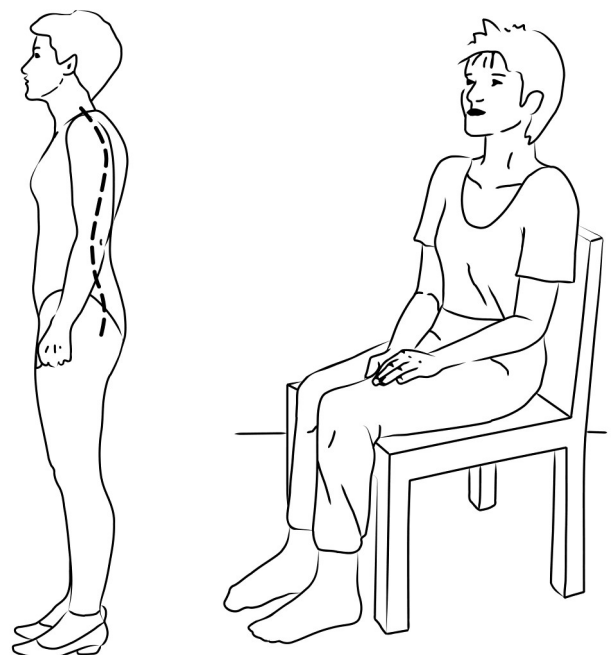


Keeping a good posture

It is important to be mindful of your posture after having your baby. Standing and sitting in more supportive positions may help prevent future aches and pains.

When feeding your baby make sure you are sitting right back in the chair or bed, with your lower back supported by a cushion or pillow. You may find using a pillow on your lap will help to support your baby, and encourage a better posture for comfort when feeding.

When dressing your baby, or changing nappies, make sure the changing mat is at waist height to avoid having to bend forwards for long periods of time, which could lead to backache.



Early exercises

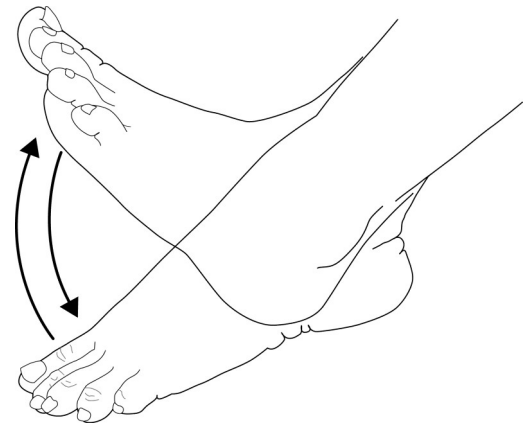
It is important that you start the following exercises as soon as possible after the birth of your baby. These exercises will help your body to recover from pregnancy and birth, and help to ease you back into your daily activities.

The exercises are safe to start in the immediate period after birth and will not cause you any harm.

Circulation:

It can be common for feet and ankles to swell up in the days after giving birth, due to extra blood and fluid volume and hormonal changes. If your feet and ankles are swollen:

- rest with your feet up as often as you can. Make sure your feet are higher than your hips and your knees are supported e.g. use a foot stool with additional pillows.
- try moving both feet up and down, bending at the ankles – repeat for 20 seconds every 30 to 60 minutes.
- try to avoid crossing your legs as this can slow your circulation and contribute to swelling.
- avoid standing or walking for long periods at a time.

