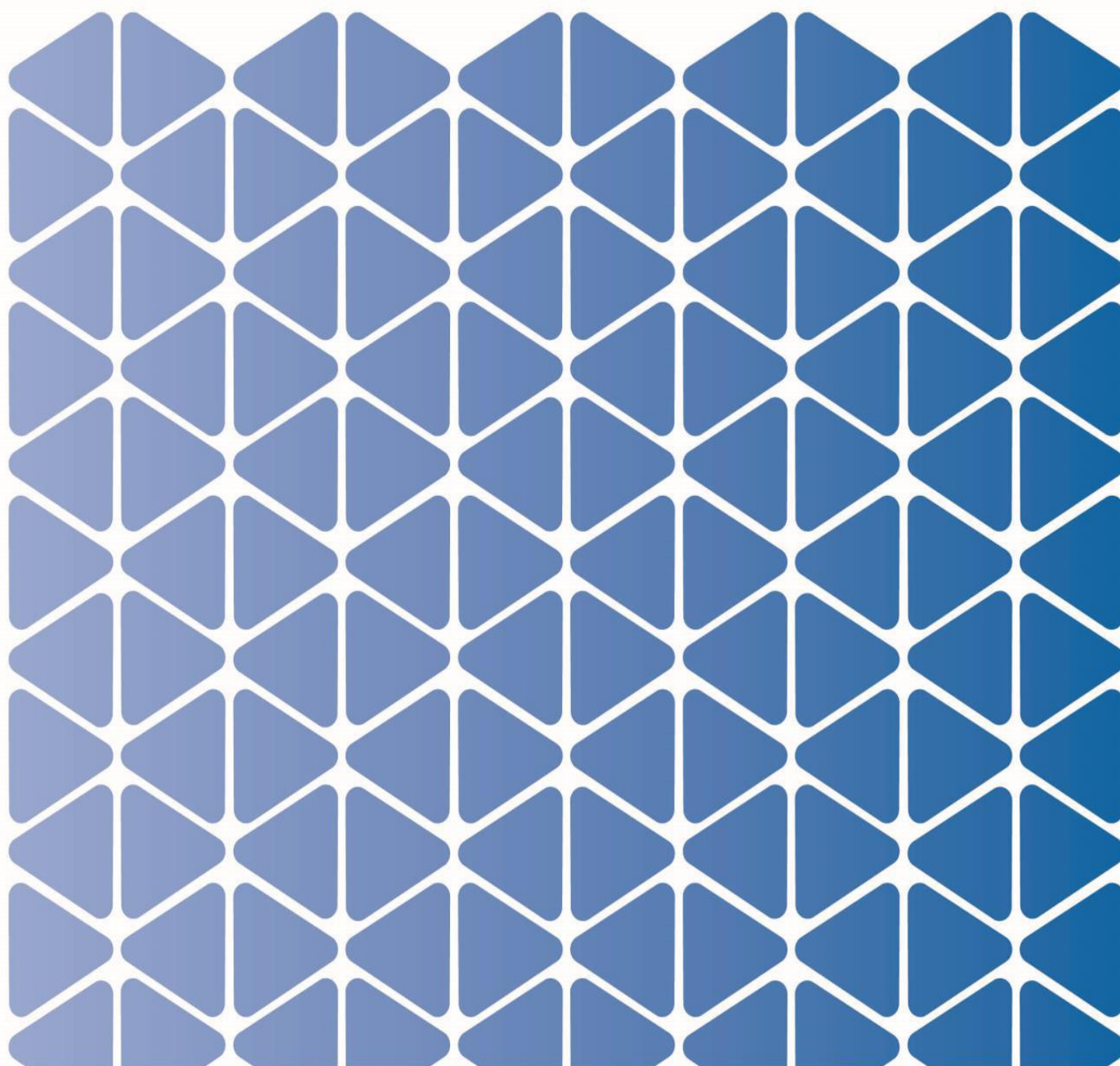


PATIENT INFORMATION

Physiotherapy Department

POSTNATAL EXERCISES & ADVICE



This booklet provides advice and exercises to help aid your physical recovery after the birth of your baby.

