



Postnatal Recovery Physiotherapy Advice

Information factsheet

Getting back into shape

Now you have given birth, you may be wondering how to begin safely exercising to help your body to return to its pre-pregnancy condition.

It's important that you continue to take good care of yourself and restart a few simple exercises early on to improve your energy levels and fitness, and to reduce aches and pains. However, start gently with a few safe exercises and only do what feels comfortable.

Going for a daily walk with your baby in the pram is a good way of getting exercise and fresh air for both of you. Start at an easy pace, gradually increasing the time to 30 minutes and building up the pace to a brisk walk.

The effect on your ligaments becoming more flexible in pregnancy means that joint problems can be made worse by excessive stretching or high impact exercise. These effects continue for up to 5 months after birth. It is a good idea to wait until 3 months postnatal to return to high impact exercise to reduce the risk of injury. High impact exercise is any exercise when both feet leave the floor at the same time.

Swimming is a low impact exercise, and you can start when you are 7 clear days free of vaginal bleeding, and when any scarring is fully healed. If you have had a caesarean section, you may prefer to wait until your GP appointment.

Protecting your muscles and joints

Make sure that you are very careful in the first few weeks at home. Avoid lifting anything heavier than your baby as much as possible. Avoid leaning down to pick objects off the floor, bend your knees and keep your back straight instead. As you pick things up tighten your pelvic floor and stomach muscles to help you. When feeding your baby ensure you sit in a supportive chair with your back straight. Use a pillow or footstool underneath your feet if needed, and also pillows underneath your baby to help support your baby's weight and keep your back straight.



Pelvic floor exercises

In women, pelvic floor muscles support the bladder, womb and bowel and therefore have been affected both by the pregnancy and the birth regardless of how your baby was born. It is important to exercise these muscles for 3 to 6 months following the birth of your baby to return them to normal strength.

Strong pelvic floor muscles will prevent and treat bladder and bowel leakage, vaginal prolapse, and pelvic and back pain, and improve sensation with intercourse. It is safe to start the day after your baby is born, within comfortable levels if you have a new scar, and will help to reduce perineal swelling and soreness.

- Imagine that you are trying to stop yourself from passing wind, that you are gripping the walls of the vagina together and that you are trying to stop your flow of urine. You should feel a tightening of your back and front passages, and a lifting sensation of the passages upwards and forwards toward the pubic bone. This is the basic pelvic floor muscle exercise.

When you do this exercise:

- o Breathe normally
- o Relax your stomach, buttock and leg muscles
- Building strength: Tighten and lift the pelvic floor muscle and hold for as many seconds as possible, to a maximum of 10 seconds. Rest for the same number of seconds and repeat 10 times. If you cannot hold for 10 seconds, hold for as long as you can and build up to 10 seconds over 6 weeks.
- Increasing speed: Tighten and lift the pelvic floor muscles as quickly as possible to the maximum intensity. Do not hold, release the muscle fully- this might take a few seconds. Repeat 10 times.
- Repeat these exercises 4-6 times a day in any position that feels comfortable.

If you have any problems with the pelvic floor muscles, bladder and bowel incontinence or vaginal heaviness/prolapse then discuss it with your midwife or GP who may refer you to a Specialist Physiotherapist or Nurse.

Stomach exercises

The deep stomach muscles (transversus abdominus) are the most important stomach muscles to exercise in the first 6 weeks after your baby is born. They help to support the spine and pelvis and exercising them will help to flatten your tummy.



- Lie on your side or back with your knees bent. First relax and let your tummy fully let go. Breathing normally, gently draw the lower part of your tummy toward your lower back as if trying to fit into a tight trouser waist band. This is the basic transversus abdominus exercise.
- Building strength: Breathing normally, keep the lower tummy drawn in for as many seconds as possible, to a maximum of 10 seconds. Rest for the same number of seconds and repeat 10 times. If you cannot hold for 10 seconds, hold for as long as you can and build up to 10 seconds over 6 weeks.
- Repeat these exercises 4-6 times a day in any position that feels comfortable. Get into the habit of contracting the pelvic floor and transversus abdominus muscles together to protect your back and pelvis when lifting or changing the baby.

Sometimes due to hormonal changes and excessive abdominal muscle stretching, the outer stomach muscles (rectus abdominus) may separate. Avoid sit ups until your 6-week check and ask your GP for an assessment if you are concerned about your stomach muscles. Early referral to a Physiotherapist may help to improve recovery.

Caesarean section

The advice after caesarean section is no different- you can do the same activities and exercises as anyone after your baby is born. However, you have just had an operation, with several layers of stitches in the lower abdomen, so you will be more tired. Listen to your body and go at your own pace.

- To reduce pain with coughing or sneezing, support your scar with your hands or a pillow.
- Make sure your insurance company covers you before driving. This is normally 4-6 weeks postnatal.

Physical problems

Consult your midwife or your GP for advice if you experience any of the following problems:

- Persistent back, pelvic, pubic bone, groin or abdominal pain.
- A stomach that remains bulging and floppy more than 6 weeks after the birth.
- Any problems with loss of bladder or bowel control- such as wetting, soiling or having to rush to the toilet.
- Difficulties with sexual intercourse.
- Sensation of heaviness or dragging in the vagina or visualising a lump in the vagina.



Useful resource for leaflets and more information

Pelvic, Obstetric and Gynaecological Physiotherapy:

<http://pogp.csp.org.uk/>

020 7306 6666

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.PALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please email whh-tr.patient-information@nhs.net. We will try our best to meet your needs.

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