

Physical Therapy Pregnancy Packet

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*"You don't just have the power to create life;
you have the power to nurture it with love and strength."*

- Serena Williams



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Pregnancy is a time of remarkable transformation for your body, and one area that plays a vital role during this journey is your pelvic floor. Often overlooked, the pelvic floor is a group of muscles that support your bladder, uterus, and bowels. These muscles are essential not only for maintaining core stability but also for a smoother labor, delivery, and recovery.

This packet is designed to help you understand the importance of pelvic floor health throughout your pregnancy. You'll learn simple exercises to strengthen and relax these muscles, tips for maintaining comfort as your body changes, and practical strategies to prevent common pregnancy-related issues like incontinence or pelvic pain.

By focusing on your pelvic floor health, you'll be supporting your body's ability to carry your baby, prepare for childbirth, and recover more effectively postpartum. Let's take this journey together to ensure you feel empowered and well-prepared every step of the way!

Prenatal Exercise

General Recommendations

It is highly recommended to stay active throughout your pregnancy, and has been **shown to reduce the risk of postpartum depression** and generally improve energy levels and pain.

Though, how active you should be depends on how much you exercised prior to pregnancy. It is not recommended to start any new vigorous exercise while pregnant, such as running or HIIT **when you did not do this before.**



The following recommendations are generalized, and it will always be better to see a physical therapist to give you exercises based on your goals and specific presentation. If you are having any pain at all while pregnant - please make an appointment - we can help!



Cardiovascular exercise: Continue with whatever you were doing prior to pregnancy - with a decrease in intensity as your pregnancy progresses, depending on how it makes you feel. You can continue with running at your same level until you have any pain or discomfort during or after.

Prenatal Exercise

Core Strength Training



If you are not currently strength training - please see a physical therapist before starting any new program!



If you are already strength training and comfortable with it then it would be best to focus on strengthening the abdominal muscles with a focus on stability, as well as the hips and back, to support your growing belly.

When performing any core exercises you want to monitor your belly - if you see any bulging or doming through the center of your abdomen then you are not able to control the diastasis that is forming and you should decrease the challenge level.

Below are some examples of core exercises with a focus on stability. They are numbered from least to most difficult

1 Core activation in seated or quadruped



2 Seated Marching on Exercise Ball



3 Bird Dogs



4 Pallof Press



5 Side-Planks*



6 Planks*



Prenatal Exercise

Lower Body Strength Training

Below are some examples of lower body exercises:

1 Clamshell



2 Step ups/step downs



3 Lateral step down



4 Side stepping with a band



5 Romanian Deadlifts



Prenatal Exercise

Upper Body Strength Training

Below are some examples of upper body strengthening exercises:

1 Rows



2 Overhead press



3 Band pull aparts



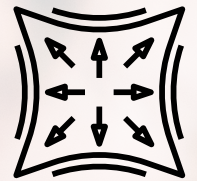
4 Lat pull downs



Preparation For Delivery

Perineal stretching

- Should be started at 34 weeks to reduce the risk of tearing during delivery
- 5 minutes 3-4x/week
 - (independent or with a partner)



How to perform perineal stretching

- Sit reclined on a pillow with knees bent - positioned so you can reach your vaginal opening.
- Using lube or massage oil, insert a thumb or finger into your vagina and gently apply pressure downwards toward your anus (6 o'clock), then sweep left and right slowly to 3 and 9 o'clock, continually applying gentle pressure.
- Repeat for 5 minutes.

Breathing coordination

- Open glottis or closed glottis breathing in preparation for labor



Initial Concerns and Considerations

• Sleep



- Try to sleep as much as you can, lack of sleep has been linked to an increased risk of postpartum depression.

• Management of pain



- Sit on a cushion or soft surface that reduces pressure through your pelvis and into your pelvic floor. Rest and let yourself heal, though this seems difficult with a new baby, remember to take care of yourself as much as you can.

• Hydration



- Drink plenty of water to prevent constipation that tends to go along with lack of movement.

• Posture Awareness



- Awareness of posture and forward shoulders with holding baby or breastfeeding - attempt to reduce shoulder and upper back discomfort with pec stretching and scapular squeezes.