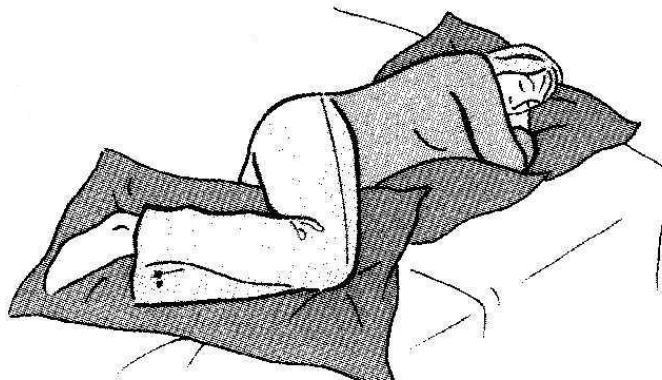
Rest:

After having your baby it is important to have sufficient rest to allow your body to recover. It may be helpful to use a method of relaxation, such as deep breathing. Try to sleep when your baby sleeps.

Comfortable resting position:

Lie on your side and place pillows under your abdomen and between your knees.

This position is comfortable especially if you have had stitches or 'piles' or a caesarean section.



To turn in bed from lying on your back:

Bend both knees, keeping your feet on the bed, support the abdomen with your hand if you have had a caesarean section as you roll onto your side.

To get out of bed:

Bend both knees and roll onto your side. 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 to stand tall.

To get into bed:

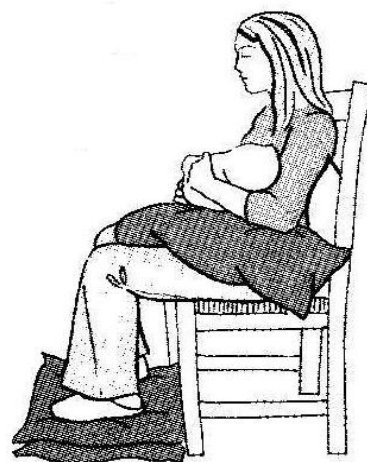
Stand with the back of your knees against the bed. Bend forwards slowly as you sit on the bed, then lower your head and shoulders sideways down onto the pillow, keeping your knees bent and together lift your legs up at the same time.



If sitting is uncomfortable you can get into bed by kneeling on the bed and lowering yourself down onto your side.

Sitting and feeding:

Always sit well back in the chair. A pillow placed behind your waist will support you and may help 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. Make sure that your shoulders are relaxed.



Remember that you can also feed your baby whilst lying on your side in a semi-reclined position (biological nurturing) with lots of pillows for support.

ACTIVITIES IN THE EARLY DAYS AFTER DELIVERY

Bathing:

Kneel down if you are washing the baby in your bath. If you are standing, make sure that the baby bath or sink is at waist height and wrap a towel around the taps to protect the baby.

Changing your baby:

The surface on which you change your baby should be at waist height. It is easier to lift your baby from this height.

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 10

times every hour. Avoid sitting or lying with your legs or ankles crossed as this may restrict blood flow. Try to avoid prolonged standing.

Caesarean delivery – extra information:

You should follow all the above advice, however because you have had an abdominal operation you will feel more tired. 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. If you need to cough, sneeze or laugh, lean forwards supporting your wound with your hands, a pillow or a small rolled up towel.

When you return home, accept all the help that is offered. Try to avoid strenuous activities for the first 6 weeks e.g. prolonged standing, vacuuming, carrying heavy shopping. If you have a toddler, encourage them to climb up to you while you are sitting down rather than bending forward to pick them up.

Avoid lifting anything heavier than your baby for the first 6 weeks and afterwards aim to gradually increase this until you're 12 weeks postnatal.

Before driving again – check with your insurance company that you are covered, this will normally be 4-6 weeks after a caesarean section.

Ensure that you:-

- Can wear a seatbelt comfortably
- Can turn the steering wheel or look over your shoulder without discomfort
- Can do an emergency stop; do practice this in your stationary car.

