

Recovering From Childbirth: A Practical Guide from a Women's Health Physical Therapist

American Physical Therapy Association: Pelvic Health

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Pregnancy and birth cause many changes to a woman's body. While some are mechanical, others are hormonal. Getting back to normal in the postpartum period can be challenging. This guide will help you discover how to deal with:

- Handling back and pelvic pain
- Preventing injury with proper body mechanics while lifting and caring for your baby
- Healing the pelvic floor muscles
- Regaining abdominal strength
- Healing from cesarean birth
- Recognizing the difference between normal postpartum changes and postpartum depression
- Getting your groove back in the bedroom



Postpartum Back and Pelvic Pain

If you had back pain during pregnancy, you're more likely to experience it in the postpartum period too. While postpartum back pain happens to many women, it is not normal and can lead prolonged problems with the spine and muscles of the back. A strong back will not only keep you functional, but can help with other postpartum symptoms, too, such as leakage of urine.

You may notice pain in your buttocks, hip, pubic region, groin or tailbone in addition to the back. The pain may feel sharp or stabbing, and tends to increase with position changes, such as getting up from a chair or the bed or getting out of the car. Low back pain may increase when you are standing for a long period. It may be worse when you first get up in the morning, and may progress into a dull ache by the end of the day.

Additionally, hormonal changes can cause your joints to feel like they are clicking, or even like they might collapse.

You can ease back pain by:

- Applying ice for up to 15 minutes. This is especially helpful if you have sharp pains
- Applying heat for 15 minutes at a time, 2-3 times per day
- Having the back muscles massaged

- Exercising regularly – women who were treated by a physical therapist specifically for back or pelvic pain and who did targeted exercises had improvements that lasted throughout the first year after birth

To prevent continued back pain, be sure you are using good posture (whether you're standing or sitting). Keep your back in a neutral position – neither too straight nor too curved. It can help to use a pillow behind your low back when you are sitting. Avoid crossing your legs when sitting, or shifting one hip too far from center when standing. This is especially important while holding your baby. Use your abdominal muscles and pelvic floor when exercising, or even just during regular everyday movements.

Practicing good body mechanics can prevent injury. Lift from the knees and hips rather than using your back, and avoid twisting while you're bending.

Preventing Injury with Proper Body Mechanics

Carrying a baby much of the day can be tiring – and can work muscles you hadn't even considered!

Back pain is a common complaint for new moms. Practicing good posture can keep you from suffering from discomfort. When lifting, keep your back in neutral position. This means that it is slightly arched in the natural curvature of your spine. Do not tuck your bottom under. Also, remember to bend at the knees. Keep the object you're lifting (like your baby) close to your body. Contract your abdominal muscles and breathe through the lift.

Using a sling, wrap or other type of carrier can help to distribute baby's weight so it's more comfortable for you. Be sure when you are holding your baby that you're not pushing your hip out as a "seat" for baby. Try to keep the weight balanced on both legs and distributed throughout your pelvis.

If you're breastfeeding, you'll be spending lots of minutes and hours with your baby at the breast. So be sure you are bringing the baby to the breast rather than the breast to the baby, which can cause you to sit hunched over in unnatural positions, and will lead to shoulder and upper back pain. Use pillows as needed to support your arms or your baby – make sure you're comfortable before latching your baby. Try to vary your nursing positions so the weight isn't always on one part of your body (switch from a cradle hold to a football hold, for example, or learn to nurse lying down so you can relax all your muscles).

A heavy diaper bag can also lead to back or shoulder pain. Limit the amount you carry to only the essentials, and consider carrying them in a backpack. This will distribute the weight over both of your shoulders and evenly on your back.

Healing Pelvic Floor Muscles

Your pelvic floor muscles support all of your internal pelvic organs, and support your back and pelvis. They control urination and defecation (and even passing gas!). They are active during sex, especially when you experience orgasm.

Pregnancy and childbirth can cause strain and even injury to these important muscles. Healing may take 4 to 6 weeks, but you can help by starting pelvic floor exercises as soon as you feel up to it after birth. These exercises speed postpartum pelvic recovery, and will help to prevent later problems.

