

# Physiotherapy Care Following a Vaginal Delivery

Exercises and Advice





Congratulations on the birth of your baby! There is a lot of focus on your baby, but you also need to allow some time to look after yourself and allow your body to recover. Remember that pregnancy causes stretching and weakening of your abdominal and pelvic floor muscles, so you are at an increased risk of hurting your lower back and pelvis. The following advice and exercises are aimed at helping you recover, regain your muscle strength and avoid any injuries.

## Getting out of bed

- Make sure you avoid any sit-up type movements
- Bend your knees up, one at a time, keeping your feet flat on the bed
- Roll onto your side, keeping your knees together
- Push up on your elbow to a sitting position whilst moving your legs over the side of the bed
- Sit on the edge of the bed with your feet flat on the floor, lean forwards and stand up.



## Abdominal and back exercises

These gentle exercises should be commenced as soon as you are able, to assist with:

- Toning the abdominal muscles
- Relieving backache
- Assist with passing of wind

### Pelvic rocking technique

Lying on your back with knees bent and slightly apart:

- Draw in your pelvic floor and lower stomach muscles
- Tilt the hip bones backwards and flatten your back into the bed
- Lift your tailbone slightly, keeping your bottom on the bed
- Keep breathing, hold for 5 seconds
- Repeat 5–10 times.



## Knee rolling technique

Lying on your back with knees bent and together:

- Roll both knees gently to each side, keeping shoulders flat on the bed
- Keep breathing, hold for 5 seconds
- Repeat 5 times each side.



## Core abdominal technique

Begin in side lying or on your back, progress to sitting and then standing:

- Keep your lower back flat
- Draw your belly button in towards your spine whilst breathing out (your lower back shouldn't move)
- Hold your belly button in this position whilst breathing to the count of 10
- Relax for the same length of time you held
- Repeat 10 times
- Once you have achieved this, try to contract your PFM's at the same time.



## Back Care

After giving birth, your back is more vulnerable to injury. This is due to a number of factors including:

- Weak abdominal and pelvic floor muscles
- Lax ligaments due to hormones
- Increased activities of daily living due to baby care needs

## Posture

Following your pregnancy, it is important to maintain good posture to prevent back strain and injury. This is achieved by sitting and standing with a straight back, shoulders back and chin tucked in.

- Sit tall
- Stand tall
- Walk tall



## Lifting

Whilst pregnant and up to 6 months following the birth, a correct lifting technique is vital in preventing back strain and injury.

- Bend your knees
- Brace your abdominals
- Bring the object close to your body
- Breathe out as you lift.



## Back care at home

It may take up to 6 months for your muscles and ligaments to recover and regain strength. Take time and think about your posture with all activities.

### Advice to avoid back injury/pain post-delivery:

- Always use the correct lifting technique
- Perform abdominal and PFM exercises to regain strength and support your back
- Avoid heavy lifting:
  - Try to avoid taking baby capsules in and out of the car
  - Try not to lift heavy baby baths
  - Avoid lifting washing baskets full of wet clothes
- When feeding your baby ensure a good back and neck posture (use pillows and a supportive chair).



## Safe exercise in the first few months after having a baby:

Regular low impact aerobic exercise will help you recover more quickly. The best exercise you can do is walking with your baby in the pram. While you are walking remember to keep your core abdominals gently tightened. You must avoid any high impact exercises or contact sports for at least 3 months, to allow sufficient time for your ligaments to tighten, your rectus diastasis to come together, and for your deep abdominal muscles and pelvic floor muscles to regain strength. Avoid heavy weights and sit-up exercises for at least 6 weeks. Swimming and aqua aerobics are beneficial and can be resumed by about 6 weeks, once your bleeding has stopped and any stitches have healed (check with your Obstetrician).



# Good Bladder and Bowel Habits

## Good Bladder habits

- Drink 1.5 – 2 litres of fluid daily (Increase to 3L if breastfeeding)
- **Limit** caffeine, alcohol and soft drink intake
- Empty bladder when it feels full, not 'just in case' or too often
- If bladder sensation has not returned fully yet, aim to time your voids 3-4 hourly
- Sit on the toilet seat. **DO NOT HOVER.**

It is normal to pass urine 4-6 times daily and 0-1 times overnight.

You should aim to empty 300-500mls each time.

## Good bowel habits

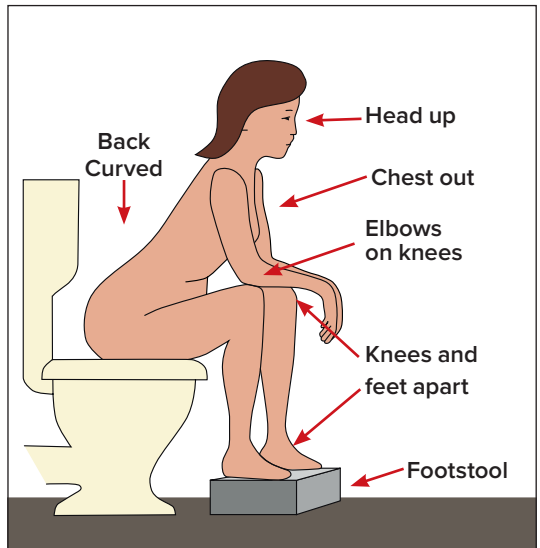
- Follow a healthy diet full of fresh fruit and vegetables, water and fibre
- Empty your bowels **ONLY** when you feel an urge
- Do **NOT** strain. Relax and take your time
- Use a good sitting posture on the toilet (refer to diagram on next page)
- Engage in regular exercise to assist with a healthy bowel process.

