



CRYSTAL PALACE
PHYSIO GROUP

Making People Better

Better Bumps Pregnancy Advice Booklet



INVESTORS
IN PEOPLE



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Introduction

This is a specific advice programme to enable effective self-management of pregnancy-related symptoms on a daily basis within the workplace.

Content

1. **Education on the changes that take place during pregnancy** with particular focus on the Musculoskeletal System.
2. **Advice on common muscle and joint disorders** that the individual may experience during pregnancy. For example lower back pain, changes to body mechanics and pubic symphysis disorder.
3. **Optimal management and prevention** of these conditions including:
 - **Specific exercises** to prevent and alleviate muscle and joint conditions that may occur during pregnancy.
 - The importance of **maintaining physical activity** during pregnancy with suggestions of appropriate exercises and sign-posting to local resources.
4. **Work factors** that may influence the individual while pregnant, in particular work station exercise, optimal Display Screen Equipment use and the importance of micro-breaks.

What happens during Pregnancy?

Pregnancy is a period of considerable changes in a woman's body. These changes, affecting virtually every part of her body, are all geared towards growing and delivering a healthy baby, without harming the mother.

Physiological changes

- Breast size increases-changes spinal posture
- Fatigue
- Centre of gravity moves forward – increased spinal curves
- Increased support required from lumbar spine musculature
- Weight gain (Approx 10-12kg in total):
 - 0-20/40 = 0-2kg in total
 - 20-30/40 = 1 Kg per month
 - 30/40 plus = 1Kg per fortnight
- Increase weight on pelvic floor muscle

Musculoskeletal symptoms

- Increased joint laxity
- Exacerbation of latent problems
- Alteration of centre of gravity
- Muscle imbalance – lengthening/ weakness
- Increased intra-abdominal pressure + stretching of abdominals
- 66% women get Low Back Pain, 25% Pelvic Girdle Pain

1 in 3 women suffer from Women's Health problems which can often be treated successfully with physiotherapy. These can either be:

1. Ante Natal (e.g. Pelvic Girdle Pain, Low Back Pain, Carpal Tunnel Syndrome)
2. Post Natal (Back and Neck Pain, Pelvic Floor Weakness)
3. Gynaecological Problems (such as Incontinence or Overactive Bladder Syndrome)

Ante Natal

Low back pain and pelvic problems are largely due to the changing spinal posture and the release of specific hormones such as Relaxin, which peaks during the 1st trimester, levels off during 2nd trimester then increases again towards the end of pregnancy.

Increased Relaxin results in:

- Relaxed ligaments around pelvis and lower back which can cause physiological problems
- Softening of the cervix
- Relaxation of pelvic floor muscles
- Prepares body for vaginal childbirth

Post Natal

In the post natal period, women may find that they are carrying out more lifting and bending activities which can place more strain onto the lower back resulting in musculoskeletal problems.

Gynecological

1. Incontinence is a common problem both during and after pregnancy. Pregnant women are sometimes unable to prevent a sudden spurt of urine or a small leak when they cough, laugh or sneeze, when they move suddenly, or just get up from a sitting position. This may be temporary because the pelvic floor muscles (the muscles around the bladder) relax slightly to prepare for the baby's delivery.
2. Overactive Bladder Syndrome – An increased need to urinate can often start in early pregnancy, sometimes continuing throughout pregnancy. In later pregnancy, it is the result of the baby's head pressing on your bladder. If you have any pain while passing water or you pass any blood in your urine, you may have a urine infection, which will need treatment. Drink plenty of water to dilute your urine and reduce pain. You should contact your GP within 24 hours of first noticing these symptoms.

Common Pregnancy-Related Musculoskeletal Conditions

Pelvic Girdle Pain

What is PGP?

Pregnancy-Related Pelvic Girdle Pain (PGP) is a common condition that relates to pain in the joints that make up your pelvic girdle. This includes the symphysis pubis joint (SPJ) at the front and/or the sacroiliac joints (SIJ) at the back.