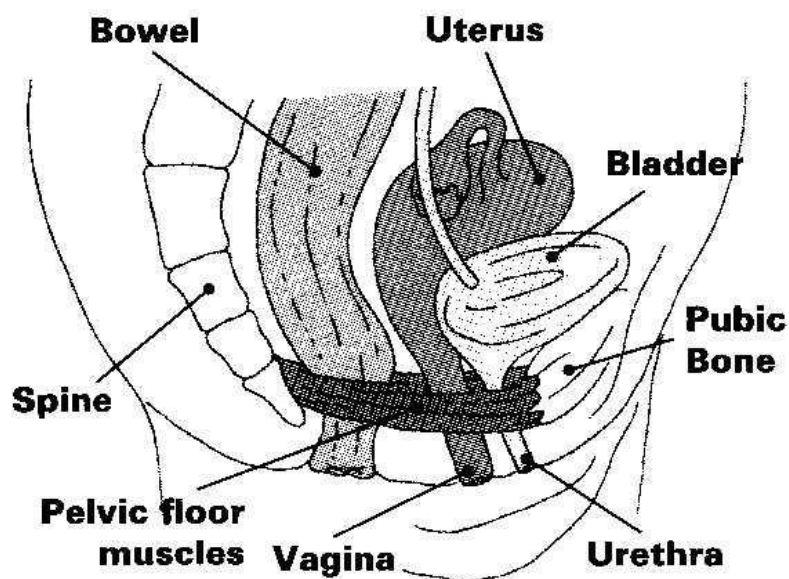
Please see page 11 for advice on how to massage your caesarean section scar.

EXERCISES

Pelvic floor muscle exercises:

The pelvic floor muscles are at the bottom of your pelvis, supporting the pelvic organs. These muscles are stretched and weakened in pregnancy and during a vaginal delivery. Pelvic floor muscle exercises are needed to:-

- Improve muscle strength so you can control your bladder and bowels.
- Help prevent a prolapse of the pelvic organs.
- Increase sexual enjoyment for you and your partner.



REMEMBER – wait until your urinary catheter (if you have one) is removed and you are passing urine normally before starting these exercises.

Start the pelvic floor muscle exercises as soon as possible after you have had your baby. If you are sore after your delivery, try to do them lying on your side. Gentle tightening and relaxing of these muscles may help ease discomfort, pain and swelling and can aid healing if you have a tear or stitches.

HOW TO EXERCISE YOUR PELVIC FLOOR MUSCLES

Imagine you are trying to stop yourself passing urine and wind. Try to 'squeeze and lift' the pelvic floor muscles, gently closing and drawing up the vagina and back passage. Hold the gentle 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 should do gentle abdominal hollowing at the same time (see page 6). Try exercising in different positions (standing, sitting, lying) and establish a routine, such as every time you feed your baby.

It is also important that the pelvic floor muscles are able to work quickly to stop you leaking when you cough, laugh or sneeze. Tighten them as quickly and strongly as you can and relax; do this up to 10 times.

Always tighten your pelvic floor muscles before and during any activity requiring effort, for example when you are lifting, coughing or sneezing. To be effective you need to do the two types of pelvic floor exercises at least 4 times a day for 6 weeks.

Pelvic floor muscle exercises should be continued once daily for life after this.

Further advice

If you are unable to control urine as usual, ask to be referred to a specialist pelvic health physiotherapist.

- Do not stop and start the flow of urine.
- When having a bowel movement, you may find some extra support will make you more comfortable; try holding a wad of toilet paper against your stitches or a rolled up towel against your lower abdomen if you had a caesarean section.
- DO NOT STRAIN OR RUSH.
- Breathing out slowly as you move your bowels or pass urine may also help.
- Drink plenty of water – ensure your urine is pale and your stool is soft.
- Drink as your thirst dictates if you are breast feeding.

EXERCISING YOUR ABDOMINAL MUSCLES

The abdominal muscles form a corset supporting your back and internal organs. These muscles have been stretched and become weakened during pregnancy, 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 abdominal hollowing exercise ('core exercise')

Start doing this exercise lying on your back or your side with your knees bent or sitting with your back well supported.

Place one or both hands on your lower abdomen, gently draw in your lower abdomen away from your hands towards your back, hold for up to 10 seconds and then relax.

You should breathe as you pull in this muscle and your lower back should stay still. Repeat this up to 10 times.

Also try to practice it in standing. Use these deep muscles by doing the hollowing exercise throughout the day – before and during any activity requiring effort, for example when lifting or changing your baby.

