



An tOspidéal Náisiúnta Máithreachais
The National Maternity Hospital

Physiotherapy Department

Advice & Exercise Following Vaginal and Assisted Vaginal
Delivery



Following your delivery it is important you allow your body some time to rest in order to recover.

It is important to look after yourself, so you can look after your baby.

Listen to your body, do not push yourself, your recovery is unique to you. Do not expect too much too soon, be kind to yourself.

Accept offers of help from friends and family in order to assist your recovery.



Visit our website: www.nmh.ie

Early Days

Comfort & Movement

Bed Mobility

Using the log roll technique can be useful. Bend both knees, feet flat on the bed, roll on to your side. Push your body up by pressing down on to the mattress with your hand, at the same time allow your feet to go down to the floor. Stand by leaning forwards and pushing up with your hands and legs. Try not to stoop; stand tall.



Positioning in Bed

Following a vaginal delivery it is normal to feel pain and swelling around the vagina and perineum. You may also have pain around stitches in the area. Positioning yourself in side-lying with a pillow between the knees can help offload the area.



Short Walks

In the early days, short frequent walks are good for circulation, promoting healing and reducing pain.

Short walks allow us to change position and prevent stiffness. Walking will also offer time where there is less direct pressure on your perineum and vaginal area, which may offer relief as these areas are often tender and swollen following a vaginal or assisted vaginal delivery.

You will be encouraged to begin short walks on the postnatal ward. This could be as simple as mobilising to the toilet and back.

Start small and gradually increase the distance, time and intensity as you continue to heal.

Think - little and often in the early days.

Remember your body is recovering after delivering your baby. Don't expect too much too soon. Take it slow and remember everyone's healing timeline is different, don't compare yourself to others.

Wound Care

Perineal Tears / Episiotomy

90% of first time mums that have a vaginal birth will have a tear of some degree or an episiotomy. After a tear or episiotomy, it is normal to feel pain or tenderness for around 2-3 weeks after giving birth, particularly when walking or sitting.

The stitches may feel slightly irritated but this is normal during the healing process. It typically takes between a month and 6 weeks for a tear/episiotomy to heal and for the stitches to dissolve. **Here are ways you can help yourself recover:**



Rest

Rest will help your body recover and heal from the birth. Try to rest when baby sleeps or as able throughout the day. You may not be able to sleep throughout the day but even taking a few moments to relax and allow your body to rest can help.

To help reduce irritation of your perineal stitches, allow some moments to lie down and rest without underwear throughout the day. This can help with healing.

Managing Pain & Swelling

Pain and swelling around the perineum and vagina is common with any vaginal delivery but especially with a vacuum or forceps delivery, you are likely to experience a little more swelling down below. Here are some tips to help:

- Putting an ice pack wrapped in a towel or cloth onto the affected area. If cold therapy is used in the first 2 to 3 days it should be applied for just 10 minutes and no more frequently than 2 hourly. **It is important not to put ice directly on your skin.**
- Use two rolled up towels under your sit bones to reduce pressure on the perineum and make sitting more comfortable.
- Painkillers may also help bring relief: Consult your pharmacist for the best pain relief to take.



Preventing Infection

Keep the area clean by washing daily with just water (avoid scented or perfumed products) Change maternity pads frequently. Pat the area dry to protect stitches.

Signs of infection could be:

- Red, or darker, swollen skin around the wound
- Persistent pain/ worsening pain
- Unpleasant or foul smelling discharge
- Pus or liquid coming from the wound.

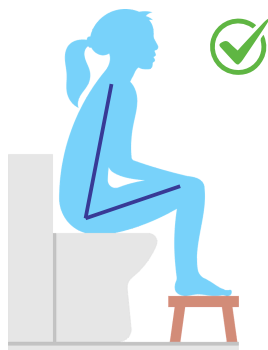
Contact your midwife, Public Health Nurse or GP if you notice signs of infection.

