FIT for the FUTURE

Essential advice and exercises following childbirth

ASSOCIATION OF CHARTERED PHYSIOTHERAPISTS IN WOMEN’S HEALTH
This booklet is evidence based and has been produced by the Association of Chartered Physiotherapists in Women’s Health (ACPWH).

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Introduction

The following advice applies to all new mothers whether you have given birth vaginally or by caesarean section. It includes a safe and effective set of exercises and some practical advice to aid your recovery including:

• being comfortable after your delivery
• moving easily around the ward and at home with your baby
• exercising the abdominal and pelvic floor muscles
• starting to get back to normal and finding your previous level of fitness

After you have given birth, it is natural that you will want to give your baby lots of attention. Even so, it is important to take a little time for yourself. Although you cannot expect to return to full pre-pregnancy fitness immediately, there is a lot you can do now to help get yourself back into shape. By regaining your fitness, you will feel good and have more energy – and possibly avoid problems later.

If you need more advice after reading the booklet, please contact your local women’s health physiotherapist (see page 13).
Comfort after your delivery

(If you have had a caesarean delivery please also see page 5)

Rest

After having your baby it is vital to have sufficient rest to recover. It may be helpful to use a method of relaxation and sleep whilst your baby sleeps.

Comfortable resting positions

Try resting or sleeping in the positions indicated in the pictures. Use pillows to provide support as shown.

Lying on your side can be particularly comfortable if you have had stitches in your abdomen or bottom, or if you have piles.

To get into bed:

Stand with the back of your knees against the bed. Support your abdomen with one hand and put the other hand on the bed behind you. Bend forwards slowly as you sit on the bed. Then lower your head and shoulders sideways down onto the pillow, keeping your knees bent and together, lift your legs up at the same time.
If sitting is uncomfortable you can get into bed by kneeling on the bed and then lowering yourself down onto your side.

**To turn over in bed:**
Bend both knees, one at a time, keeping your feet on the bed. Support the abdomen with your hand especially if you have had a caesarean delivery. Make sure that you move your shoulders and knees at the same time as you roll onto your side.

**To get out of bed:**
From lying on your side as above, push through your arms to lift your head and trunk up, and at the same time allow your feet to lower over the side of the bed, down to the floor. Sit on the side of the bed for a few moments, and then stand up by leaning forwards and pushing up with your hands and legs. Try not to stoop, stand tall.

**Sitting and feeding**
Always sit well back in the chair or bed. A small pillow or folded towel placed behind your waist will support you and may help to relieve backache; your feet should reach the floor. Pillows on your lap will bring the baby up to the level of your breasts for a comfortable feeding position. Rest back as you feed making sure that your shoulders are relaxed.

Remember you can also feed your baby whilst lying on your side in the good resting position described above.
Activity in the early days after delivery

Being active is good for you. Get out of bed as soon as possible unless advised otherwise by your doctor or midwife.

**Changing your baby**

The surface on which you change your baby should be at waist height so that you do not have to bend forward, risking backache. It is easier to lift your baby from this height.

**Bathing**

Avoid bending forward and straining your back, try kneeling down if you are washing the baby in your bath. Alternatively your partner can pass your baby to you when you are in the bath. If you are standing make sure that the baby bath or sink is at waist height and wrap a towel around the sink taps to protect the baby.

**Circulation**

- if your ankles are swollen, put your feet up with your knees supported
- when you are resting in bed or sitting in a chair, bend your feet and ankles up and down briskly for 30 seconds every hour
- avoid sitting or lying with your legs or ankles crossed as this may restrict the blood flow
- avoid standing still for long periods
Posture

Regaining good posture after you have had a baby is important; this will help the way that you look and feel. Standing, sitting, lying or being active with good posture may help to avoid future aches and pains.

Caesarean delivery

Extra Information

You should follow all the above advice. However, because you have had an abdominal operation you may be more tired; do not expect too much too soon.

There are several layers of stitches in your lower abdomen that will take time to heal so increase your activities gradually as you feel able.

- take regular pain relief for as long as you require it
- in the early days if you need to cough, sneeze or laugh, lean forwards, supporting your wound - with your hands, a pillow or small towel
- when you return home, accept all the help that is offered
- try to avoid any activity that causes strain for the first weeks e.g. prolonged standing, vacuuming, carrying heavy objects or bags
- try not to lift anything heavier than your baby for at least 6 weeks. If you have a toddler, encourage him/her to climb up to you while you are sitting down rather than bending forward to pick him/her up

Before driving again – check with your insurance company that you are covered: this will normally be 4-6 weeks after caesarean delivery. Take another driver with you on your first journey, and before you drive ensure that you

- are able to concentrate as normal
- can wear a seatbelt comfortably
- can look over your shoulder and turn the steering wheel without discomfort
- can perform an emergency stop without undue pain. Try it out by applying the footbrake hard whilst the car is stationary
Exercises

Pelvic floor muscle exercises

The pelvic floor muscles are at the bottom of your pelvis, supporting the pelvic organs and helping to stabilise the pelvic joints and lumbar spine. These muscles are stretched during pregnancy and vaginal deliveries, which may lead to problems.