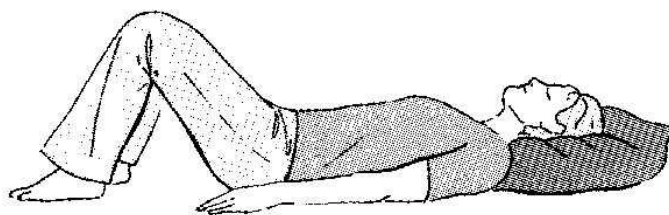
You should feel these muscles working as you do the gentle pelvic floor muscle exercises.

During pregnancy as your baby grows your abdominal muscles naturally lengthen and separate. A gap forms between these two muscles called Diastasis of Rectus Abdominis. This gap is usually about 5cm (3 fingers) wide and gradually closes up after your baby is born. It is important to take care and not let your abdomen dome or bulge while doing any exercises. If it does, stop that exercise, continue with abdominal hollowing and ask your GP/midwife for a referral to a specialist pelvic health physiotherapist.

The next two 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 and your knees bent.

1. Pelvic tilt

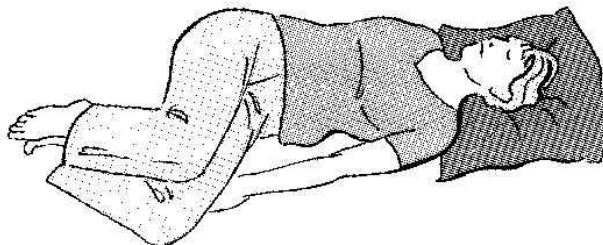
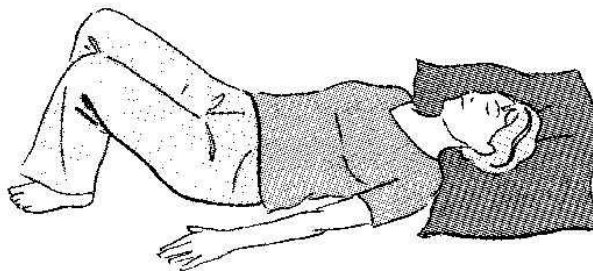
Hollow your abdomen as described previously, tighten your pelvic floor muscles and flatten your lower back into the bed as your pelvis tilts, then release gently. Repeat this up to 10 times.



The pelvic tilt exercises can be particularly helpful for maintaining muscle strength, correcting posture and easing back pain. Progress by holding the tilted position for up to 10 seconds before releasing.

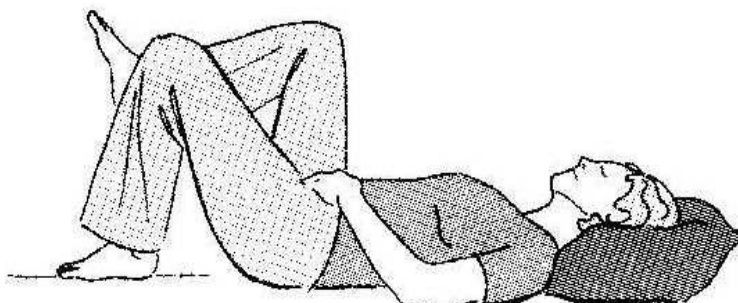
2. Knee rolling

Hollow your abdomen and gently lower both your knees to the right as far as is comfortable. Bring them back to the middle and relax. Hollow your abdomen again and repeat to the left. Do this 10 times each way.



3. Knee bends

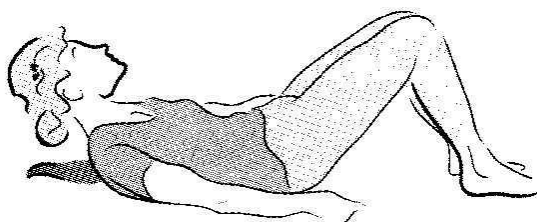
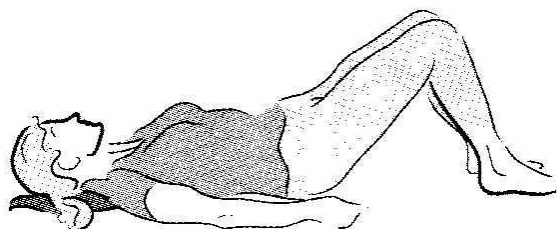
Hollow your abdomen, keep your back flat on the bed and bend one hip and knee up as far is comfortable. Hold for 10 seconds and then bring the leg down so the foot is flat on the bed. Repeat with the other leg. Do this 3 times with each leg.



4. Head lift

DO NOT do this if you have neck pain

Tighten the pelvic floor muscles and lightly draw belly button towards your spine as you gently lift your head a little way off the pillow. Hold for 3 seconds, then lower and relax. Repeat this 3 times. Gradually progress to holding your head off the pillow for up to 10 seconds and repeating 10 times. To progress further, remove the pillow and as you lift your head, raise your shoulders a little but ensure that you do not strain your neck muscles as you do this exercise. Increase the length of hold and repetitions as before.



Try to do these abdominal exercises at least 3 times per day for 6-8 weeks.

It can take 3-6 months for your muscles to start to feel strong again and the overall recovery process can take up to a year. Listen to your body and progress back to any activities and day to day tasks, such as heavy lifting, as gradually as you can.

Remember if you have pain or start to have any symptoms of a problem with your pelvic floor (such as the below) then please contact your midwife, health visitor or GP who can refer you to the Pelvic Health Specialist Physiotherapy team.

Symptoms of pelvic floor problems can include:

Not being able to hold in wee or poo, pain with sex and /or the feeling of something slipping out of the vagina.

You can visit our website for further information:

www.squeezelifthold.co.uk

If you do have to lift:-

- Always try to bend your knees.
- Hollow your abdomen.
- Tighten your pelvic floor muscles.
- Breathe out as you lift.
- Hold what you are lifting close to the front of your body.



EXERCISE

Becoming active again as soon as possible after delivery may mean that there is less chance of developing postnatal depression, BUT exercise should relieve stress rather than making it worse. Gradually building up exercise and your fitness will help to avoid injury and help you to feel stronger.

Care should be taken not to start high impact activity 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.

You can start swimming once you have had a week clear from bleeding or discharge. If you have had a caesarean section, you should wait until after your 6 week GP check-up. After 6 weeks it is usually safe to recommence gentle exercising and sport as long as you have perfect bladder control and are performing all the postnatal exercises above without difficulty. By 12 weeks you can introduce high impact exercises, such as running or weight lifting.

Always listen to your body and remember to do your core abdominal hollowing and pelvic floor tightening during exercise whenever you can.

People recover at different rates, many feel extremely tired after childbirth so do pace yourself, accept offers of help and set aside regular time to rest.

SEXUAL INTERCOURSE

Some people prefer to wait 6 weeks until after 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 you have persistent discomfort or pain with intercourse as your GP for further help.

CONTACT INFORMATION

Ask to see a specialist pelvic 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.

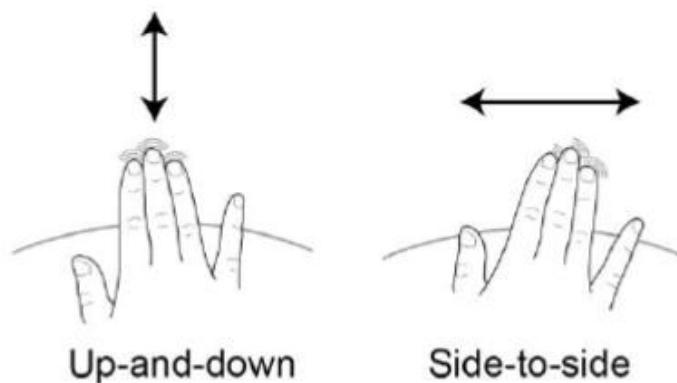
HOW TO MASSAGE YOUR CAESAREAN SECTION SCAR

You can start massaging your caesarean section scar at 8 weeks postnatally as long as the scar is healed with no oozing/weeping.

At 8 weeks it is recommended to massage around the scar rather than directly onto it, try to do this daily for maximum benefit, but if your time is limited aim for 3 days a week.

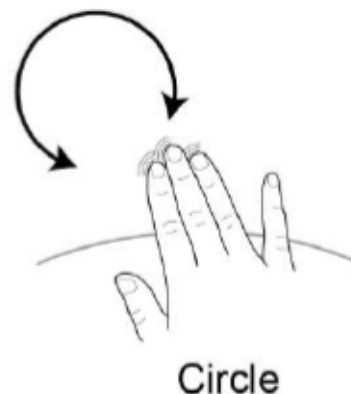
8 weeks:

Start with clean hands with no lotion, lie on your back with your legs flat. Place your fingers about 2 – 3 inches below your scar and start to move your fingers side to side and up and down along the length of your scar.