Initial Exercises and Activities

- Walking is a good place to start!
 - Begin walking when your pain decreases and is tolerable, increase distance as tolerated.



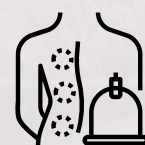
- Gently introduce exercises
 - Abdominal activation along with exhales, hip abduction and extension, clamshells, any upper body exercises with light to medium weights



- Postural strengthening
 - Cat/cow pose, cobra, sphinx, etc.



- Mobilization of lower back and ribcage
 - Techniques such as skin rolling, skin gliding, cupping with gliding cups and coconut oil can help reduce tension.



6 Weeks After Delivery

See a pelvic floor physical therapist to evaluate any diastasis, prolapse and pelvic floor function/activation!



Possible activities in postpartum rehabilitation:

- **Pelvic floor:**

- Mobilization if needed (if tear was sustained and causing tightness/pain)
- Strengthening or mobility if leaking is occurring

- **Abdominal strengthening and pressure management:**

- Monitor any separation or bulging/doming of the abdomen with strengthening and exercise - if bulging is happening, then scale back to a level where this can be controlled.



- **Returning to normal function:**

- See your physical therapist for specific exercises for your pelvic floor, hips, back and abdominals to meet your goals!



Initial concerns

- **Sleep is important!**



- Try to sleep as much as you can! Lack of sleep has been linked to an increased risk of postpartum depression.

- **Bed mobility**



- Log roll to get in and out of bed or off the couch



- **Management of swelling and pain, and wound care**

- Follow doctors guidelines to keep the incision clean and healthy.
- Pain medication is safe as long as it is approved by your physician.
- A heating pad may help reduce pain at your incision as well.
- If you need to sneeze or cough, hold your incision and gently activate your abdominal muscles to brace.

- **Hydration**



- Drink plenty of water to prevent constipation that tends to go along with lack of movement.

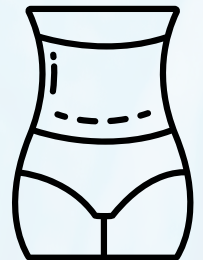
Initial Exercises and Activities

- **Walking gives a gentle stretch and mobilization to your abdomen!**
 - This is very important to do to initially mobilize your scar gently. This is also to prevent blood clots from forming in your legs due to decreased activity.
- **Awareness of posture and forward shoulders with holding baby or breastfeeding**
 - Attempt to reduce shoulder and upper back discomfort with pec stretching and scapular squeezes.
- **Breathing exercises**
 - Take deep breaths into your abdomen and allow your belly to gently stretch with your inhales, try reaching overhead with an inhale as tolerated
- **Avoid Strenuous Activity**
 - Heavy lifting (>10 pounds), any vigorous exercise, abdominal crunches, anything that increases pain around your incision beyond gentle stretching sensations.

6 Weeks After C-Section

- **Scar tissue mobilization of surgical scar**

- Your physical therapist will teach you techniques including: skin rolling, skin gliding, cupping with gliding cups and coconut oil

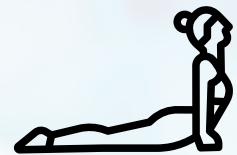


- **Abdominal strengthening and pressure management:**

- Monitor any separation or bulging/doming of the abdomen with strengthening and exercise - if bulging is happening, then scale back to a level where this can be controlled.

- **Gentle stretches of abdomen and scar**

- Cow, sphinx, cobra poses



- **Returning to normal function**

- See your physical therapist for exercises for your pelvic floor, hips, back and abdominals to meet your goals.



Preparation For Delivery

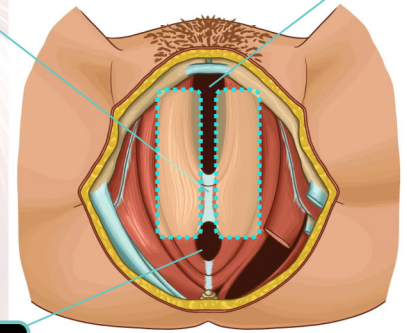
What is the perineum?

Your perineum forms the space between your vaginal and anal openings, and is part of your pelvic floor musculature.

Perineum

Vagina

Anus



Why it's important to stretch it!



