

## CARING FOR YOUR CORE, BACK AND PELVIC FLOOR

A Quick Guide for New Moms: Your First Few Weeks Postpartum



## Pelvic Floor Physical & Occupational Therapy

www.functionalpelvis.com Pelvic Floor Therapy House Calls 917-601-1299

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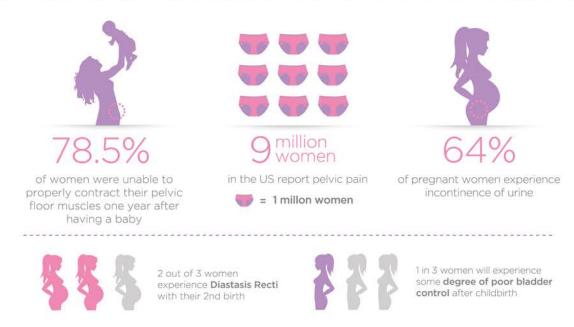
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#### Welcome!

Congratulations on your new baby! You may be wondering, "What the heck is going on 'down there?!" No matter how you had your baby, your pelvic floor, back and core could benefit from a little extra TLC. That's the inspiration for this quick guide: providing guidance during those early postpartum days that all women should know about but rarely discuss.

Your postpartum experience is a journey. As such, this isn't meant to be a comprehensive guide, but an introduction to simple ways you can begin caring for yourself immediately after child-birth. Feeling disconnected from your core is more common that you think; the stats below highlight what many women experience daily.

#### Please enjoy this guide and good luck on your journey of taking care of your new postpartum body!



#### What is the Perineum and Pelvic Floor? Why are they important?

The perineum is the small area between your vagina and rectum. This is the area that commonly tears or is the site of an episiotomy. It's also where your pelvic floor muscles attach. The pelvic floor is a group of muscles that support your pelvic organs.

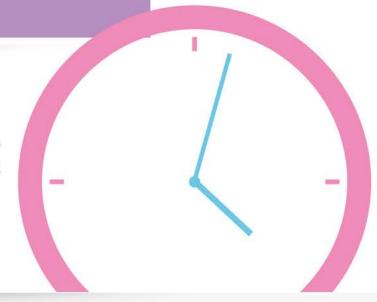
If perineal pain gets worse after birth, ask your midwife, OB/GYN or GP to check for signs of poor healing or infection. Ice packs can relieve pain and/or swelling and ease discomfort. It is very important that the ice pack does not come into contact with your skin, as this could cause a painful burn. You can wrap the ice in a towel to reduce this risk.

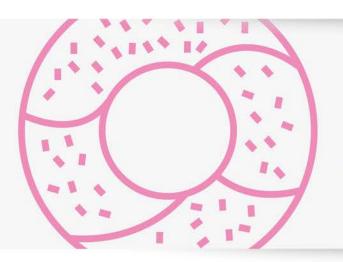
Tearing your perineum during childbirth can affect the support of your pelvic floor. A weak pelvic floor can also affect the control you have over your bladder and bowels. Damage to your perineum might also lead to discomfort and pain during sexual intercourse.

## Caring for yourself after your birth

Rest

Rest properly after childbirth to help you recover; this is an important time to nurture both you and your baby. Aim for at least 6 hours each evening and nap while your child is napping.





Sitting

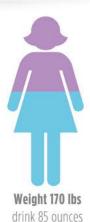
It can be uncomfortable to sit if your perineum is sore. To ease the soreness while sitting, you can perch on a wedge pillow or rolled up towels to help to relieve the pressure on the perineum.

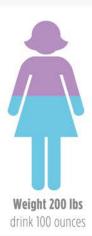
**Water** 

Drink ½ your body weight in ounces and try to go the toilet every 2 to 3 hours. 2-4 cups more if you are breastfeeding.

How do you know if you are drinking enough water? You should go to the toilet every 2 to 3 hours









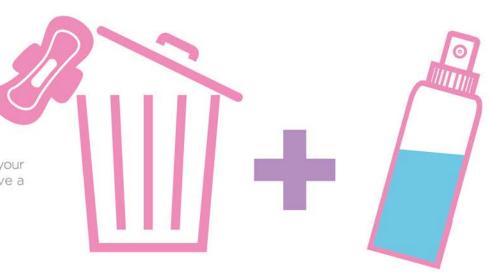


## **Bowel Movements**

- While having a bowel movement, try holding some toilet paper firmly in front of the rectum to give support to your stitches.
- · Do not strain.
- Try propping your feet up on a stool to elevate your knees higher than your hips.
- Try diaphragmatic breathing to help ease the bowel movement out.
- · Inhale: belly relaxes and expands.
- · Exhale: belly flattens.