Symptoms you may experience in the postpartum period include leaking urine (especially when you cough, sneeze or laugh), a feeling of pressure in the vagina or rectum and painful intercourse. While exercise should help these issues, if you continue to experience them after 6 weeks postpartum, talk to your healthcare provider about pelvic floor physical therapy.

To adequately exercise the pelvic floor muscles, start by finding which muscles to contract and release. When you are urinating, stop midstream. The muscles that contract to stop the urine flow are called the pelvic floor muscles. A contraction of the pelvic floor muscles is called a Kegel. This method of finding the pelvic floor muscles is called the Stop Test. It is only meant to be helpful tool- don't practice doing Kegels while urinating once you have determined how to use them, as this can damage the muscles when done repetitively, and can cause a urinary tract infection. You can also find the correct muscles by placing a finger in your vagina and squeezing your finger with the muscles. Learn to squeeze the vagina and anal sphincter together, then release. If you're not sure that you're contracting the right muscles, ask your doctor or midwife at your postpartum check up to help.

Always be sure to empty your bladder before attempting any pelvic floor exercises. You can sit, stand or lie down. Be sure to keep your abdomen, buttocks and thighs relaxed as you do so, then release the muscles.

A good beginner pelvic floor exercise for immediately after childbirth can be done as follows:

- Tighten the pelvic floor muscles and hold to the count of 5, then relax for a count of 5. Don't hold your breath, and be sure to relax fully before beginning another contraction. Tightening the muscle as you gently exhale will make the exercise easier. Work your way up to holding the contraction for 10 seconds at a time, and repeating 10 times. Do 5 or 6 sets of 10 contractions daily.

Regaining Abdominal Strength

Pregnancy certainly stretches your abdominal muscles! Don't be alarmed if you still look pregnant in the hours and days after birth. But these important muscles help maintain posture, keep your entire upper body stable, and help you when you cough, sneeze, have a bowel movement, and even when you breathe. Thus, getting them back into shape as soon as possible after birth is an important step in the healing process.

Regaining abdominal strength will help you lose your "baby belly," as well as helping to prevent urinary incontinence, constipation and back pain. If you did not exercise regularly before pregnancy or birth, go slowly. The quality of the moves is more important than how many reps you can do. Be sure to do the exercises correctly – ask a physical therapist for help if you are unsure. It may take a while before you see any changes, but your muscles will eventually get stronger and more toned.

Before you begin, check to make sure you don't have *diastasis recti*, or separated abdominal muscles. To do this, lie on your back and place your fingers just above your belly button. Lift your head until

your shoulders are off the bed and pay attention to how many fingers you can press in between the abdominal muscles. If you can insert 2 or more, you have a separation that needs further medical intervention. Your healthcare provider may suggest a support belt (belly binder) or physical therapy.

You can help your abdominal muscle healing by starting a gentle exercise routine. A week after delivery, begin simple tummy tucks. You can do this by taking a deep breath and then as you exhale pull your abdominal muscles toward your back. Hold for the count of 5, then slowly release. Work your way up to holding the contraction for a minute or two. Be sure not to hold your breath or flatten your back while doing the exercise.

After a couple of weeks postpartum, you can start some more challenging exercises for your abs. Try heel slides: lying on your back with your knees bent and feet flat on the floor, contract your abdominal muscles. Hold the contraction as you slide one foot out until the leg is straight, and then return to the starting position. Relax and then repeat with the opposite leg. Hold the contraction while your leg is moving, and be cautious that you don't use your back muscles.

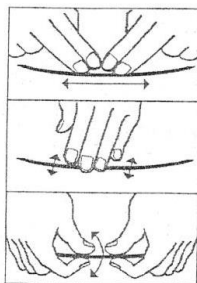
Be sure to wait at least 4 weeks postpartum (6 weeks or more if you've had a cesarean birth) before doing any sit-ups, abdominal curls or crunches.

Healing From Cesarean Birth

In addition to the stretched abdominal muscles, if you've had a cesarean birth you will be dealing with a healing scar from your major abdominal surgery. Active scar management will help your tissues to heal, and can reduce the risk of infection. This can begin the day after delivery.

Be sure to keep the incision site clean and dry, but once it is fully healed (4 to 6 weeks postpartum), you can begin massaging the incision to prevent scar "adhesions" (where scar tissue forms holding your abdominal layers together) which can be painful and limit mobility.

Two or three times a day, massage the scar area for 5 to 10 minutes. The tissue will become more pliable over time, with the ultimate goal being a smooth, flat scar. Use a massage oil, and warm it in your hands before starting. Stroke back and forth over the length of the scar, and work up to rolling the scar between your thumb and forefinger, gently lifting the scar tissue to keep adhesions from forming.



For some women, this incision area is extra sensitive to touch – for them, even clothing is uncomfortable. If this happens for you, you can “desensitize” this area by:

- Using a cotton ball or other soft material for the massage, working up to coarser materials like a nubby towel, corduroy, etc.

- Tapping the skin along the incision line
- Use gradually more pressure when massaging the area in circular motions

Rubbing the area like this for 5 to 10 minutes several times each day can help to make the sensations more manageable.

It can take up to 2 years for the scar to be fully healed. Once it's "mature" (as a healed scar is called), it may be white or pink (a little paler than your skin tone). Your healthcare provider may suggest products that can aid in scar healing over time.

Recognizing Normal Postpartum Changes versus Postpartum Depression

It's not easy taking care of a newborn baby – all day, every day needs don't allow time for much else. Sleep disruption is the number one complaint from new parents – and while it's normal, it can also lead to other symptoms. Fatigue can be caused by low iron (anemia), thyroid or heart issues, or postpartum infections. Mental health issues, such as postpartum depression, can also increase the feelings of exhaustion.

Weepiness, mood swings and difficulty concentrating in the early days after giving birth is normal. Your fluctuating hormones can make you feel happy one minute and sad the next. But, when symptoms increase in intensity or do not go away on their own, you may suffer from postpartum depression.

Symptoms of postpartum depression might include:

- Unrelieved fatigue
- Anxiety, sadness or irritability
- Trouble with everyday caretaking – of yourself or your baby
- Lack of interest in your baby
- Crying
- Changes in eating habits (eating too much or too little)
- Changes in sleeping habits (sleeping too much or too little)
- Loss of pleasure in life
- Obsessive worry about baby's safety
- Thoughts of harming yourself or your baby

If you believe you have postpartum depression, seek the help of your healthcare provider. Postpartum depression can begin any time in the first year after birth.

If you experience delusions or hallucinations, this can be an emergency. Other symptoms signaling postpartum psychosis include restlessness, confusion, anger, insomnia, and thoughts of harming yourself or your baby. If you experience any of these, call 911 or go to the closest hospital emergency department as soon as possible. Postpartum psychosis, though rare, can have catastrophic consequences.

Seeking professional treatment for postpartum depression is very effective at helping moms return to their former selves. If you have any postpartum mood disorder, be sure you are getting support from family and friends with meals, baby care and housekeeping (hiring a professional to briefly take care of

these things can be a true life saver). Be sure to get regular exercise and fresh air, and to eat a well-balanced diet of natural foods. Increasing intake of Omega-3 fatty acids may help. Find a community of support – other women who have been through the same thing are often the best at helping you stay positive as you recover.

Online resources include:

- Postpartum depression
 - Perinatal Mood Disorders - Beyondthebabyblues.org
 - Postpartum Support International - www.postpartum.net
 - Postpartum Dads - www.postpartumdads.org
 - Postpartum Progress - www.postpartumprogress.com
- Postpartum doulas
 - Doulas of North America - www.dona.org
 - Childbirth and Postpartum Professional Association - www.cappa.net
- Mother-to-mother support
 - La Leche League International - www.llli.org
 - Breastfeeding USA – www.breastfeedingusa.org
 - Moms Offering Moms Support - www.momsclub.org



Getting Your Groove Back

Most healthcare providers recommend waiting until after your 6-week postpartum check-up before resuming sexual relations.