It must be mobile and flexible to reduce the risk of tearing during delivery. Many women find that becoming familiar with the sensation of the perineum stretching before the excitement surrounding delivery can be helpful for the pushing stage.

If you decide to get an epidural during delivery you will not feel the sensation of stretching, but providing a stretch to the perineum starting at 34 weeks gestation has shown to reduce tearing severity.



Perineal Massage

Before Massaging



DO NOT perform perineal massage if there is an active infection (e.g. herpes). It is **ALWAYS** a good idea to talk to your healthcare provider before initiating any new interventions!



Clip your fingernails & wash your hands

Assemble plenty of pillows so you can comfortably position yourself in a semi-reclining position



Some women find applying a warm compress to the area first may help relax the perineum.

If semi-reclining is not comfortable, try standing with one foot on a stool. You can also perform this in the bathtub or shower to aid in relaxation of your muscles.



Perineal Massage

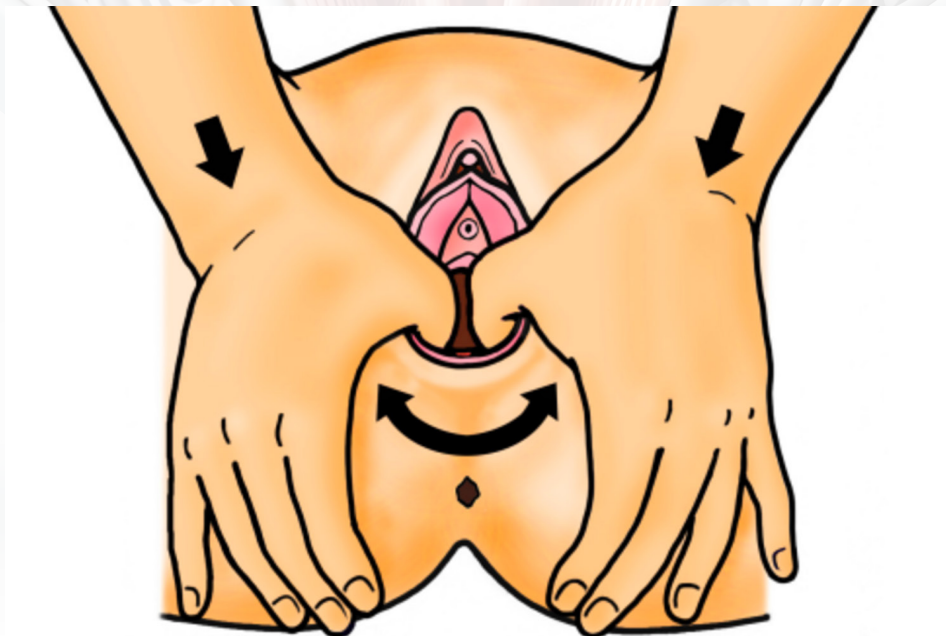
Massage Technique



Rub some lubricant on the outside of the perineum.

Hook the tip of one or both thumbs shallowly into the vagina. Gently stretch the thumbs out and downwards towards either side of the anus, until you feel a sensation of comfortable stretch/tingling.

If you think of the vaginal opening as a clock, 12 o'clock is at the top (at the clitoris), and 6 o'clock at the perineum; you are providing a stretch between 5 o'clock and 7 o'clock.



Massage Technique



Hold for approximately 60 seconds (the average length of a contraction), then rest for a minute or two to allow the circulation to move through the perineal area.

Focus especially on the 'out breath' to allow the perineum to comfortably and gently stretch and relax with your thumbs – you are training your perineum to relax with the out breath, which will be important during delivery.



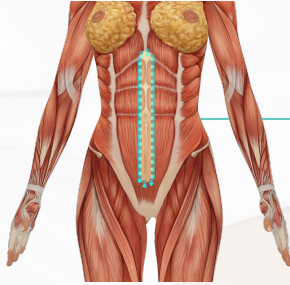
This should NOT be a painful stretch, but might feel like pressure or burning.

Repeat the stretch several times more, keeping it comfortable and relaxed. You can either perform this for 10 minutes 1x/week or 3-4 minutes 3x/week.



Diastasis Recti Information

Anatomy



Linea Alba

Diastasis recti is defined as the separation of your rectus abdominis, the 6 pack portion of your abdominal muscles, along the linea alba.