Strengthening the Pelvic floor muscles with specific exercises will:

• maintain/improve your bladder and bowel control
• help prevent prolapse of the pelvic organs
• help stabilise the joints in your pelvis and low back
• increase sexual enjoyment for you and your partner

Remember:

• to start pelvic floor muscle exercises as soon as possible after you have had your baby (unless you have a urinary catheter, if so wait until it is removed and you are passing urine normally).
• to do the exercises in varying positions, but if you are sore try to do them lying on your side
• doing rhythmic tightening and relaxing of the pelvic floor muscles may ease discomfort, pain and swelling, and can aid healing if you have had a tear or stitches
• cooling the painful area with an ice pack or gel pack may help lessen the discomfort. Wrap the ice/gel pack in a damp towel and apply for 5 minutes only

How to exercise your pelvic floor muscles

Imagine that you are trying to stop yourself passing urine or wind. Try to ‘squeeze and lift’ the pelvic floor muscles, closing and drawing forward the back and front passages. Start gently. You may not feel that much is happening at first but keep trying. Hold the squeeze for a few seconds, and then relax for a few seconds; do not hold your breath.
• gradually increase the hold time and the number that you do until you can hold the squeeze for up to 10 seconds and repeat up to 10 times. You may find that abdominal hollowing (see page 8) takes place at the same time
• it is also important that the pelvic floor muscles are able to react quickly to stop you leaking when you cough, sneeze or laugh. Tighten them as quickly and strongly as you can and then relax; do this up to 10 times at each session
• try exercising in different positions (standing, sitting, lying) and establish a routine, such as every time you feed your baby

To be effective you need to concentrate and persevere and do the two types of exercise at least 3 times a day
• always tighten your pelvic floor muscles before and during any activity requiring effort, for example, when you are lifting your baby (see page 11), coughing or sneezing

Remember it can take several months for the pelvic floor muscles to return to their previous strength

Pelvic floor muscle exercises are important for life - for all women

Further advice
• if you have had a perineal tear or episiotomy, make sure you gently clean this area with fresh water daily and change sanitary pads regularly. If you have ongoing pain, talk to your doctor or midwife
• make sure you have passed urine within six hours of delivery. If you have not, inform your midwife
• make sure you are going to pass urine regularly (every 3-4 hours) during the day, particularly if you have had an epidural
• do not use your pelvic floor muscles to ‘stop and start’ the flow of urine
• do not get into the habit of going to the toilet ‘just in case’
• if you are unable to control and pass urine, or control your bowels as you were before, ask to see the women’s health physiotherapist or talk to your midwife
• when having a bowel movement you may find some extra support will make you more comfortable; try holding a wad of toilet paper or
a sanitary pad firmly in front of the back passage. If you have had a caesarean delivery, supporting your wound with a folded towel may also help

- **Do not rush or strain** when opening your bowels. Breathing out slowly when moving your bowels or passing urine may help
- Avoid constipation by drinking 3-5 pints (1-3 litres) of fluids per day, and have enough fibre in your diet. If you become constipated speak to your midwife or doctor for further advice/help
- drink as your thirst dictates if you are breast feeding

**Exercising your abdominal muscles**

The abdominal muscles form a natural corset supporting your back and internal organs. These muscles have been stretched in pregnancy and may be weakened, so you need to start to exercise and strengthen them as soon as possible. Exercises will help you to regain your body shape and prevent or relieve backache. The deep abdominal support muscles may work at the same time as the pelvic floor muscles.

**The abdominal hollowing exercise (‘core exercise’)**

Start doing this exercise in the most comfortable position for you – lying on your back or side with your knees bent or sitting with your back well supported.

- place one or both hands on your lower abdomen below the umbilicus (tummy button), breathe in through your nose and as you breathe out draw in your lower abdomen, away from your hands, towards your lower back, then relax
- try not to hold your breath; you should be able to draw this tummy muscle in and breathe normally, with your lower back staying still
- start with a few repetitions each time then gradually try more repetitions, holding the muscle drawn in for up to 10 seconds. Try to do this 3 times a day if you can
- once you’ve learnt this exercise you might be able to practise it in standing. Try to get into the habit of using these deep muscles before and during any activity requiring effort for example when lifting or changing your baby
During pregnancy as your baby grows, your tummy muscles gradually lengthen and stretch apart. A gap may form down the front of your tummy between the muscles; this is known as Rectus Divarification. This gap should gradually reduce in size in the months after your baby is born. To encourage this to happen, it is important not to let your tummy dome or bulge while doing any of the following 4 exercises. If it does, stop the exercise, return to abdominal hollowing and seek advice from your specialist women’s health physiotherapist or ask your GP for a referral to a local physiotherapist (or see page 13 for more information).