Bowel & Bladder Care

Bowels

It is very common for women to be nervous about opening their bowels following delivery but there is no need to be fearful. Avoid fighting the urge to open your bowels to avoid constipation.

The following will help you to comfortably pass a bowel motion:



- Use a foot stool to ensure your knees are higher than your hips
- Maintain a straight back avoid slumping
- Lean forward resting forearms on thighs
- Practice your deep breathing to help the pelvic floor relax
- Swell your tummy rather than straining - imagine you are blowing out birthday candles or saying the word "OOooo"
- **Relax and don't rush**

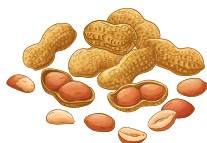
Avoiding constipation is important following delivery. **The following can help soften the consistency of your stool can help with stimulating digestion:**

1



Variety of fruit and veg

2



Nuts and seeds in the diet
(chia seeds, flax seeds)

3



Regular fluids (water)

4



Movement & exercise

Bladder

1 in 3 women experience some degree of bladder leakage following delivery

Sometimes after birth the sensation of the bladder can be reduced. You may not feel when your bladder is full and if bladder emptying is delayed this may result in bladder leakage. We can manage this by:

- **Scheduled voiding** = going to the toilet every 2hrs even if you have no sensation to pass urine
- **Double voiding** = after the flow of urine stops, stand up and sit down again to ensure the bladder is fully emptying

Bladder leakage is more prevalent following forceps and vacuum assisted births and in women who had an episiotomy or tear due to an increased loss in strength of the pelvic floor muscles.

You can self-refer to the Physiotherapy Department in The National Maternity Hospital for 6 months following your delivery for any pelvic floor concerns: physio@nmh.ie

Next we will discuss pelvic floor exercises which can help to prevent these issues.



Pelvic Floor


After a vaginal or assisted vaginal birth, your pelvic floor undergoes a major change and needs time to heal. You may not be symptomatic of leaking or discomfort but you still need to work on strengthening your pelvic floor muscles! It is common to have some mild pelvic floor symptoms in the initial days to weeks, these should resolve with time. Pelvic floor dysfunction is not limited to leaking. This may include bladder or bowel control issues, feelings of pressure or heaviness in your vagina or persistent pain with sex.

If you are experiencing any of these ongoing symptoms you should seek help. You can self-refer to postnatal physiotherapy service up to 6 months after your delivery: physio@nmh.ie

Exercises

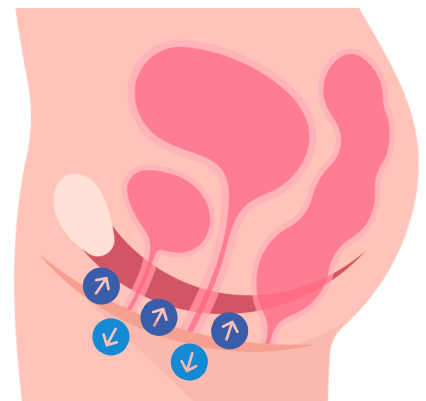
It is important to start gentle pelvic floor squeeze and releases in the early days after your delivery. This will help to increase blood flow to the area, help to settle some swelling and help any stitches to heal. You might have very little sensation when you try at first but this should return over the first few weeks as the swelling settles and the muscles get stronger. HSE recommend waiting 6 weeks after an assisted vaginal delivery before commencing true strengthening pelvic floor exercises as outlined below.

Technique

Gently squeeze shut your back passage (as if holding back wind), your vagina (as if gripping a tampon) and your urethra (as if stopping your flow of urine) 

Draw your pelvic floor inwards and upwards. Do this without tightening your buttocks, without holding your breath and without squeezing your legs together.

Release - let the muscle fully relax releasing all tension. 



'Magnificent 10'

Your aim is to be able to do 10 holds of 10 seconds each and 10 fast contractions. Three times a day. Start in lying and as able progress to sitting or standing

Begin by holding for a couple of seconds and gradually each week build-up to the 'magnificent 10'.

It is important that you keep breathing naturally whilst doing the exercises.

Give yourself time between squeezes to let go of the pelvic floor muscles completely.

Squeezy is a useful app by the NHS to help with your exercises.



Abdominal Retraining

Breathing & Tummy Muscles

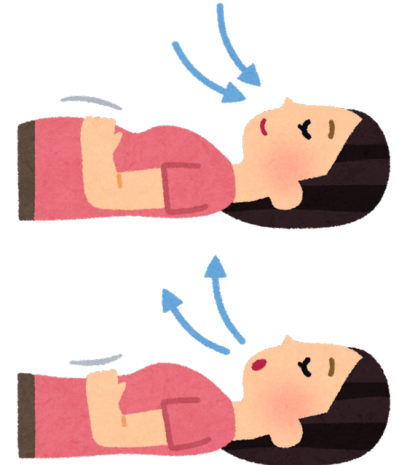
Diaphragmatic Breathing

Your diaphragm and pelvic floor move up and down like a piston while you inhale and exhale. This is called diaphragmatic breathing.

By slowly breathing all the way into the lower lungs and letting the tummy flop out, this helps to relax the pelvic floor. In turn, on exhalation, the pelvic floor is activated.

Correct breathing also lays the foundation for healing and strengthening through your deep abdominals.

Practice 10-15 breaths throughout the day, lying or sitting

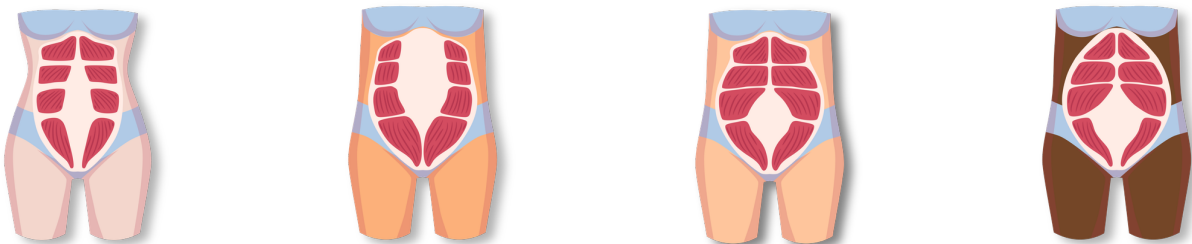


Tummy Muscles

A diastasis recti is simply the name given to the stretch of your tummy muscles during pregnancy. There are different variations outlined below. A diastasis is a very normal and natural process during pregnancy and happens to all pregnant women, it is also normal for this to remain while you are healing postnatally.

A lot of the natural healing happens within the first 12 weeks after birth, however you may still feel weak in your tummy muscles after this time. There are changes happening in your body for months after your delivery, and regaining strength in your tummy can depend on your activity levels. Your tummy muscles may never return to pre-birth appearance and this is normal.

Remember It is amazing what your body has achieved to accommodate your growing baby over 9 months, it needs equal time to heal.



Steps to help protect & strengthen your tummy muscles:

- Minimise excessive pressures on your tummy and pelvic floor such as heavy lifting or constipation, especially in the first few weeks
- Supportive clothing can be helpful to support your tummy muscles throughout the day, it can also be beneficial to wear supportive clothing during exercising
- Follow postnatal return to exercise advice
- Here are some beginner exercises outlined in the links below (click on the symbol to bring you to the link)

Positioning

Looking after your back

It is important that you take care of your back in the weeks following delivery. Being a new mum means there are lots of things to lift and carry that you may not of had before and you need a strong back to protect yourself against injury.

This back is more vulnerable to injury for the 5-6 months after delivery. Starting with good habits and implementing the following strategies for simple tasks like feeding, changing and lifting your baby as they grow can help to prevent back pain. Don't worry, back pain is very treatable if it does occur.

Feeding



- Sit in a comfortable chair with your back and thighs well supported.
- Placing your feet on a foot stool can help you sit back into the chair and support your back
- A chair with arms may provide you with more support.
- Place pillows on your lap to bring the baby up to the level of your breasts/bottle to avoid slouching.
- Try to rest back when you're feeding and relax your shoulders.
- Lying on your side can also be a comfortable position for feeding.



Changing & Bathing

- Adapt working surfaces to waist height to prevent you from stooping over and developing backache, e.g using changing tables.
- Bathe your baby on a surface at the right height for you.
- It will be easier to lift your baby from this height rather than having to lean down and lift.

Lifting - early days & as they grow

- Try to avoid lifting anything heavier than your baby during the first 6 weeks.
- Bend from the knees and breathe out as you lift your baby
- Keep your baby close to your body as you lift up.
- Accept help from others. Perhaps they can lift the baby to you in the early days.
- Minimise picking up younger children/toddlers in the early stages; rather encourage them to climb up to you while you are sitting.

Return to Exercise

0-12 weeks advice

The following is not a prescriptive plan but provides advice around returning to activity safely after delivery and ideas to help you get started. **Whatever stage you choose to return to activity postnatally, you should always begin at Week 0.**

Week 0 to 2

- Gentle pelvic floor activation (once catheter is removed) focus on gentle squeeze and release for healing
- Basic abdominal exercises - **Diastasis rehab series video 2** - *foundations of movement*
- Walking - gentle cardio exercise, increase distance and speed incrementally

Week 2 to 6

- Progress pelvic floor activation - gradually increase length of holds / reps, continue throughout programme
- Progress abdominal exercises - **Diastasis rehab series video 3** - *progressions of movement*
- Increase walking distance / duration / intensity
- Consider introduction of body weight movements e.g., squats, lunges and bridging

Week 6

- Gentle Perineal scar massage - following 6 week GP check and fully healed.
- Introduce low impact exercise e.g., Pilates, yoga, cross trainer or stationary bike (consider perineal pain)

Week 6 to 8

- Increase walking intensity e.g., power walking
- Increase duration / intensity of low impact exercise
- Introduce functional strengthening exercises e.g., deadlifts to help with performance of day-day tasks

Week 8 to 12

- Introduce swimming (providing bleeding has stopped & perineal wound healing complete).
- Able to introduce higher intensity static aerobic activity e.g., spinning
- Gradually increase resistance (bands or free weights) during core / lower limb exercises - start light, no heavier than your baby and increase as able

From week 12

Before returning to running / high intensity exercise you must be able to complete the following without any pelvic heaviness, bleeding, incontinence or moderate pain (3/10 or less).

Walking	30 mins	<input type="checkbox"/>
Single leg balance	10 sec (each side)	<input type="checkbox"/>
Single leg squat	x10 (each side)	<input type="checkbox"/>
Jog on spot	1 minute	<input type="checkbox"/>
Forward bound	x10 repetitions	<input type="checkbox"/>
Single leg hop	x10 (each side)	<input type="checkbox"/>
Running man	X10 repetitions	<input type="checkbox"/>

** You should be performing your pelvic floor exercises in standing - 10x 10sec, 10 fast. 3x day

Useful Apps

Click the icons below to access:



[Healthy Bodies after Birth Playlist](#)





The National Maternity Hospital

HEALTHY BODIES AFTER BIRTH

An information session on caring and reconnecting with your body as it recovers after birth

Topics include:

- **Bladder & Bowel Care**
- **Abdominal Care**
- **Pelvic Floor Advice**
- **Returning to Movement**
- **and more!**

Every Friday at 11am

Online



Physiotherapist led information session
Email njordan@nmh.ie to book your place

www.nmh.ie

Postnatal Hub Service