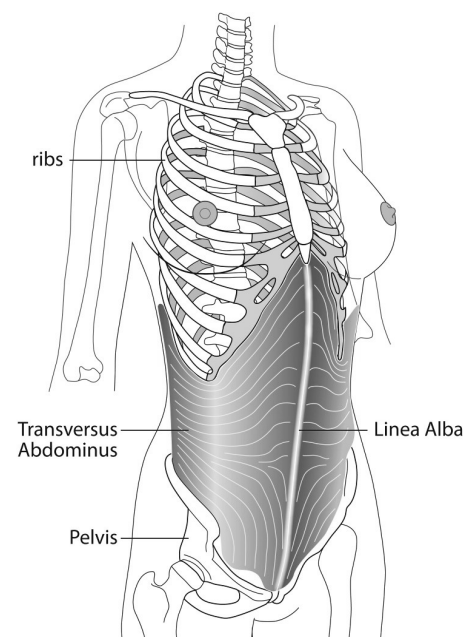


Deep abdominal muscles:

Your tummy (abdominal) muscles will have naturally stretched in order to make room for your growing baby. This can make your tummy muscles weaker. The deep abdominal muscle is known as the 'transverse abdominus (TrA) muscle' and sits under your 'six-pack' muscle. It acts like a corset supporting around your waist, back and pelvis.

Exercising your deep abdominal muscles in combination with your pelvic floor exercises can help to:

- make your tummy muscles stronger.
- reduce the amount of separation between your tummy muscles (diastasis recti).
- aid your recovery after giving birth.



To exercise your deep abdominal muscles you should:

- Lie comfortably on your back with your knees bent.
- Place your hands on your tummy and take a deep breath in, letting your tummy rise.
- As you breathe out draw in your lower tummy, away from your hands and towards your back. Imagine a piece of string is attached to your belly button, pulling it inwards.
- Keep breathing normally, do not hold your breath.
- Hold this position for 5 seconds and then relax. Repeat 3 times.
- Try to do this twice daily.
- As your strength improves, increase the hold to 10 seconds.



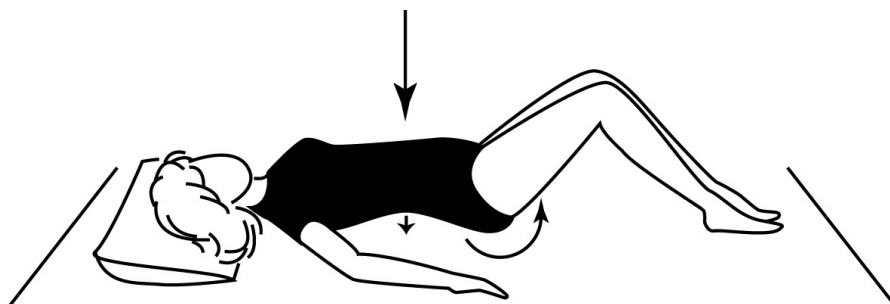
You can also combine this exercise with the pelvic floor muscle exercises shown in this leaflet.

It is important to use your deep tummy muscles while doing everyday activities. If you try to draw your tummy muscles in before or during any tasks that require effort (such as lifting or changing your baby), it will help increase the support to your back and pelvis.

Pelvic tilting exercise:

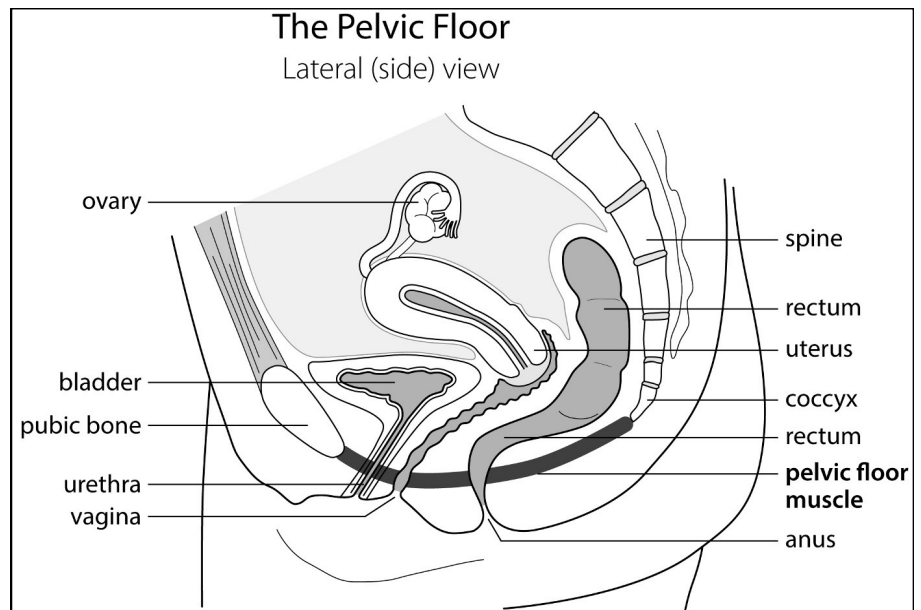
Pelvic tilting exercise progresses on from the deep abdominal exercise above:

- Start by drawing in your deep tummy (abdominal) muscles.
- Squeeze your pelvic floor muscles and buttocks to tilt your pelvis under, flattening your back into the bed.
- Hold this tilted position for 5 seconds and relax. Repeat 10 times. Make sure you keep breathing.
- As your strength improves, increase the hold to 10 seconds and repeat 10 times.
- Do this exercise twice daily.



Pelvic floor exercises:

The pelvic floor muscles lie at the base of your pelvis forming a 'floor'. They stretch like a hammock from the pubic bone in front to the bottom of the spine at the back, and between your sit bones. They surround the openings of the bladder, vagina and back passage (anus), and support the pelvic organs.



During pregnancy and childbirth, these muscles can become weakened and stretched. Strengthening your pelvic floor will help to:

- improve circulation to the muscles to help reduce swelling and relieve pain.
- control bladder and bowel movement, reducing the risk of incontinence.
- improve enjoyment during sex for you and your partner.
- reduce the risk of your womb, bladder or bowel moving out of position (known as a prolapse) by supporting the pelvic organs.

How to do your pelvic floor exercises:

To begin, try exercising your pelvic floor while lying down. You can progress to sitting or standing as your strength improves. You should do these exercises 4 times a day.

- Start by tightening around your back passage as if you were trying to stop yourself passing wind.
- Then squeeze and lift as if trying to stop the flow of urine.
- This 'squeeze and lift' should be felt inside your pelvis; you should not be tightening your tummy or buttock muscles, or holding your breath.
- Hold the squeeze for a few seconds to begin with (up to around 10 seconds). Relax for 4 seconds. Repeat as many times as you can, up to a maximum of 10 times.
- It is also important that you train your pelvic floor to react quickly, to stop leakage of urine when you cough, sneeze or laugh. To practice this, tighten your pelvic floor as quickly and strongly as you can, and then fully relax. Repeat this 10 times.

You should also tighten your pelvic floor when you do activities requiring effort, for example when you pick up your baby or carry anything heavy. To help remember to do your pelvic floor exercises try and link them into your daily routine. For example, do some when you feed your baby, change your baby's nappy and brush your teeth.

The NHS 'Squeezy' app is also available to prompt and track pelvic floor muscle exercises throughout the day.

Avoiding constipation and/or straining when opening your bowels

It is important to avoid constipation and/or straining to open your bowels after you give birth. This can put extra pressure on your pelvic floor and any stitches you may have received as a result of a caesarean section, episiotomy or perineal tear during labour. In general, opening your bowels should not affect your stitches.

To help you open your bowels:

- have your feet raised on a small stool and raise your knees slightly above your hips; do not hover over the toilet seat.
- lean forward with your elbows on your knees.
- try to have a relaxed tummy and take deep breaths.
- do not strain.



You may also be given stool softeners to help the consistency of your poo.

After opening your bowels it is important to keep the area clean, especially if you have had stitches. You can wash the area with water and gently pat dry after a bowel movement.

To avoid constipation it is important to make sure you are eating a diet which has plenty of fruit and fibre, and make sure you drink 1.5 to 2 litres of fluids per day.

Getting back to normal

Exercise - there are many benefits of being active after your baby is born. You should start by doing the exercises in this leaflet, or those explained to you by the physiotherapist while you were in hospital.

