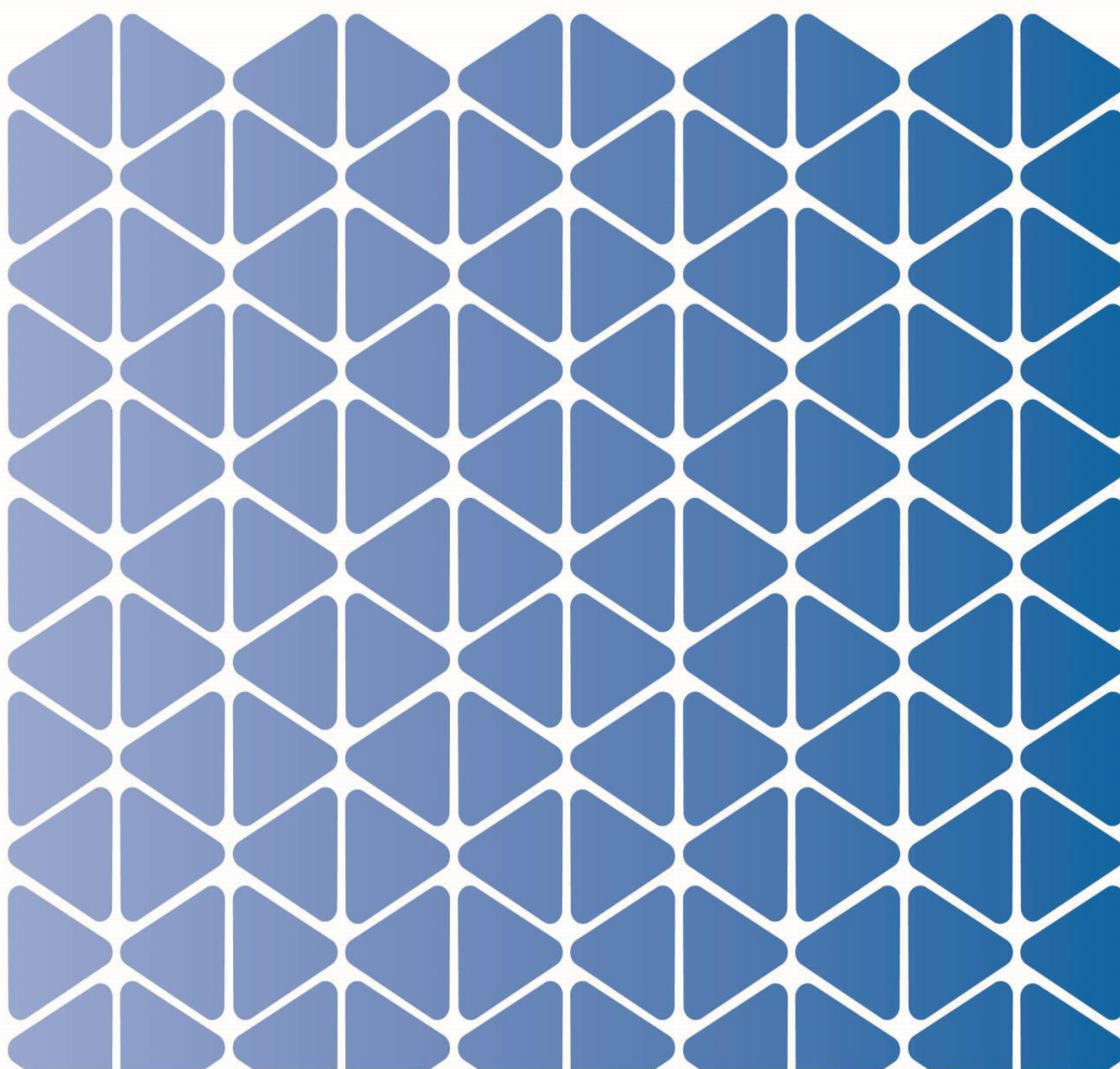


PATIENT INFORMATION**POSTNATAL PHYSIOTHERAPY
ADVICE**

Introduction

This leaflet is a general guide which supports recovery following childbirth.

In this leaflet we will advise on recovering from:

- Vaginal delivery, including assisted deliveries such as forceps and ventouse.
- Episiotomies and perineal tears
- C-Section delivery
- Postnatal return to day-to-day activities and exercise.
- Pelvic Floor exercises
- Tummy muscle exercises
- Further resources
- How to get further support if you need it.

GENERAL INFORMATION

During your Pregnancy, your body has been through a lot of changes. Recovery can take a long time and changes happen gradually, so be kind to yourself and allow your body the time it needs. Muscle strengthening can take a minimum of five months and generally takes around twelve to eighteen months for full recovery however many people feel better before this.

AFTER ANY TYPE OF BIRTH:

The first 24 hours:

Start to move around

- Try to get up and move around gently when you feel able (and the effects of any anesthetic or epidural have worn off).
- This helps healing, circulation, breathing and bladder and bowel function and prevents infection.
- Take deep breaths regularly and help your lungs expand into the space your bump has been limiting whilst you are pregnant.

As soon as you can:

Start your Pelvic Floor Exercises (EVEN IF YOU HAVE HAD A C-SECTION)

- If you have a catheter wait for this to be removed and until you have passed urine independently before starting pelvic floor exercises.
- These help strengthen the muscles that support your bladder, bowel and pelvic organs. They prevent leakage of urine (wee) or faeces (poo), keep your organs supported and support your back and pelvis. They are also important in sexual activity. You can do these in any position you feel comfortable in and can feel them working.
- You can do these even if you have stitches, bruising or swelling, as they help with circulation and recovery.
- To do these, **gently** squeeze from your back passage as if stopping wind or a poo, then as if you are stopping a wee and gently lift upwards inside towards your lower tummy. You should not use your tummy, buttocks or legs and you should breathe normally whilst holding the squeeze.

- Aim for around **10** quick squeezes + **10** long squeezes (holding up to **10** seconds) **3** times a day. Remember to relax fully between squeezes.
- Set a reminder on your phone or link it to something you do regularly already such as feeding the baby, or after you have finished on the toilet. The Squeezy App (which can be downloaded from your app store for a one-off payment) is also a useful reminder tool.
- Once you can do these in a basic position you can start to join them in with basic movements such as getting up from a chair, stepping up a step and when lifting your baby, or washing basket for example. For further progressions please see our website in the resources section at the end of this leaflet.

Bladder Care

The sensation of going for a wee may not return immediately. Make sure you are emptying your bladder every 2-3 hours.

Bowel Care

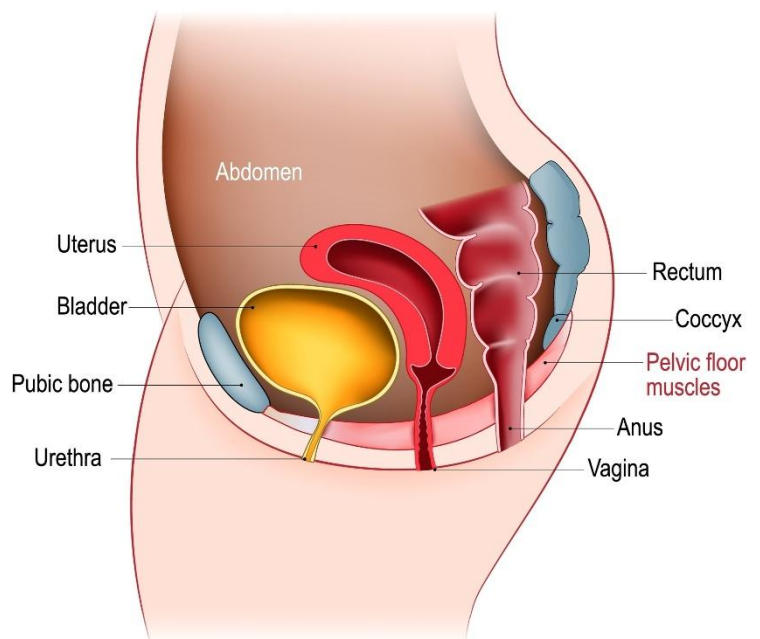
The first poo can be hard and painful because of the medications such as anesthetic and pain relief, not moving around for some time and interrupted eating patterns during your labour.

Make sure you drink plenty of fluids, eat plenty of fibre and move around regularly.

You may need a regular laxative to support you over the first few days and weeks until your bowel habits have returned to normal.

It is extremely important to try and prevent constipation as much as possible to reduce pressure on any scars (abdominal or perineal) and on the pelvic floor muscles.

Avoid straining when opening your bowels by using a footstool under feet.



Pain Relief

You may be given tablets if you are uncomfortable. Take these regularly as suggested and do not exceed recommended dosage. Please discuss with your GP if you are not managing your pain after hospital discharge.

It will help you to keep mobile, which in turn helps the healing process.

Ice packs can help reduce swelling and discomfort. To make a simple ice pack at home, wet a clean sanitary towel with water and freeze in a polythene bag.

Wrap the frozen sanitary towel (without the bag) in a damp flannel, and place on your genital area for no longer than 5 minutes. Do not sit on an ice pack, as ice can burn.

Tummy muscles

There are several layers of tummy muscles, which are joined down the middle (from the bottom of your ribs to top of your pelvis). These muscles are stretched by pregnancy. Sometimes in pregnancy they can stretch so much that there is an obvious gap between the muscles. If this is less than 2 fingers wide, this usually will not cause any problems and you will not notice the gap and other than doing some basic strengthening exercises you do not need to do anything further. Usually your midwife or physiotherapist on the ward will notice if you have a significant gap, however with the amount of swelling and position of the uterus immediately after birth this can be difficult to see this early.

To check your tummy muscles if you are worried about a gap when you go home you can do a quick check yourself.

- Lie on your back with your knees bent. Place your fingertips together just above your belly button
- Tuck your chin in towards your chest and lift your head and shoulders up off the floor

If the gap between your tummy muscles is less than two fingers wide:

- continue with all of the exercises in this leaflet

If the gap is larger than two fingers wide:

- continue with exercises and keep checking the gap weekly
- once the gap is two fingers or less, continue with exercise progressions
- try to avoid making your stomach bulge with activities such as lifting and getting in and out of bed by engaging your pelvic floor muscles (as described above) and

drawing your belly button towards your spine at the same time as you do these movements/activities.

The following exercises will help to strengthen your deep abdominal muscles. Try to do these twice a day. If they cause you pain or discomfort you should stop practicing them and speak to a health professional and refer yourself to physiotherapy (as below)

Engaging your deep abdominals

- Lie on your side or back with your knees slightly bent.
- Let your tummy relax completely.
- Engage your pelvic floor and at the top of this squeeze gently draw in the lower part of your tummy as you breathe out.
- Hold for 5 seconds, breathing normally, and then relax.
- Repeat up to 10 times and gradually build up the time you can hold it for. Aim to build up to 10 seconds of holding, 10 times.



Adding a Pelvic Tilt

- Draw in the lower part of your tummy as in the first exercise
- Gently tilt your hips by pressing the small of your back into the bed (as if you are pulling your pubic bone up towards your ribs).
- Hold for 5 seconds, breathing normally, and then relax
- Repeat 5 -10 times.



Adding rotation

- Lie on your back with your knees bent.
- Draw in the lower part of your tummy as in the first exercise.
- Slowly move your knees a few inches to the side, keeping them together. Keep your hips still and your stomach muscles drawn in.
- Bring your knees back to the middle, and then relax.
- Repeat to the other side.
- Repeat 5 -10 times on each side.