The sooner it is identified and assessed the better it can be managed. 1 in 5 pregnant women experiences discomfort during pregnancy, but severity can vary.

If you understand how PGP may be caused, what treatment is available, and how you can help yourself, this may help to speed up your recovery, reducing the impact of PGP on your life.

Common Symptoms

- Difficulty walking
- Pain when standing on one leg e.g. climbing stairs, dressing or getting in/out of the bath
- Pain and/or difficulty moving your legs apart e.g. getting in/out of the car
- Limited or painful hip movements e.g. turning over in bed
- Difficulty lying in some positions e.g. on your back or side
- Pain during normal activities of daily life
- Pain and difficulty during sexual intercourse

Treatment

Following a full assessment including careful examination of the pelvis, back, hips and surrounding musculature, the Physiotherapist will discuss the plan for treatment with you. Physiotherapy treatment aims to improve your spinal and pelvic joint position and stability, relieve pain and improve muscle function.

This may include:

- Manual therapy to make sure your spinal, pelvic and hip joints are moving normally or to correct their movement.
- Exercises to retrain and strengthen your stomach, back, pelvic floor and hip muscles.

Advice, including:

- Back care
- Lifting
- Suggested positions for labour and birth
- Looking after your baby and any toddlers
- Positions for sexual intercourse
- Other types of pain relief such as acupuncture or TENS
- Provision of equipment such as crutches, pelvic girdle support belts, wheelchairs (if necessary).

It is important to tell your Physiotherapist if you feel you have not made a full recovery and discuss the options for further treatment.

Carpal Tunnel Syndrome

What is Carpal Tunnel Syndrome?

Carpal Tunnel Syndrome (CTS) is caused by compression of one of the nerves that controls sensation and movement in the hands, the median nerve. The carpal tunnel is a narrow passage in your wrist made up of small bones and a tough band of tissue that acts as a pulley for the tendons that bend the fingers. It isn't known why the median nerve becomes compressed in most cases, although certain things are thought to increase the risk of Carpal Tunnel Syndrome developing.

According to the NHS, up to about 50% of pregnant women develop Carpal Tunnel Syndrome. CTS in pregnant women often gets better within three months of the baby being born, although it may need treatment.

Common symptoms

The symptoms of CTS tend to develop gradually and usually start off being worse at night or early in the morning. These symptoms typically occur in: the thumb, the index finger, the middle finger and half of the ring finger.

The three main symptoms are:

- Tingling
- Numbness
- Pain

Other possible symptoms of CTS include:

- A dull ache and discomfort in the hand, forearm or upper arm
- A burning, prickling sensation (paraesthesia) in the hand similar to pins and needles
- Dry skin, swelling or changes in the skin colour of the hand
- Becoming less sensitive to touch (hypoesthesia)
- Weakness and wasting away (atrophy) of the muscles at the base of the thumb

Treatment

Non-surgical treatments, such as wrist splints (to keep the wrist in a neutral position) and corticosteroid injections (to reduce inflammation), are used to treat mild or moderate symptoms; however in some women, symptoms can continue for more than a year. In these persistent cases, and when other treatments have failed to relieve symptoms, surgery is usually recommended to relieve pressure on the median nerve.

Back Ache

As previously discussed the ligaments in your body naturally become softer and stretch during pregnancy to prepare you for labour. This can put a strain on the joints of your lower back and pelvis which can cause back pain.

Here are some preventative measures that can help to reduce the risk of back pain, and how to cope with back pain should it occur;

- Avoid lifting heavy objects, and bend from the knees when picking objects off the floor
- Move your feet rather than twisting your spine when turning
- Sit with your back straight and well supported
- Avoid stooping where possible
- Relative rest

Taking steps to ease soreness and tension and generally taking good care of yourself can't hurt. At the very least, you'll feel better temporarily.

