FIT for the FUTURE

Essential exercises and advice after childbirth

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

www.acpwh.org.uk
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 leaflet, please contact your local women’s health physiotherapist in the hospital where you have had your baby (see page 12).
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 position
Lie on your side and make yourself comfortable by placing pillows under your abdomen and between your knees.

This position is comfortable for most women, especially if you have had stitches in either your abdomen or bottom and/or ‘piles’.

To turn in bed from lying on your back:
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:
Bend both knees, keeping your feet on the bed and roll onto your side moving your shoulders and knees together. Push your body up by pressing down onto the mattress with your upper hand, allowing your feet to go down to the floor. Sit on the side of the bed for a few moments, and then stand by leaning forwards and pushing up with your hands and legs. Try not to stoop; stand tall.
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.

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 and walk around as soon as possible unless you are advised otherwise.

**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, by 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 will 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 6 weeks e.g. prolonged standing, vacuuming, carrying heavy shopping 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. These muscles have been stretched in pregnancy and during vaginal delivery, which may cause problems.

Pelvic floor muscle exercises are needed to:

- improve muscle strength so that you can control your bladder and bowel
- help prevent prolapse of the pelvic organs
- increase sexual enjoyment for you and your partner

Remember:

- to start the pelvic floor muscle exercises as soon as possible after you have had your baby
- to do the exercise in varying positions but if you are sore after your delivery, try to do them lying on your side
- to do gentle, rhythmic tightening and relaxing of the muscles which may help ease discomfort, pain and swelling, and can aid healing if you have a tear or stitches
- to wait until your urinary catheter (if you have one) is removed and you are passing urine normally before starting these exercises
- that cooling gel pads applied to the painful area may help to lessen the discomfort

How to exercise your pelvic floor muscles

Imagine that you are trying to stop yourself passing urine or wind. Try and ‘squeeze and lift’ the pelvic floor muscles, closing and drawing up the 3 passages. Start gently and rhythmically. 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
• try exercising in different positions (standing, sitting, lying) and establish a routine, such as every time you feed your baby

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

• it is also important that the pelvic floor muscles are able to react quickly to stop you leaking when you cough, sneeze, laugh or shout. Tighten them as quickly and strongly as you can and then relax; do this up to 10 times at each session
• always tighten your pelvic floor muscles before and during any activity requiring effort, for example, when you are lifting your baby (see page 10), coughing or sneezing

**To be effective you need to concentrate and persevere and do the two types of exercise at least 3 times a day**

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

**Further advice**

• make sure you have passed urine within six hours of delivery. If you have not, inform your midwife
• make sure you are emptying your bladder regularly, particularly if you have had an epidural
• if you are unable to control and pass urine as usual ask to see the women's health physiotherapist or talk to your midwife
• do not 'stop and start' the flow of urine
• do not get into the habit of going to the toilet 'just in case'
• 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 STRAIN.**
• breathing out slowly as you move your bowels or pass urine may also help
• drink 3-5 pints (1-3 litres) of fluids per day to include water/squash and eat plenty of roughage
• drink as your thirst dictates if you are breast feeding