## Hygiene To help prevent infection:

- · Change pads regularly.
- Use a peri-bottle to rinse your perineum after you urinate or have a bowel movement.





### **Get Your Daily Fiber**

#### FRUIT

1 pear **4q** 

1 cup raspberries **8g**Raw apple **4g**1 cup blackberries **14g**1 orange **2.4g**1 peach **2.3g** 

#### **VEG/GRAINS**

1/2 c broccoli 4g

1/2 c corn kernels 5g

1/3 c lentils **5.5g** 

1/2 c green peas 9g

1/2 c brown rice 5.5g

½ c cooked spinach 7g

1 c raw spinach 3.5g

## **Healthy Eating**

Eat well to help heal yourself. We need 25-35 grams of fiber daily to prevent constipation. If we are constipated, we may strain to eliminate our bowels. This may put pressure on your stiches and your pelvic floor muscles. Adequate water helps too.

## 7

### Scar Care

Why is Scar Care Important?

- · Scar tissue forms to stabilize the area
- This new "glue" can cause immobilization and restrictions.
- This can lead to pelvic pain and incontinence

Whether you have a natural tear, episiotomy, or C-section scar, it's important to keep the tissue and muscle elastic and mobile.

#### When:

After 6 week check-up and the scar has healed.

#### What:

Use Vitamin E or Coconut oil and massage the scar gently.

#### **How Often:**

A few minutes. 3 - 5 davs a week.

#### **Important Note:**

Move the scar in the direction that it feels the most restricted. This is likely the direction that needs the reintroduction of movement.

### Reconnecting to Your Core

Many women feel disconnected from their core after giving birth. Some describe the feeling as their insides being like a bowl of jelly. Many are not able to engage their core muscles. This is all normal, and luckily there are ways to start getting reconnected to your core!

#### Your core consists of:

- Diaphragm
- · Pelvic floor
- Lower abs (below your belly button)
- · Postural muscles along the spine

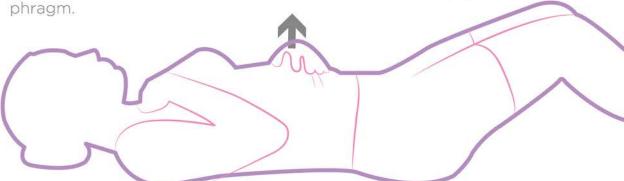
Ideally, we should use all 4 of these areas together to harness the robust power of the core.

#### Gentle Ways to Connect to Your Core

- 1 Diaphragmatic Breathing
- 2 Simple Pelvic Floor Exercises
- 3 Strengthen your Postural Muscles

## 1 Diaphragmatic Breathing:

What Does it Look Like? Try to breathe like your baby naturally does. The belly (where the diaphragm is) and your ribcage should get bigger on the inhale. On the exhale, they should get smaller. The chest should not lead the action, it simply moves in response to the diaphragm.



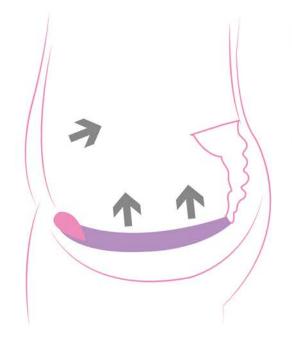
#### Why do it?

Great way to physiologically quiet yourself; this is fundamental to reconnecting to your core.

#### How Often?

As often as you'd like. Aim to do this at least before you nap or go to sleep. Perform diaphragmatic breathing when having a bowel movement to reduce straining and impact on the pelvic floor. It can be helpful to put one hand on your belly and one hand on your chest as you do this; no equipment needed.

# 2 Simple Pelvic Floor Exercises



## Important Note About How to Do A Kegel Properly

It's just as important to release the pelvic floor muscles as it is to squeeze them. Consider your bicep muscle: when you flex it, it shortens (kind of like a Kegel does to your pelvic floor). When you release your arm, it falls down to your side (let's call this a reverse Kegel). You need to feel for full range of motion when you do these exercises or it's a bit like holding a 10 pound weight in your hand and flexing your bicep constantly without dropping your arm down – you are not going to build strength, and in fact it could create more tension and pain in those muscles.