- Relaxation techniques may help you cope with the discomfort and may be especially useful at bedtime if your back pain is just one more thing that makes it hard to get to sleep.
- Try heat or cold. There's some evidence that heat may provide a bit of short-term relief. Try a warm bath, hot water bottle or a cold pack. Make sure to cover the pack or bottle with a thin cloth to protect your skin.
- Treat yourself to a massage. Prenatal massage by a trained therapist may provide some relief.
- If your pain is severe, your caregiver may prescribe pain medication. Other options you may want to discuss are: Physiotherapy, Acupuncture, and the use of a sacral belt.

The National Institute for Health and Care Excellence (NICE) advises that exercising in water, massage therapy, and group or individual back care classes might help to ease back pain in pregnancy.

Some local swimming pools provide aquanatal classes (gentle exercise classes in water, especially for pregnant women) with qualified instructors.

Ask at your local leisure centre.

Being in water will support your increasing weight.

Exercising in Pregnancy

Physiological changes during pregnancy

Heart

The amount of blood in your body increases to cater for your baby, therefore your heart has to beat faster to cope with the amount of blood. This can sometimes affect your blood pressure and make you feel dizzy.

After 16 weeks you should avoid lying on your back as the weight of your baby can press onto your blood vessels making you feel unwell.

To keep your heart rate at a sensible level while exercising during pregnancy you should monitor your exertion, a good gauge is that you should be able to maintain a conversation while exercising.

Lungs

Your body will require more oxygen so your breathing rate will be slightly higher than normal.

Joints

Increasing hormone levels during pregnancy make your ligaments become more relaxed causing your joints to be less stable. This along with an increase in your weight can cause you to adopt poor postures, putting more strain on your back and pelvis. It is important to try and maintain a good posture and adequate strength to support all of your joints.



Effects of exercise to you and your baby:

- Keeps your heart, lungs, strength and stamina as good as possible
- Keep your weight within a healthy range
- Improve your circulation
- Improve your posture and balance
- Prepares you for labour
- Endorphins released during exercise help to maintain a positive attitude

You should not be exercising if you experience any of the following symptoms:

- Vaginal bleeding
- Reduced foetal movements
- Serious heart, lung, kidney disease
- Previous miscarriage or premature baby
- High or low blood pressure
- Placenta praevia after 26 weeks
- Acute infectious disease

You should consult your doctor before exercising if you have;

- Asthma
- Type 1 diabetes
- Early placenta praevia
- Anaemia
- Heavy smoker
- Extremely under or over weight

Advice when exercising

Exercise for 30 minutes 3-7 times a week depending on your previous level of fitness. If you didn't exercise prior to pregnancy start with gentle pelvic floor exercises and consult a professional before progressing further.

Avoid

- Contact sport
- Exercising to the point of fatigue
- Hot/ humid climates

Wear

- A supportive bra
- Loose/ cool clothing
- Supportive trainers

Other points to consider

- Keep hydrated and eat enough to fuel your exercise but not immediately before exercise
- Warm up with gentle exercises
- Cool down with sustained gentle stretches (avoid overstretching)
- Monitor your exertion (you should be able to maintain a conversation) Pay attention to how your body feels

Stop if you feel:

- Pain
- Shortness of breath
- Dizziness/ headaches
- Palpitations
- Vaginal bleeding

Pelvic Floor Rehabilitation

Many women experience Pelvic Floor problems, especially during or after pregnancy. The Pelvic Floor muscles form a natural corset supporting your back and internal organs. These muscles can become stretched and weakened during pregnancy.

Weakness of the Pelvic Floor can lead to a number of problems such as incontinence, urinary urgency and reduced satisfaction during sexual intercourse. In order to overcome these problems exercises to strengthen the Pelvic Floor are required.

How to use your Pelvic Floor muscles

It is important to get the right muscles working in the right way.

To activate your Pelvic Floor muscles:

- Imagine that you are trying to stop yourself passing urine or wind, at the same time. Think about squeezing tightly inside your vagina. You should feel your muscles 'lift and squeeze'.
- Ensure you rest for 4-5 seconds between each squeeze. You should not feel your buttocks or legs tightening.

Once you have mastered this technique you can begin exercising the Pelvic Floor.

