Jane Crookall Noble's Hospital Maternity Unit

Your Post Natal Advice And Exercises Explained





General Advice For All New Mothers.

Early Activity — Being active is good for you. Your midwife will advise you when you can get out of bed.

Keep your chest clear, move around.

If you need to cough to clear your chest and

a) have had a caesarean section

Try taking a few deep breaths (in through your nose and out through your mouth).



Figure 1: Coughing

Then bend your knees, support your wound with your hands (or a pillow) and try a firm cough. You may also try "huffing". This is a breath in, followed by a short, sharp breath out (as if steaming up a mirror).

a) if you have vaginal stitches

You may wish to hold the sanitary pad firmly as you cough.

Circulation

These exercises can help to prevent deep vein thrombosis and swelling of the ankles. They should be done regularly throughout the day.

- a) Pedal your feet x 10
- b) Circle your feet x 10

When resting, put your feet up on a stool if you can. Try not to sit with your legs crossed.



Figure 2: Circulation

Caring for your body

It is vital that you take care of your body after you have had your baby. If you have pain or difficulty moving after the birth of your baby, do tell your midwife or health visitor.

Feeding

You can feed your baby in a variety of different positions. Try to find those which are most comfortable for you. Please ask your midwife for further advice and support.

Sitting in a chair positions

Sit upright in the chair with a pillow at your back for support. Raise your feet on a footstool/step.

Try not to slouch, and if necessary, place a pillow over your lap to raise your baby up to the breast/bottle. Avoid feeding your baby perched on the side of the bed or on the edge of a chair.



Sittina



Football/rugby position

Lying on your side

Use a pillow behind your back and one between your knees. Place a pillow over your stomach to protect it from the baby's feet.



Side lying

Getting in and out of bed comfortably

To make moving around in bed more comfortable, here are some simple steps to follow:

- Avoid twisting movements.
- To get out of bed, roll over onto your side and let your legs drop over the edge of the bed. Push yourself up into a sitting position using your arms.



Getting in and out of bed

• To get into bed, sit as far up the bed as you can and lower yourself onto your side using your arms, gently lifting your legs as you go.

Changing your baby

Try changing your baby on a surface that is waist height. This should help you to avoid stooping but remember one day your baby will try to roll, so never leave baby unattended even for a second. You could try sitting with baby on your lap or kneeling at the side of your bed at home and having baby on top of the bed.

Lifting

Bend your knees and get close to whatever you are picking up. Remember to draw up your pelvic floor and draw in your stomach muscles as you lift. (If you have had a caesarean section see page 11)

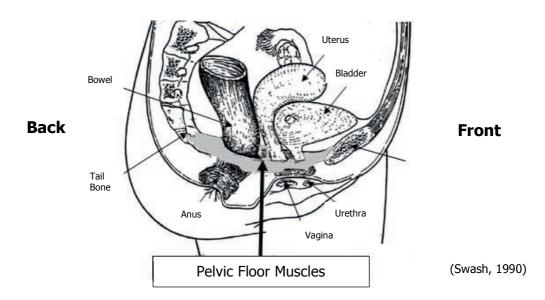
Pelvic floor exercises

Pelvic Floor Muscle Exercises

Regardless of the type of delivery that you have had, it is important to carry out pelvic floor muscle exercises.

Pregnancy and delivery can cause weakening of the pelvic floor muscles so they will need to be strengthened. Even if you have had a caesarean section you will need to do these exercises. Start your exercises as soon as possible after you have had your baby (unless you have a urinary catheter, if so wait until it has been removed and you are passing urine normally).

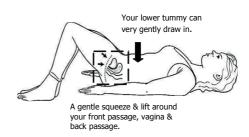
What is my pelvic floor?



The pelvic floor is a sling of flat muscles that attach to the pubic bone at the front and to the tail bone at the back. These muscles form the floor of the pelvis, which is why it is called the 'pelvic floor'.

How do I contract my Pelvic Floor?

When you contract your pelvic floor, it feels like trying to 'hold in your urine and wind'. You should feel a 'squeeze and lift' around your front passage, vagina and back passage. The lower tummy will also very gently draw in as if pulling away from the zip of tight trousers.



Avoid stopping urine mid-flow

It can be a helpful prompt to visualise yourself stopping urination over the toilet in order to contract your pelvic floor. However, it is **not advisable** to start and stop urination whilst over the toilet as a way of doing pelvic floor exercises. This is because your bladder may start to retain old urine. This can lead to bladder and urinary tract infections.