EPISIOTOMY, FORCEPS, PERINEAL TEARS:

Comfort Positions to help whilst things are healing

- Lying on your side
- Using a rolled-up towel and placing under the bones of the pelvis you sit on to reduce the pressure on the area when sitting.

Scar care

- Gently support the area with tissue or a pad when opening bowels.
- If it stings to urinate you can pour water over the area as you wee.
- After around 8 weeks, as long as the wound and stitches have fully healed you can start to massage the scar with some unperfumed oil/cream/lubricant. You can then gently start to practice putting a finger in the vaginal opening and gently trying to stretch and move the area gradually, This is to reduce the sensitivity, improve the stretchiness of the area and get you feeling comfortable with your body again.
- You can have a look at the perineal massage video on the QR code in the resources section – this explains antenatal scar massage but can also be followed postnatally

Follow Up

If you had a **3rd or 4th degree tear**, you will receive a telephone call at 6 weeks by a Physio, offered a 1:1 appointment for a review after that and a PFAP (Pelvic floor after pregnancy – consultant led clinic appointment) at around 6 months postnatally.

C-SECTION DELIVERY:

Follow all vaginal birth advice plus the following:

Lifting

- First 6 weeks – lift baby weight only.
- 6-12 weeks – gradually increase load.

Driving

- Usually safe to return at 6 weeks post-partum
- Check with car insurance company.
- You must be able to perform an emergency stop.

Scar Care

- Support your scar when coughing and sneezing with firm pressure to the area- you can use a rolled-up towel or small cushion if you like.
- Massage around and along the scar from around 8 weeks, once fully healed making gentle circular movements along the scar. This will help reduce scar stiffness and sensitivity but to help restore normal sensation.

Returning to Exercise- All Births

You can start gentle exercise when you feel ready, starting with building up your walking gradually. Try and build up the level of activity you do gradually over the first 6 weeks.

You can return to swimming once wounds are healed and dry and start any gentle yoga, pilates or postnatal designed exercises/classes.

High-impact exercise (running, jumping, HIIT), horse riding and more strenuous types of exercise we would recommend waiting until at least 12 weeks and feel comfortable to do so. You should gradually build up your strength within this time, so that you



progress towards this slowly and on returning you must build up gradually to avoid affecting your healing process.

Further Follow up

If you are symptom free we generally do not need to see you, however if you are struggling with any of the below symptoms, or struggling to do your pelvic floor exercises or return to activity or exercise you can **self-refer** to our Pelvic Health Physiotherapy Team who will help to support your recovery. This referral can be found using the QR code below, along with symptoms of pelvic floor dysfunction that we can help with.

Other Resources

Antenatal and postnatal self-referral:

Scan the code below to self-refer if you are experiencing the following symptoms or need further support in your recovery:

- Accidental loss of urine
- Being unable to make it to the toilet on time
- Feeling of increased pelvic pressure or sensation of your pelvic organ slipping down or falling out.
- Pain with sexual intercourse
- Accidental loss of wind or poo.

This referral for is to be completed if you are within the perinatal period (i.e currently pregnant or within one year postnatal).

If you do not meet these criteria you need to be referred via your GP or other health care professional to the appropriate service.



NHS Video Resource Library for Pelvic Health & Wellbeing during pregnancy

Scan this code for post-natal care videos and advice on topics including:

- Pelvic floor exercises
- Back and pelvic pain during pregnancy
- Posture and positioning
- Perineal massage
- Bladder and vaginal problems
- Constipation
- Afterbirth care for stomach muscles, bladder, pain and exercise.



Visit the Herefordshire and Worcestershire Pelvic floor care: Before and After Baby

Scan this code for advice on pelvic floor, exercises and further information.



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.