Exercises for the Pelvic Floor

- Start gently and rhythmically. Hold the squeeze for a few seconds and then relax.
- Gradually increase the time and repetitions until you can squeeze for 10 seconds, 10 times.
- Try in different positions such as lying, sitting, standing and repeat often throughout the day.
- It is also important the Pelvic Floor muscles can react quickly to prevent leaking when coughing, sneezing, laughing etc. Practise tightening your Pelvic Floor muscles as quickly and strongly as you can and repeat 10 times.

To be effective you need to practise these exercises at least 3 times a day

It can take several months for the Pelvic Floor muscles to return to their previous strength, but exercise does help.

Your Physiotherapist can help progress your exercises and provide additional advice/treatment.

Ante and Post Natal Pilates

Pregnancy and childbirth are a time of significant change for the body. Ante and Postnatal Pilates is a great low impact way of exercising during and after your pregnancy, and an excellent way of preparing it with the changes you are undergoing and the added stresses you are experiencing.

Not only will it help you maintain a good level of fitness it is also a great way to increase the strength of your pelvic floor muscles and enjoy the benefits of low level, safe exercise.

Antenatal Pilates can also help with your posture, spinal mobility and pelvic stability which can help decrease low back and pelvic pain. These symptoms are often experienced during pregnancy due to the increased load placed on your body and the general softening of the ligaments around the pelvis.

Exercising appropriately during your pregnancy is a good way of maintaining your fitness levels and may reduce the risk of pregnancy related disorders such as gestational diabetes. It can also help you recover quicker in your post natal period, and help you to get your body back. It can improve breathing control, circulation and help you maintain flexibility and a healthy weight.

Home Exercises for Back Pain

1. Childs Pose



2. Clam



3. High squeeze



4. Cat and Dog stretch



Good Ergonomics in Pregnancy



Balancing pregnancy and ergonomics can seem daunting, but these tips will help keep you safe and injury-free:

- A "neutral" body position is key. Sit straight, being careful not to slouch or be too rigid. Your feet should comfortably rest flat on the floor with your knees slightly below your hips.
- Keep all essential items within easy reach at your work space. Determine what items need to be close and keep those items within easy reach to prevent strain.
- Dock your laptop if you use one. Sustained use of a laptop is not beneficial and certainly not with a bump in the way. Place your laptop on an elevated surface (eye level) and plug in a separate keyboard and mouse.
- Sit in a suitable chair. Adjust the lumbar support to provide comfort. This is especially important in the later stages of pregnancy. Alternatively try using a lumbar roll for additional support. Altering the chairs tilt when you are on the phone, for example, may help to relieve tension in the lower back.
- Take breaks - stretch, walk around, refocus and rehydrate your eyes. Even if it is for just a minute or two, being intentional about breaks will help you get through long days without injury.
- Carry out some exercises at your desk to encourage mobility of the lumbar spine and pelvis. See below for some examples.
- A change in posture can help to alleviate strain. As your bump gets bigger, you may find it helpful to stand more frequently.

Desk-Based Exercises for Pregnancy

1 – Pelvic tilt in standing



2 – Forward bending in sitting



3 – Side bending in sitting



4 – Chair rotations



Try these exercises 10x per hour whilst at work. These will encourage blood flow and help to alleviate any stiffness or pain associated with prolonged sitting.

About us

We are an **Award Winning** specialist Occupational Physiotherapy provider.

We are recognised as one of the **U.K.'s Leading Providers** of Physiotherapy and related services.

We have a team of experts who are **committed to excellence** in clinical standards and customer service.

We work with public and private sector organisations to reduce their musculoskeletal (MSK) workplace absence.

We offer **Health and Wellbeing services** ranging from workshops targeting office workers to those undertaking manual tasks and overall wellbeing services.



Contact Us Now

Head Office
Crystal Palace Physio Group
Jubilee Stand
National Sports Centre
London



020 8778 9050
020 8659 1501
enquiries@cpgg.co.uk
www.cpgg.co.uk