#### What is a Kegel?

A Kegel is both a squeeze and a release of the muscles only at the pelvic floor. Start with a small squeeze at your perineum (small area between rectum and vagina) within a few days after birth. Choose a comfortable position with your legs relaxed. A correct squeeze should feel like you're drawing fluid up through a straw at your perineum. Many women feel disconnected from their bodies after the birth. With dedicated practice, we can re-establish this connection, awareness and control.

#### **Kegels with Breath Variations**

Revisit diaphragmatic breathing (previous page) and make sure you're comfortable with the basic sequence of the belly expanding on the inhale and belly softening on the exhale.

- Breath Variation One: You will only contract your pelvic floor at the beginning (and during) of the exhale (as your belly flattens/softens). Hold the squeeze for just 2-4 seconds or the length of your exhale. That's one rep.
- Breath Variation Two: You will only contract your pelvic floor at just the end of the exhale (as your belly flattens/softens). You will quickly squeeze the muscles (holding just 1 second) and then relax them as the inhale starts. That's one rep.

Remember, these exercises are small, specific, and allow for a full range of motion. Take your time and don't rush.

#### **How Often?**

Kegels (and their reverse!) are gentle enough that they can be started within a few days after birth. The key is to be patient and consistent.

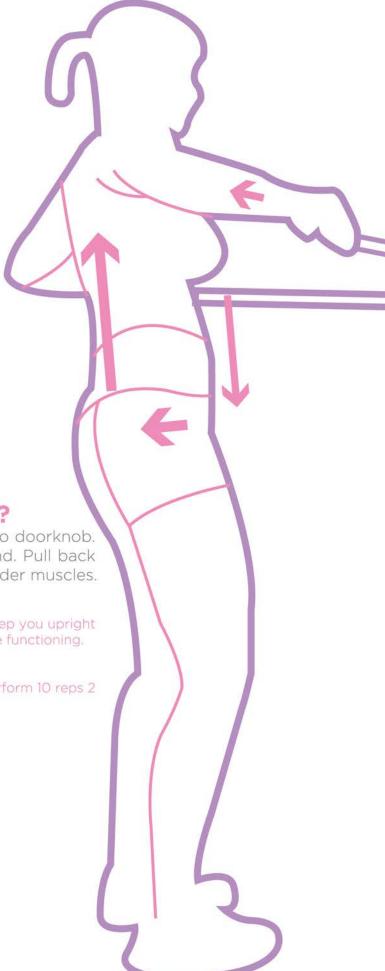
**Weeks 1 - 2:** 2 times a day. 5 reps of breath variation one and two. Total: 20

**Weeks 3 - 6:** 2 times a day. 10 reps of breath variation one and two. Total: 40.

**Weeks 6+:** Keep up the work! Keep 2 times a day. 15 reps of breath variations one and two. Total: 60.

#### So....Should I Just Do a Million Kegels?

No. Properly integrating the breath with a kegel and reverse Kegel is an excellent way to reestablish our connection to our bodies after birth and helps with common post-pregnancy incontinence. However, there are lots of other exercises and rehab routines that need to be tailored to the individual's symptoms, body mechanics and goals. Contact a local pelvic floor therapist for a proper evaluation and tailored care for your situation.



#### What does it look like?

Rowing. Attach one end of band to doorknob. Each hand holds a side of the band. Pull back while engaging the back and shoulder muscles.

#### Why?

Engage the postural muscles that help keep you upright in the back of the body to assist with core functioning.

#### How often?

Using a five feet long resistance band, perform 10 reps 2 times a day

### Protect Your Back Each Day

## Getting out of bed, use the "log roll"

- A Roll over onto your side. Bring your hands down to the bed in front of your chest.
- B Drop both your legs over the edge of the bed.
- C Use your elbow, forearm and hands to push yourself into a sitting position.
- **D** Once you are sitting up, progress to standing up.

Try to engage your pelvic floor or low abs on an exhale as you stand up. Release this engagement upon standing.









## **Property**The second of the second of the

Find an easy, comfortable position where you feel supported. Allow your arms, neck and shoulders to be relaxed. Minimize holding tension; use pillows and props for support.