- Walking with your baby is a great way to start exercising, making sure pram handles are at correct height so you are not bending forwards or stretching for long periods. Increase your distance and pace gradually, building this up over time.
- Try and build activity into your day, for example, taking the stairs instead of the lift.
- Low impact exercise such as cycling, yoga and pilates can be started at 6 weeks, as long as your stitches have healed.

- You can start swimming when you have had 7 consecutive days of no bleeding or discharge. If you had stitches, you must wait until they have healed, this may be around 6 weeks after birth (postpartum).
- High impact exercises such as running, gym workouts, sports like tennis and netball, can be started after around 12 weeks, as long as you have full control of your bladder and bowel, and no discomfort in your pelvis or vagina. You may want to discuss with your physiotherapist about returning to more vigorous activity if you are struggling with controlling your bladder or bowels.
- Remember to start gently and to increase the intensity gradually.
- **If you have had a caesarean, more care should be taken when exercising. See the guidance in the next section.**

Back care - after giving birth it can take your pelvic joints 3 to 6 months to return to how they were before you became pregnant. It is important in those first 6 months to take care of your back and pelvis to make sure you don't injure yourself. Don't lift anything much heavier than your baby for the first 6 weeks. When you do lift, remember to bend your knees and keep your back straight.

Sex - resume when you feel comfortable and ready for it. Some women prefer to wait until they have had their 6 week postnatal check with their GP. You may find it more comfortable to use lubrication at first and start gently.

Getting further help - if you have any questions after returning home, please contact your midwife, health visitor or GP. If you feel you need more physiotherapy input, either due to on-going back or pelvic pain, prolapse or problems controlling your bladder or bowels, your GP will be able to refer you to a pelvic health physiotherapist if appropriate.

Additional advice if you have had a caesarean section

If you had a caesarean section you can follow the advice above, however with an abdominal operation it may take additional time to heal and you may feel more tired. You should increase your activities gradually.

Protecting your stitches:

In the beginning, you may find coughing, sneezing or laughing uncomfortable. However you may be more comfortable if you support your stitches with a pillow or a towel while leaning forwards, and then cough or sneeze.



Lifting guidelines:

- Do not lift anything heavier than your baby for 6 weeks.
- Avoid lifting baby car seats and pushchairs in and out of the car.
- Avoid vacuuming or heavy housework or any activity which can cause straining.
- Between 6 to 12 weeks, gradually increase your lifting, but still avoid lifting anything heavy such as small children and heavy shopping bags.
- At 12 weeks you can go back to your normal lifting, as long as you have full control of your bladder and bowel, and no discomfort in your pelvis or vagina

Driving:

- It is recommended that you do not drive for 4 to 6 weeks after a delivery by caesarean section.
- Before you return to driving you must make sure that you:
 - can wear a seatbelt comfortably.
 - can perform an emergency stop comfortably.
 - are able to look over your shoulder, turn the steering wheel and control the car without any discomfort.
- It is advised that you contact your insurance company before going back to driving, to make sure your insurance will cover you after your caesarean.

Further information

Information produced by Pelvic Obstetric and Gynaecological Physiotherapy (POGP) can be found from the links below:

- Advice and exercises following childbirth:
https://thepogp.co.uk/userfiles/pages/files/resources/211721pogpfffuture_signed_off.pdf
- Recovery after having a caesarean section:
https://thepogp.co.uk/patient_information/pregnancy_and_early_postnatal/recovery_from_c-section.aspx
- Pelvic floor muscle exercises explained:
https://thepogp.co.uk/userfiles/pages/files/resources/20818_pogp_pelvicfloor_for_women_signed_off_1.pdf

Contact details

If you have any queries, please contact the Pelvic Health Physiotherapy Team at Leicester Royal Infirmary on **0116 258 5816** or Leicester General Hospital on **0116 258 4070**.

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If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk