

ACTIVITY AND TRAINING AFTER BIRTH AND CAESAREAN SECTION.



POSTPARTUM PERIOD

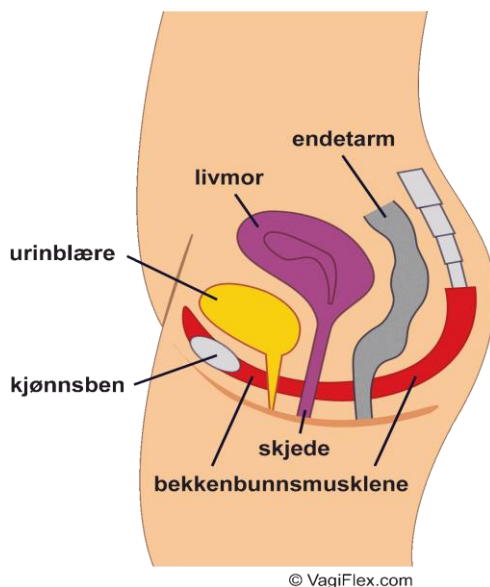
The information contained within this leaflet concerns the first 6 weeks after giving birth, otherwise known as the postpartum period. This is when the body is readjusting after the demands placed on it by both pregnancy and childbirth.

Physical activity is important. Start by moving in a way that feels right for you. Use your previous levels of activity under pregnancy as a reference point. In order to get fitter and stronger, it is important to start slow and gradually increase the duration and intensity of exercise.

Give your body adequate time to adjust. Daily aerobic exercises, such as walking, is advisable. Gradually increase the duration and tempo.

In the first days and weeks after giving birth it is also important to get enough rest. Prioritise periods of rest or short naps when your baby is asleep.

After the first 6 weeks, you can start training as normal.



PELVIC FLOOR

The pelvic floor is a group of muscles that form the floor of the pelvis. They enclose the urethra, vagina and rectum. They are responsible for preventing incontinence.

The pelvic floor muscles are under significant physical stress during both pregnancy and childbirth. During pregnancy, the muscles of the pelvic floor are stretched. This is due to the weight of the foetus pressing downwards. It is therefore important to train these muscles, even if you gave birth via caesarean section.

With vaginal birth, injury can occur to these muscles as well as associated fascia and nerves. This can result in faecal, intestinal gas and/or urine incontinence as well as potential prolapse of the womb, vagina or rectum. Pain with sexual intercourse is also common.

One can help prevent and treat this with regular training of the muscles of the pelvic floor. Pelvic floor training should be carried out for a period of three to six months after giving birth. This is in order to prevent or reverse the complications mentioned above. The exercises should be started as soon as possible and while still admitted to the maternity ward.

It can be difficult to feel these muscles working. One way of testing these muscles is to try to stop the stream of urine whilst urinating. This is just a test and a way of feeling the muscles work, do not repeat this as an exercise, as it can interfere with the ability to relax and fully empty the bladder.

It is useful to create a good habit of pelvic floor training by doing it at set times of day. This makes it easier to remember.

TRAINING OF THE PELVIC FLOOR

How: Settle into a comfortable position either lying on your back, on your front or sitting

- Contract the muscles surrounding the urethra, vagina and rectum.
- Draw upwards and inwards.
- Let go, without pushing outwards.
- 10 repetitions/contractions 3 x each day

The first few weeks: perform several light contractions one after another. Try to manage a contraction for 1-2 seconds. Try to not use the large muscles of the abdomen, hips, and thighs and lower back.

After a while, you can progress to clenching these muscles as hard as you can. Try to hold the contraction for up to 10 seconds. You should notice the feeling of the muscles letting go, the moment you decide to let go. If you do not feel the muscles letting go, then this probably means they are fatigued and not fully contracted. Try holding for a shorter interval. When you feel that the muscles are stronger, you can try to do the same exercises in a more demanding position like standing.

If you are uncertain how to perform these exercises, or you are still experiencing problems after 6 months, contact a physiotherapist with experience of pelvic floor training.

A list of physiotherapists that specialise in women's health can be found here www.fysio.no and choose from the subgroup: Faggruppe for kvinnehelse.

EXSAMPLES OF GOOD POSITIONS



GOOD REST POSITIONS

As mention earlier, rest is equally important to exercise. It is important to find positions to effectively rest the body.

SUPINE OR LYING ON THE BACK See diagram. Rest with the back of the legs resting on a chair with pillows under the hips and the head supported.



LYING ON THE FRONT

This can be uncomfortable at first after a long period of pregnancy where lying on the stomach was not possible.

A couple of pillows under the tummy can prevent pressure on the chest. Some people can experience that this stimulates a natural bleeding from the womb.



EXERCISES FOR SHOULDERS AND THE NECK

Exercises aimed at releasing tension in the neck and shoulders.

SHOULDER ROLLS

How: Sit on a chair or on a mat. Slowly roll both shoulders forwards and backwards with a circular motion. Start with small circles and gradually increase..



STRETCHING OF THE UPPER BACK

How: Interlock the fingers in front of the chest. Stretch both arms in front of the chest until you feel a stretch between the shoulder blades. Hold for 5 seconds and repeat for 5 repetitions.



STRETCHING OF THE CHEST MUSCLES

How: Sit on a chair or training mat. Interlock your fingers behind your back. Draw the shoulder blades together and press the chest forward. Hold for 5 seconds then let go. Try to repeat for 5-10 repetitions.



ABDOMINAL MUSCLE

EXERCISES

The deep and superficial muscles of the abdomen and lower back are important for both stability and movement. It is important to train these muscles regularly.

Abdominal muscles are significantly stretched under pregnancy. Towards the end of the last trimester the abdominal muscle at the front divides. In the postpartum period, this muscle will gradually return to normal. It varies from person to person how long this can take.

It is advisable to wait with strenuous sit-ups until the abdominal muscle is no longer divided. You can test this muscle by lying on your back and trying to perform a sit up. If there occurs a bulging at the front of the abdomen then it is too early to start sit ups.

EXERCISES FOR THE DEEP ABDOMINAL MUSCLES.

How:

On your hands and knees. Lift your belly button upwards and inwards towards your spine. Notice a slight tension in your abdomen. Hold 5 -10 seconds and repeat 10 times.



LOWER BACK AND PELVIS EXERCISES

GLUTEAL BRIDGE

How:

Lie on your back with bent knees. Clench the muscles of the seat and lift the hips and pelvis up from the floor. Hold 5 seconds and repeat 5-10 times.



This exercise can also relieve feelings of uncomfortable pressure on the pelvic floor

CAESAREAN SECTION

The advice and exercises within this leaflet are relevant even if the birth was via caesarean section.

It is also important to avoid stress on the operation incision as it heals. You can do this by:

- Avoid heavy lifting for the first 4-6 weeks. Try not to lift anything heavier than your baby. If you do have to lift, keep the load close to your body.
- Hold a pillow against the operation incision when coughing, sneezing, laughing or if straining while on the toilet.
- Most people prefer to raise themselves up from lying to sitting by first rolling on to their side. From lying on your side it is easier to come up to sitting by letting the legs dangle over the side of the bed and then pushing yourself up onto your elbow before straightening up. Wait 12 weeks before starting sit ups.

Lying on your front is fine. A couple of pillows under your tummy will support the operation scar.

If there is anything you are uncertain about please contact your local physiotherapist.

Remember a daily brisk walk in the fresh air does wonders for the mind and body!

PELVIC PAIN

It is quite common to experience pelvic pain in the postpartum period. This pain can sometimes persist. It is important to keep physically active despite some pain provocation. Try however to avoid significant flare-ups of pain.

We can recommend an informative YouTube film on pelvic pain called 'Bekkenleddssmerter forklart av FORMI'



Picture from dnt.no

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