It may take time and concentration to learn to correctly contract your pelvic floor. Pelvic Floor exercises can be performed from easiest to hard with the use of different positions.

Pelvic floor exercises can be performed in:

Crook-lying (easiest)

Side-lying (easiest)

4-point kneeling

Sitting (convenient)

Standing (hardest)

What are the exercises I need to do?

Pelvic floor exercises should include long holds as well as short quick squeezes. You should aim to work the muscles until they tire, and do the exercises regularly to help your muscles become stronger and more effective.

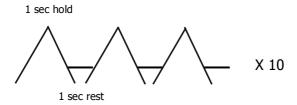
1. Long Holds for endurance:

Aim to contract your pelvic floor and hold it for up to 10 seconds; relax for 5 seconds. Repeat 10 times. If you can't achieve this, then just hold and repeat for as long/ many as you can before your muscles get tired. Your muscles may also need longer to rest.



2. Quick Flicks for resisting stress on bladder cause by coughing etc:

Contract your pelvic floor strongly for 1 second, and then relax it immediately. Repeat up to 10 times (rapidly) unless your muscles tire beforehand.

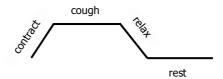


Complete one set of long holds (exercise 1) followed by a set of quick flicks (exercise 2) at least 3-4 times daily.

It takes time for exercise to strengthen your pelvic floor. You won't notice things getting better for a few weeks, but keep going. **To** improve your pelvic floor function, at least 3-6 months of regular pelvic floor exercises are required.

3. The "Knack":

Contract your pelvic floor before you cough, sneeze or lift & keep your pelvic floor contracted until the event is over.



Trouble remembering to do your exercises?

Try:

- Doing your pelvic floor exercises with a particular activity (eg. brushing your teeth, washing your face)
- 2. Make pelvic floor exercises part of your general exercise routine
- Set a reminder on your phone or download the NHS 'Squeezy app' to your smart phone



Self-Care

Perineal care (area of soft tissue extending from the back passage to the vulva) If you have had a perineal tear or episiotomy:

- It is important to keep your perineal area clean, especially if you have stitches. Gently rinse from front to back with plain water and dry carefully, especially after going to the toilet.
- Change sanitary pads regularly.
- Try to avoid sitting still for too long.
- Try lying on your side if you are in discomfort or during the night.
- Gently exercising the pelvic floor will help the healing process (see 'Pelvic Floor Muscle Exercises' in this leaflet).

Bladder Care

- Make sure you are passing urine regularly.
- You may find you are less aware of the need to empty your bladder. If so, it is still important to go to the toilet approximately every 2-3 hours.
- Make sure you drink at least 2 litres of water each day, especially if you are breastfeeding, to avoid becoming dehydrated.
- If you have difficulty passing urine tell your midwife or GP.

Bowel Care

- Try to avoid getting constipated as it causes strain on the pelvic floor muscles and stitches.
- A healthy diet, including fruit and plenty of fluids, will help you return to a regular bowel habit.
- You may be prescribed medication for constipation such as lactulose or Fibogel.

Comfortable Position for Opening Bowels

- When sitting on the toilet make sure your feet are on the floor or foot rest. Relax and give yourself plenty of time.
- When opening your bowels you may find that providing perineal support will make you more comfortable. Try holding a sanitary towel firmly in front of your back passage maintaining an even pressure as you are opening your bowels.
- Supporting a wound with a folded towel can also help.
- Do not strain.
- Breathing out as you move your bowels or pass urine may help.
- The ideal position is shown in the diagram.
- Ensure you drink enough fluids and eat a healthy diet including fibre, to bulk your stool and keep it soft to pass e.g. wholemeal bread, oats, fresh fruit and vegetables.



Healthy Toilet Position

If you feel constipated or need to strain when passing a bowel motion, talk to your doctor about medication which may help this.

Caesarean Birth

You are free to move around as normally as possible. You should follow the previous advice however, because you have had an abdominal operation you may be more tired, do not expect too much too soon.

You may have some post-operative discomfort but you are encouraged to get up and about as soon as you feel able. The information in this section is provided to help you recover from your caesarean section swiftly and safely.

The stitches in your lower abdomen 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 few 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 other small children, encouraging them to climb up to you when you are sitting down rather than bending them up.

Driving

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:

- 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.