Bleeding typically stops by 6 weeks postpartum, but healing of your pelvic floor and perineum (especially if you've had a laceration) can take 6 weeks or more. It's not unusual for a tear or cut of the perineal tissue to take 6 to 12 months to fully heal, especially if you are breastfeeding. A pelvic physical therapist can be helpful if healing is taking longer than expected.

Regular exercise can improve not only your overall health, but your body image and your sexual health, too. You may want to focus on your abdominal muscles, but try to improve overall fitness. Taking long walks with your baby and maybe a friend who has a baby is a great way to integrate fitness into your postpartum routine. Exercise can also reduce fatigue and the emotional challenges of the postpartum period.

Physical changes can include painful intercourse. A loss of vaginal moisture is common after birth, especially for breastfeeding moms. If you had a tear, the scar tissue can cause pain with penetration.

Your healthcare provider may suggest physical therapy with tissue massage. You can also try using a lubricant when you resume sexual relations with your partner. Female orgasm prior to penetration may also help with pain and lubrication. Begin pelvic floor exercises, and be patient.

If you're not interested in sex, don't be alarmed. A decreased sex drive can be related to the 24/7 demands of your new little one, changes in your sleep schedule, breastfeeding (which may make you feel "touched out" but will definitely change your hormones), or simply worries about your body image. Intimacy doesn't necessarily need to involve intercourse. Enjoy touching and cuddling (which may slowly lead to more lubrication and more comfortable sex).

If you don't begin to improve on your own, seek the help of your healthcare provider or a pelvic physical therapist. They can address fatigue and physical symptoms, such as painful sex.

Talk about your feelings with your partner or a close friend. Lack of interest in sex or a decreased libido are common after having a baby. Honesty about resuming your sexual activity can relieve some of the pressure or anxiety you and your partner are feeling.

Consult with a pelvic floor physical therapist for more information – ask your provider for a referral.

Resource:

Section on Women's Health of the American Physical Therapy Association

https://www.intimaterose.com/blogs/kegel-exercise/recovering-from-childbirth-a-practical-guide-from-a-women-s-health-physical-therapist?utm_source=phn&utm_medium=email&utm_campaign=phn-welcome-8&utm_term=phn-pt-guide-to-recovering-from-childbirth&utm_content=textlink

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Holding Your Child

- Baby crosses your midline
- Head over shoulders over hips
- Weight equally distributed
- Feet apart
- Wrists in neutral position
- Abdomen contracted
- Shoulders down and back



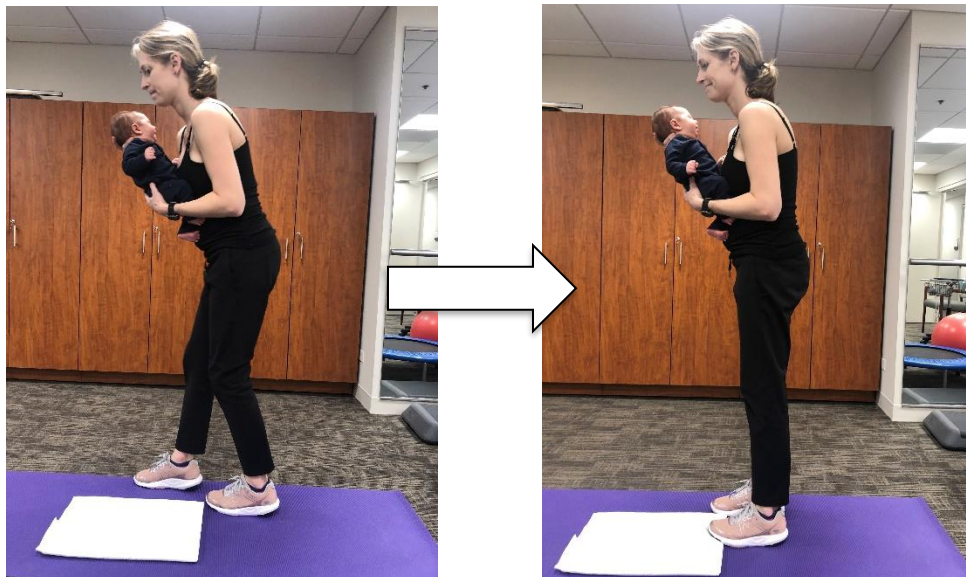
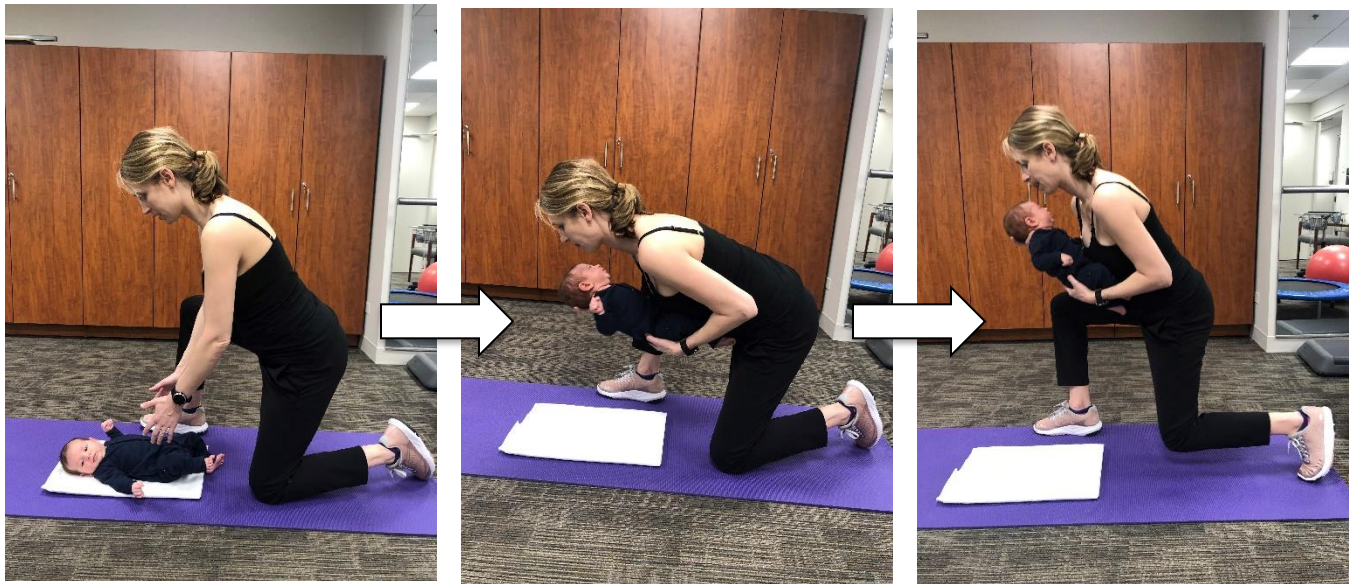
Feeding Your Child

- Weight of baby supported
- Baby at breast level
- Wrists in neutral position
- Head over shoulders over hips
- Shoulders down and back
- In sidelying: Head on pillow and hips and knees level



Lifting Your Child

- Weight distributed equally between staggered feet
- Wrists in neutral position
- Head over shoulders over hips
- Abdomen contracted
- Shoulders down and back
- Hip hinge with back straight
- Bring baby to your chest before standing



Lift and Carry Car Seat

- Weight equally distributed
- Feet apart
- Wrists in neutral position
- Head over shoulders over hips
- Abdominals contracted
- Shoulders down and back
- Hip hinge with back straight



Posture

- Weight equally distributed
- Feet apart
- Head over shoulders over hips
- Preserve curve at low back (no bottom tuck)
- Hip hinge with back straight

BAD POSTURE



GOOD POSTURE