The linea alba is formed of non contractile connective tissue that links together the right and left portions of the rectus abdominis.

During pregnancy your body naturally adds more connective tissue to allow the separation of your rectus abdominis to make room for your growing belly.

This is normal!

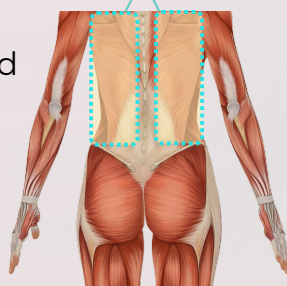
The rest of your abdominal muscles work together to provide support around your belly as it grows, since the rectus abdominis stretches and becomes less functional.

The rest of your abdominal muscles that are important to continue to activate and strengthen throughout pregnancy are:

Transversus Abdominis

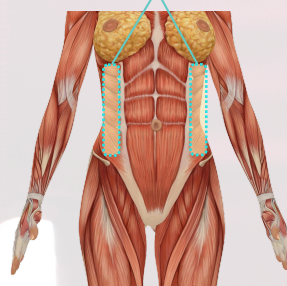
Deep core muscle formed like a corset around your whole abdomen - from your spine around your belly.

Works as a primary stabilizer and supporter.



Obliques

Work to control rotation and help stabilize along with the transversus abdominis.



Diastasis Recti Information

Important considerations during pregnancy

Bulging can occur through the linea alba when performing motions like a crunch or sit up (getting up off the couch or trying to sit up out of bed without rolling to the side).



We want to avoid situations where we notice a bulge or dome through the center of the abdomen, so we do not overly strain the linea alba and cause it to separate even more.

Best practice is to roll to the side when getting out of bed or off the couch, then sitting up from there. Also avoiding crunch type abdominal exercises once bulging is seen and you are unable to control it.



Diastasis Recti Information

Controlling the Bulging

You can work on controlling the bulging with crunching by activating the transversus abdominis. This is something your physical therapist can work on with you and you can continue to do throughout your whole pregnancy.



It is best to start to work on this earlier on in pregnancy, but it is never too late to start!

Diastasis Recti Information

Postpartum

Since your body naturally adds tissue to the linea alba, it is very normal to have a diastasis for several months postpartum. Your body will naturally again start to close this gap. You can speed things along by working on restrengthening your abdominal muscles, especially your transversus abdominis and obliques, now that your belly is no longer stretched out while growing your baby.



Your physical therapist will provide you with exercises to best address your strength level and degree of separation. Your degree of separation is defined by your ability to close the diastasis when activating your transversus abdominis, and how wide the gap still is when attempting to close it.

Postpartum Exercise

General Guidance

These recommendations differ if you have had a vaginal delivery or a c-section. But general recommendations are to **prioritize sleep and rest in the first 6 weeks**, starting to walk as you are able to, and let pain guide you on activity levels.

C-section Recommendations

If you have had a c-section follow the movement recommendations from your OB or midwife first and foremost. Make sure to log roll and not twist too much when rolling over, and move through side lying to get up and lay down.



When you cough or sneeze hold your incision gently to give it a little support.

Walking is the best way to mobilize your incision after the initial couple weeks, but generally exercise beyond walking is not recommended until your 6 week check in with your OB or midwife.



Postpartum Exercise

Vaginal Birth Recommendations

If you have had a vaginal birth then you don't have any precautions unless you had a significant tear, so follow the guidelines from your OB or midwife if that applies to you.

When you no longer have perineal pain then you can start gentle movement. Below are some examples of exercises you can try:

1 Cat/Cow



2 Bridges



3 Clamshells



4 Band pull aparts



5 Cobras



**If you are having pain with any of this then continue to allow your body to recover, focus on movements that do not hurt and feel good.

It is recommended to **check in with a pelvic floor physical therapist after your 6 week visit with your OB or midwife.** Even if you are feeling back to “normal”, a physical therapist can help guide you back into exercising again post delivery. If you are having pain in your back or shoulder or neck from holding your baby or from feeding, then please schedule an appointment sooner than that 6 week mark.

As you traverse this amazing journey, may you
GO Smarter and GO Stronger!

GO
PTTM