It is normal to open your bowels from 3 times daily up to 3 times weekly.

## Posture for bowel emptying

- Keep your back straight, lean forwards and rest your forearm on your knees
- Place a small stool underneath your feet, or, lift your heels slightly
- Take a deep breath in and on breath out bulge your tummy
- Make a hissing sound or an 'eeeeee' sound to help activate the correct muscles

You can support your perineum by applying gentle pressure with a clean pad or toilet paper.





## How to manage perineal discomfort

The perineal region (perineum) is the area of soft tissue between the vagina and anus. During labour and delivery, this area is stretched and can sometimes tear or be cut (episiotomy) to allow the passage of your baby. This can result in some degree of short-term discomfort and swelling.

If you have had a tear, you may have been told it was one of the following:

- 1st Degree Tear: a laceration extending to the perineal skin.
- 2nd Degree Tear: a laceration extending to the perineal muscles (pelvic floor).
- 3rd Degree Tear: a laceration extending through to the anal sphincter.
- 4th Degree Tear: a laceration extending through to the lining of the anal canal.

*If you have had an episiotomy, this will be through the vaginal wall and perineum.*

### Early Management

Limit the amount of time spent sitting. Alternate positions from lying on your back or side, to short periods of walking around the ward. If you are required to sit for longer periods, ensure it is on a soft surface. Keep the area clean with warm water only (no soaps). Change pads regularly. Speak to your doctor/midwife if you notice any offensive smelling discharge, or have increased pain or bleeding.

### Ice

Apply ice (e.g. frozen maxi pads or ice fingers) to area for 10-15 mins 2 hourly.

### Activate your Pelvic Floor muscles

5-10 gentle contract/relax exercises as tolerated will help reduce the swelling and encourage healing.

### Use Pain relief

As discussed with your doctor or midwife if required.

### Avoid Straining

Follow a healthy diet and maintain regular bowel motions. Drink plenty of water, aim for 1.5-2L/day. Speak to your doctor/midwife if suffering from constipation or haemorrhoids.



# Pelvic Floor Muscles (PFM's)

## What is the Pelvic Floor?

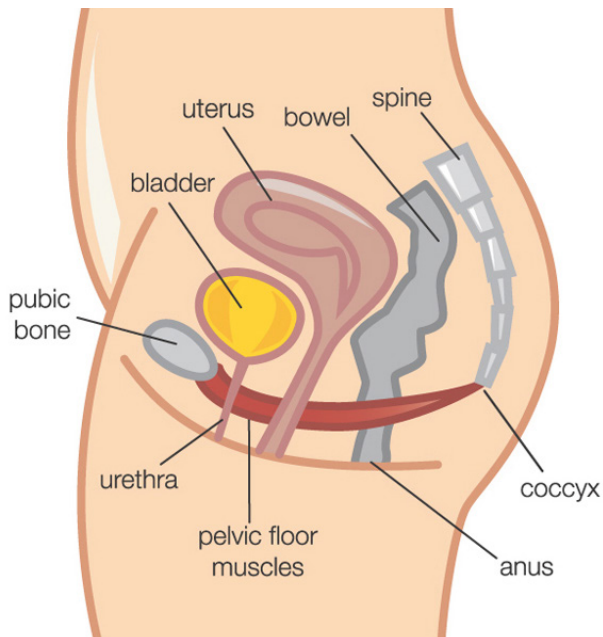
The pelvic floor are a sling of muscles that sit at the base of the pelvis. These muscles stretch like a hammock from the pubic bone to the tailbone (coccyx) and from side to side. They are part of a group of muscles referred to as your “core”.

## Why is the pelvic floor important?

- They maintain continence of your bladder and bowel
- They support your abdominal organs
- They assist in better sexual function
- They have a role in supporting your back
- They prevent and reduce the risk of prolapse.

## When to exercise

You may start doing your pelvic floor exercises 24 hours after birth (If a catheter is in place, wait until it has been removed). These exercises will help your perineum and vagina heal quickly by promoting circulation, which will assist in the removal of swelling and bruising.



## How to do your pelvic floor exercises properly

You can do your pelvic floor exercises in any position however starting in a side-lying position may be easiest. It is important to progress your exercises into sitting and standing as soon as possible.

### Seated Technique

1. Sit tall and lean forwards slightly.
2. Relax your thigh, bottom and tummy muscles. Focus only on your pelvic floor muscles.
3. Breathe out and gently tighten around your front passage. Imagine that you are trying to stop the flow of urine.
4. Breathing normally, be aware of those muscles that may be tensing and focus on relaxing them.
5. Again gently tighten around your front passage and draw up the front part of the vaginal wall.
6. You should feel a gentle lift in the muscles at the front and back. After childbirth it is important to focus on the front part of the pelvic floor.
7. In the period after birth, practice doing these little and often throughout the day. Aim for about 4-5 gentle contractions at a time.
8. Take the time to relax fully in between these contractions
9. When you can achieve 10 of these gentle contractions in a row, known as a 'set', progress to repeating 2-3 times daily

Remember to turn on your PFM's (known as the 'Knack') when you feel you are about to leak including when you

- Cough, sneeze or laugh
- Lift objects
- Carry your baby

Success does not happen overnight. PFM's can take 6-12 weeks after birth to regain strength. Work on this program daily to ensure that your pelvic floor muscles are supporting you in everyday living.

*If you have any queries or concerns, please consult your Physiotherapist.*



**Disclaimer**

*All information contained in this handout is current at the time of revision. If you have concerns about your health, you should seek advice from your general practitioner or health care provider. If you require urgent care you should go to the nearest Emergency Dept.*