2 Knave



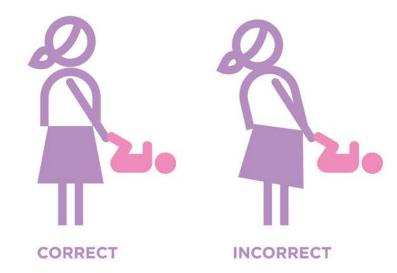
3 Cradle



4 Laying

## 3 Changing Diapers

Diaper change is a good time to check-in with your posture. Try to change your baby on a surface at the waist level such as on a changing table. Try to minimize leaning into the table (your stomach touching it). Back your bottom over your ankles to remain active in the legs, bottom, and core. Leaning into the table indicates that you may be disengaging from muscles and not remaining active.







4 Lifting your baby

Bend your knees and keep your back straight while lifting. Try to stick your bottom out when lifting your baby as if you are doing a mini-squat. Keep your baby as close to you as possible while lifting. Try to lift your baby on an exhale while you lightly contract your low abs and pelvic floor.

## 5 Pushing the stroller

Stand upright to push the stroller, emphasizing good posture. Try to push the stroller from your core, not from your arms.





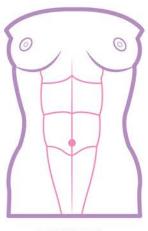
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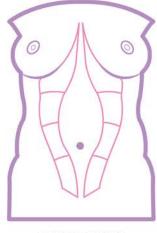
INCORRECT

### What is Diastasis Recti?

(Abdominal separation)

During pregnancy, your abdomen stretches and can separate at the center, sometimes leaving a wide gap. This usually returns to normal around 6 weeks after birth. If it doesn't, speak to a pelvic floor therapist.



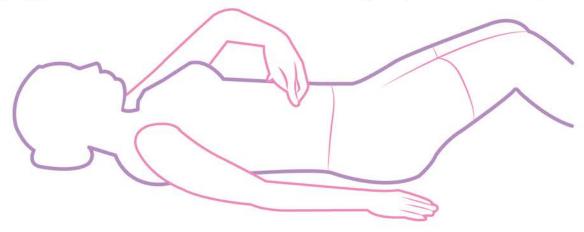


NORMAL

**DIASTASIS** 

#### Want to check if you have Diastasis Recti? Here's How:

- · Lie on your back with your knees bent and your feet flat on the floor.
- Place one hand on your abdomen, with your fingertips across your midline and parallel with your waist at the level of your belly button.
- With your abdominal muscles relaxed, gently press your fingertips into your abdomen. Roll your upper neck off the floor as if you are looking at your feet.
- You may see or feel the space narrowing above your belly button in your abdomen as you lift your head off the floor. If you don't feel this space narrowing but instead widening or bulging, you may have diastasis recti. Check with your pelvic floor therapist.



#### What about Resuming Exercise?

Exercise should be resumed gradually. Connect to your lower abdomen and pelvic floor as you are transitioning from sit to stand and picking up your baby. Initiate this connection on an exhale, allowing the belly to expand on the inhale and the low abs to relax. Avoid high impact exercise such as running, jumping, and high intensity classes for at least 12 weeks following the birth of your baby. It took 9 months for your baby to develop inside you; this brought changes to your body as well. Easing back into high impact activities will protect your body and help rebalance the muscles that may have been impacted throughout the pregnancy and the birth.

Your approach to resuming exercise should be:

## "Balance First, Challenge Later"

#### What about Sexual Intercourse?

Resume sexual intercourse when you feel ready. At a minimum, wait six weeks until your postpartum check-up and have clearance from your healthcare professional. Find a position most comfortable for you, use lubrication and start gently. Take things slow as it may be tender. If the discomfort persists, talk with a pelvic floor therapist. Remember that everyone is ready at a different time. It's common for the first few attempts at intercourse to be uncomfortable. However, each time it should get more comfortable.

#### Sexual Intercourse

#### When Am I Ready?:

- ✓ Only you will know, so take your time.
- √ Some can take months.
- X But not before: 6 week postpartum checkup + clearance from healthcare professional.

#### Must haves:

- ✓ Comfortable position.
- ✓ Lots of good lube (no glycerin, scents or parabens).
- √ Take your time.

#### Stop:

× If discomfort persists. Talk with a pelvic floor therapist.