Repeat this above the scar.

To help stretch the skin more make small circles the length of your scar, starting with clockwise below and above the scar and then repeat anti-clockwise above and below the scar.



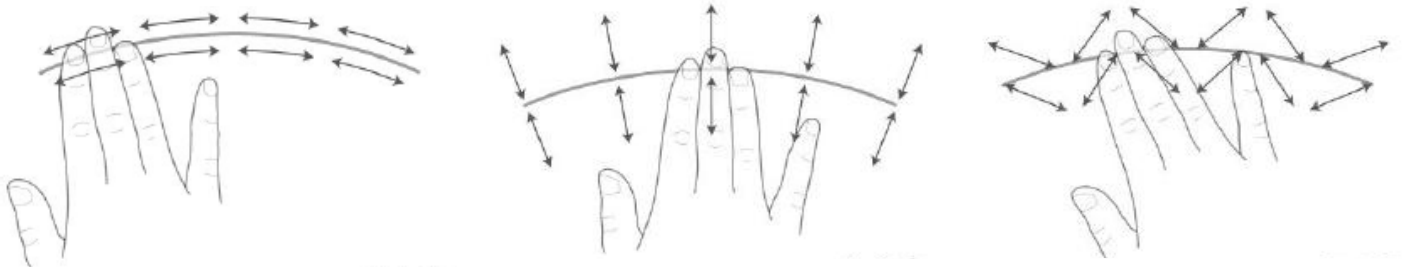
Tip:

- If your scar tissue is too sensitive to start with, aim for repeating 5 times and gradually increase to 10 times.
- You may feel a light stretching sensation and different areas may vary in how easily they stretch, feel free to adjust the depth of pressure on the tighter areas.
- You should not feel any pain doing this.

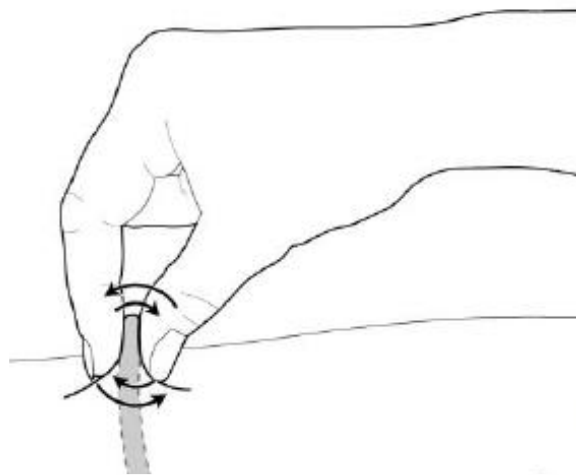
12 weeks +:

At 12 weeks postnatally your scar will be at the stage where you can start massaging directly onto it.

Using 2 or 3 fingers together, place your fingers directly onto one end of the scar and sink down slightly and then move your fingers side to side, up and down and in a V shape. Do this along the length of the scar, 5 – 10 times.



Another form of scar release is to lift and roll the scar. Start at one of the end of the scar and pick it up using your thumb and index finger. Roll the scar between your fingers for 10 seconds and repeat the length of the scar.



Tips:

- This should not be painful, work within your tolerance only.
- To make the tissue release deeper you can bend your knees up instead of having them flat.
- Feel free to spend more time on areas that feel tighter with these methods.

QUERIES

If you have any queries about any of the advice contained in this booklet or if you require further advice from a Chartered Physiotherapist please contact your local physiotherapy department between 08:30 and 16:30 Monday – Friday on the direct dial numbers below:-

Worcestershire Royal Hospital

Tel: 01905 760622

Alexandra Hospital, Redditch

Tel: 01527 512114

Kidderminster Treatment Centre

Tel: 01562 513066

Feedback for Inpatient Therapies

Please scan the QR code or follow the link below:

If you have been seen by a Physiotherapist or Occupational Therapist during your admission, please leave us some feedback by scanning the QR code or following the link and filling in the short survey.



<https://apps.worcsacute.nhs.uk/PublicSurvey/AHPFeedback>

Ward admitted to: _____

Therapy team who treated you: _____

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.