The next exercises are also useful in helping to relieve wind and nausea following a caesarean delivery.

**Start all exercises by lying with your head on a pillow, knees bent with feet on the bed and shoulder width apart and arms by your side.**

### 1. Pelvic tilt

Hollow your abdomen as described above, tighten your pelvic floor muscles and flatten your lower back into the floor/bed as your pelvis tilts. Breathe normally. Hold the position for 3 seconds and release gently. Repeat this up to 10 times, 3 times per day. The pelvic tilt exercise can be particularly helpful for maintaining abdominal muscle strength, correcting posture and easing back pain. Progress by doing the exercise when in sitting, standing, crook lying (as in the drawing), side lying or kneeling.

### 2. Knee bends

Hollow your abdomen, keep your back flat on the floor and bend one hip and knee up as far as is comfortable. Hold up to the count of 10 and then bring the leg down so that the foot is back on the floor. Repeat with the other side. Do this 3 times with each leg if you are able. Repeat 3 times per day.
3. Knee Rolling
Gently hollow your abdomen, and keeping your back still on the bed, and your knees and feet together, slowly let both knees go to one side. Bring them back to the middle and relax. Hollow your abdomen again and repeat to the left. Do this 3 times each side if you can.

4. Head lift
If you have neck pain DO NOT do this exercise. Lie on your back with your head resting comfortably on the pillow. Hollow your abdomen and tighten the pelvic floor muscles as you gently lift your head and shoulders a little way off the pillow. Hold for 3 seconds, lower and relax. Repeat this up to 10 times, 3 times a day if you can.

Progress by increasing the number of repetitions of each exercise up to 10
Getting back to normal

Back Care - this is good advice for life

Your pelvic joints can take months to return to their pre-pregnancy state. Breastfeeding will not affect your rate of recovery. You can easily strain your back during this time so try not to lift anything heavier than your baby for as long as you are able. If you do have to lift:

• always try to bend your knees
• hollow your abdomen (see page 8)
• tighten your pelvic floor muscles (see page 6)
• breathe out as you lift

If you have a toddler, try and avoid lifting him/her for the first few weeks and try not to lift anything heavy such as a basket full of wet washing. If you have to lift, follow the correct lifting technique as described above.

The only safe way to transport a baby in a car is in a properly fitted baby car seat. If carrying the baby in the seat to and from the house, carry it close in front of your body. It should not be used for carrying the baby whilst out walking: use a pushchair or pram.

Exercise

There are many good reasons for exercising once your baby is born; return to it gradually and enjoy it.

You may do the exercises given to you in this booklet, or by the physiotherapist whilst in hospital, and continue them when you return home.

• becoming active again as soon as possible after delivery may mean that there is less chance of developing postnatal depression, provided exercise relieves the stress rather than making it worse
• care should be taken not to start high-impact activities (where both feet leave the ground at the same time, such as jumping, jogging or sports that involve running) too soon
• brisk walking with your baby is an excellent way to exercise. Ensure the pram handles are at the correct height for you so that you do not have to bend forwards or reach upwards. Gradually increase the time and pace of your walking every day during the first 6 weeks
• although baby carriers can be useful they must be properly adjusted to avoid neck and back strain
• you can start swimming once you have had 7 consecutive days clear from vaginal bleeding/discharge. If you have had a caesarean delivery you may prefer to wait until you have seen your GP at your six-week check
• always listen to your body and remember to do your core abdominal-hollowing exercise whenever you can (see page 8)
• people recover at different rates. If you have exercised regularly prior to your pregnancy you may be able to return to fitness more quickly. Obtain ‘Fit and Safe’ from your physiotherapist. (see page 13)
• many women feel extremely tired after childbirth so do not overdo it, pace yourself, limit your visitors and have plenty of rest. Do not try to be ‘super mum’, accept offers of help and set aside a regular time to rest

Sexual Intercourse
Some women prefer to wait six weeks until they have had their GP check up; however, if there are no problems you can resume intercourse when you feel like it. Start gently and use lubrication if required. If you have persistent discomfort or pain with intercourse ask your GP for further help.
Contact information

Ask to see your local women’s health physiotherapist if you have any pelvic girdle pain, urinary or bowel leakage or uncontrolled loss of wind, sudden vaginal discomfort, backache or bulging of your abdominal muscles.

Women’s health physiotherapists are available in most hospitals and have specialised training to help you. Alternatively, if you do not know a physiotherapist in your area, enquire at your local physiotherapy department or contact:

ACPWH Administration,  
Fitwise Management Ltd,  
Drumcross Hall, Bathgate, EH48 4JT  
T: 01506 811077 E: info@fitwise.co.uk

www.acpwh.csp.org.uk

ACPWH booklets

• Fit and Safe  
• Pregnancy-related Pelvic Girdle Pain (for mothers-to-be and new mothers)  
• The Mitchell Method of Simple Relaxation

For details of these and other useful reading, see website: www.acpwh.csp.org.uk