## Looking After You: The New Mom

Becoming a mother is quite a transition - one we may not be completely prepared for until we actually experience it. Keep these tips in mind to ease the transition:

- 1 Seek out community groups/support networks
- 2 Allow time for yourself
- 3 Accept that you will make mistakes
- 4 Talk openly with your partner
- 5 Get help, even temporarily, to help with household responsibility

### Additional Resources

For up-to-date information on postpartum care, breastfeeding support, postpartum depression resources and other important topics, please visit www.functionalpelvis.com/postpartum-resources

### Pelvic Floor Health Questionnaire

Pelvic floor therapy can help you with pelvic and back pain, leaking urine or bowel movements, urgent or frequent urination, painful intercourse, diastasis recti, and pelvic organ prolapse. It can also introduce better daily body mechanics that can help you restore your core system. How do I know if pelvic floor therapy is right for me? If you have answered yes to any of these questions, seek out a specialist such as a pelvic floor therapist.

Bladder
<ul> <li>□ Do you leak urine with any activity or exercise?</li> <li>□ Do you go to the toilet more than once every 2-3 hours?</li> <li>□ Do you experience a strong urge to go to the bathroom?</li> <li>□ Do you have difficulty starting the stream of urine?</li> <li>□ Are you unable to completely empty your bladder?</li> </ul>
Bowel
<ul> <li>□ Do you experience difficulty holding stool in?</li> <li>□ Do you have any trouble getting everything out?</li> <li>□ Do you experience constipation and strain to empty your bowels?</li> </ul>
Sexual
<ul><li>□ Do you have ANY pain/discomfort with sex?</li><li>□ Do you struggle to reach orgasm?</li></ul>
Pain
Do you have any discomfort or pain around the vulva (or labia) with tight clothing or light touch to the area?
<ul><li>□ Do you experience any pain with the use of tampons or during a pap smear?</li><li>□ Do you have any pain with urinating or bowel movements?</li></ul>
<ul><li>□ Do you have any pain in the vagina?</li><li>□ Do you have any sharp stabbing pains into the rectum OR abdomen?</li></ul>
Prolapse
<ul><li>Do you feel any heaviness or pressure in the vagina or rectum?</li><li>Have you noticed a bulge into the vagina or the feeling of something 'falling out'?</li></ul>
Other
<ul> <li>Do you have tailbone pain lasting more than one month?</li> <li>Do you have pain in your pubic bone, sacro-iliac joint (SI), lower back, hip or groin that doesn't respond to regular treatment?</li> </ul>
☐ Do you experience a lot of abdominal cramping pain with periods?

### Common Questions about Pelvic Floor Therapy

#### With Lindsey Vestal, MS, OTR/L of The Functional Pelvis

#### Why should I rehab my pelvic floor?

Many of us don't hesitate to see a physical therapist when we throw out our back, pull a muscle, or experience weakness in a certain part of the body. Your pelvic floor should be no different – it's just like any other muscle in the body! Considering that its functions span from elimination and continence to sexual appreciation and organ support, this muscle group is one that deserves attention.

## Am I the only one who needs assistance with my pelvic floor? This was not a part of childbirth recovery that I had anticipated.

One year after giving birth, 78% of women are unable to properly contract their pelvic floor. Nine million women in the United States experience pelvic floor pain, and one in three women in the US report having poor bladder control after childbirth. Although pelvic floor talk is sometimes considered taboo in our culture, you are certainly not alone!

#### Is pelvic floor therapy all about kegels?

The majority of the women I see have overactive muscles – in fact, I can't remember the last time I prescribed kegels as a part of a rehabilitation plan. Contrary to what you might think, an over-engaged muscle is weak in the same way that an under-engaged muscle is weak. The ideal for any muscle is a full range of motion, which is the ultimate goal of the work we do in pelvic floor therapy.

#### Can I prepare my pelvic floor for birth prenatally?

A prenatal yoga class can help you connect with your core while also learning how to breathe with your diaphragm and relax your pelvic floor. The ability to both engage your abdominals and soften your pelvic floor is a powerful combination for the final stages of labor.

#### What does pelvic floor therapy actually entail?

Sessions are tailored to your individual needs and can range from internal work to external work on muscles that are directly affecting the pelvic floor's functioning. Internal and external techniques can be continued by the client between sessions in order to promote recovery.

#### What training do Pelvic Floor Therapists have?

Pelvic Floor Therapists can either be trained as physical therapists or occupational therapists, after which they go on to receive specialized training in pelvic floor health.

#### Where would I see a Pelvic Floor Therapist?

You may find someone who offers their services at a physical therapy office, or you may find a practitioner who offers home visits, such as The Functional Pelvis. This can be particularly beneficial for new moms who are juggling recovery and newborn care.