Abdominal Muscles

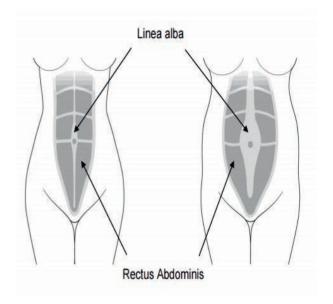
The abdominal muscles are similar to an internal corset. The lower abdominal muscles (below the belly button) wrap around the pelvis and into the lower back. These muscles are extremely useful at supporting the lower back and improving posture.

A small amount of widening of the abdominal muscles, two to three fingers wide is common after most pregnancies and is not a problem. It usually resolves naturally within 8 weeks.

But if:

- The gap is more than three fingers wide
- A visible small bulge protrudes from your midline

then you need to take a few precautions during exercise and other activities.



Advice

- Always get out of bed by bending your knees and gently tightening your tummy muscles as you roll on to your side.
 Place your legs over the side of the bed while pushing up with your arms. Do the reverse to get into bed. Avoid a "sit-up action".
- Avoid activities which involve twisting the body.
- Draw in and hold your tummy muscles when lifting your baby.
- Avoid unnecessary heavy lifting.

Abdominal Exercises

These abdominal exercises are safe to do from the day following your delivery, whatever the type of delivery. The exercises in this leaflet are very gentle but very effective. NEVER do an exercise if it hurts. If so, stop the exercise and get advice from the midwife or physiotherapist. For each exercise, start with a hold of 5 seconds and repeat 5 times. Try to do these exercises 3 times daily. They should only take a few minutes of your time.

Lower Abdominals

Lie on your side with a pillow between your knees.

On your out breath, draw in your lower abdominal muscles (below the belly button) and gently tighten your pelvic floor.



Figure 7: lower abdominals

Hold the muscles in and breathe normally as you count to 5. Then let go.

This exercise can also be done lying on your back with your knees bent or in standing.

Now you can tighten the pelvic floor and the lower abdominals together you should try to use them functionally i.e. when lifting your baby or toddler, hanging out the washing etc.

Pelvic Tilt

Lie on the bed with your knees bent.

As you breathe out, gently draw your abdominal muscles in then flatten your back onto the bed, by tilting your pelvis backwards.

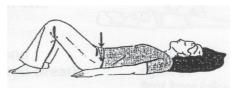


Figure 6: Pelvic Tilt

Breathe normally while holding this position **for 5** seconds. Gently let go.

Try other positions; sitting, standing or lying on side.

Exercise

- Start with short sessions of gentle exercise, such as walking.
- Before returning to high impact exercise (e.g. jogging, aerobics) you should be able to hold your pelvic floor contraction for 10 seconds, and be able to repeat this 10 times.
- Go back to swimming only after your 6-week check and any scars are fully healed.

Emotional well-being

It is important that your partner, family, friends and hospital staff give you as much support as possible while you are in hospital and when you get home. This will speed up your recovery and hopefully prevent problems from developing.

Remember: If you are feeling low, it is important to ask for help from your GP, midwife or health visitor as they may help you to recover more quickly.

All New Mum's - Remember....

It is NOT normal to have a leaky bladder no matter how old you are.

- a) It is never too late to seek help for your pelvic floor muscles (See "further advice" below).
- b) Watch your weight.
- c) Keep up your fluid intake especially if breast feeding.
- d) Avoid taking excessive amounts of caffeine eg tea, coffee, coke etc and alcohol it irritates the bladder.
- e) Rest is important turn off your phone.
- f) Keep meals simple and easy to prepare, and accept all offers of help with the housework.
- g) You can resume sexual intercourse when YOU are ready.
- h) Remember contraception! Loss of sexual desire, vaginal discomfort and dryness are common, try using a lubricant jelly (available in chemist shops).
- i) Many women choose to return to sport/exercise two to three months after delivery, but everyone is different.
- j) Exercise should always be undertaken gradually, particularly if you aren't used to it. Progress slowly.
- k) Avoid bouncing exercises e.g. jogging. Wear a supportive bra. If breast feeding and always try to feed first before exercising.
- I) Please seek support if your mood is low.

If after following the advice in this leaflet you are still experiencing bladder or bowel problems please see your G.P for advice. If necessary they can refer you to see a women's health physiotherapist. If after following the advice in this leaflet you are having ongoing back or pelvis pains please discuss your symptoms with your GP,
Midwife or Consultant.

If necessary they may refer you to see an Outpatient Physiotherapist.

If you have bladder or bowel problems they may refer you to see the

Women's Health Physiotherapist.

Women's Health / Outpatient Physiotherapy Tel: 01624 642158

This document can be provided in large print or audio format on request.



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