

Postnatal Handbook



Liberty Pelvic
Health Physio



Our Website
www.libertyphysio.co.nz

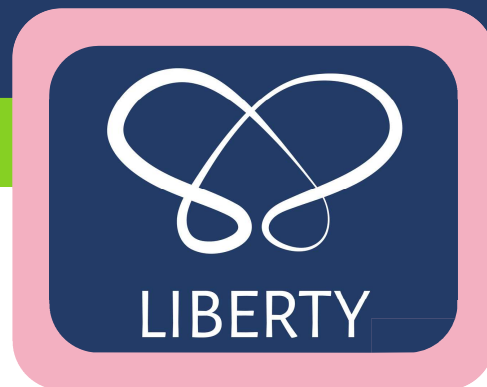
Our Locations
Merivale
Moorhouse Avenue
Cashmere

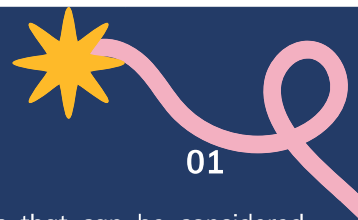
Liberty Pelvic Health Physio

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Your postnatal journey

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Following your birth you may feel certain sensations that can be considered normal shortly after delivery. But sometimes it is difficult to know what is normal healing vs. something you need to speak to a healthcare professional about. The table below can help with this, but remember... everyone heals at different rates:

Symptom	Is this normal?	Possible cause	Who do I see?
Burning pain when weeing, blood in your wee, smelly cloudy wee	X	You could have a urinary tract infection	GP
Pain, puss, or heat from your tear / c-section incision / episiotomy	X	You could have an infection	Midwife can check but treatment will be with GP
Vaginal heaviness / pressure sensation	✓	It may last up to 6 weeks	If this persists past 6 weeks, book to see a Pelvic Health Physiotherapist
Straining / difficulty emptying your bladder	X	You may have a bladder injury	GP or midwife (if still under their care) will need to check if you are emptying your bladder properly
Pain at the anus when pooing	✓	This should settle after 1-2 weeks. If this continues you may have haemorrhoids or an anal fissure	GP
Leaking wee	✓	You should see an improvement around 6 weeks. If not, or if you are distressed by this (before 6 weeks), you should be seen	Pelvic Health Physiotherapist
Leaking poo	X	There are several contributing factors here, but it's important to receive postnatal support	Pelvic Health Physiotherapist
Pelvic pain	✓	If you had pelvic pain in your pregnancy this can take time to settle but it should resolve by 6 weeks	Pelvic Health Physiotherapist if pain persists
Doming in my tummy when lifting or using my tummy muscles	✓	If you are struggling with discomfort or this persists for 6-8 weeks after birth you may need support with targeted exercises	Pelvic Health Physiotherapist





Common issues

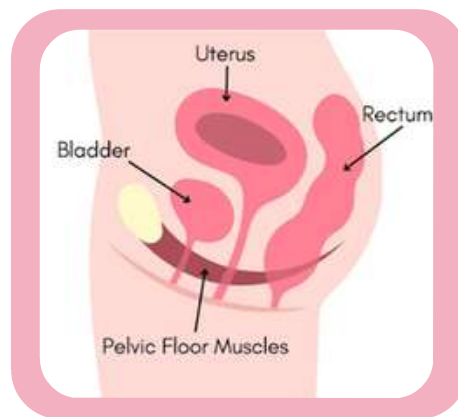
Some of the common problems during and after pregnancy are leakage of wee (urinary incontinence), leakage of poo (faecal incontinence), pelvic organ prolapse, and pelvic pain.

- 2 in 5 women experience urinary leakage
- 1 in 2 women have some degree of prolapse
- 1 in 10 women have faecal incontinence

While these are evidently common problems, it is not normal to just live with these symptoms. If you are struggling with these symptoms, we recommend seeing a Pelvic Health Physiotherapist. At the end of this leaflet, you will find a QR code that you can scan to book a Pelvic Health Physiotherapy appointment and get the right support for you

What is the Pelvic Floor?

Your pelvic floor muscles are a group of muscles that sit in your pelvis like a bowl. They attach to the pubic bone at the front of your pelvis and to your tailbone (coccyx) at the back of your pelvis.



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What does your pelvic floor do?

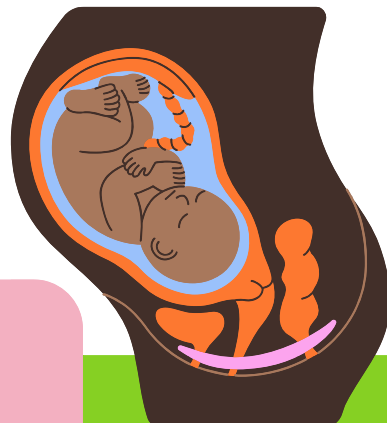
1. Bladder and bowel continence (stops you leaking wee and poo)
2. Supports the bladder, bowel, cervix and uterus to help prevent pelvic organ prolapse (a bulging of the front wall of the vagina, the back wall of the vagina or the cervix or uterus)
3. Helps with sensation during sex and ability to orgasm

What happens to your pelvic floor during pregnancy and delivery?

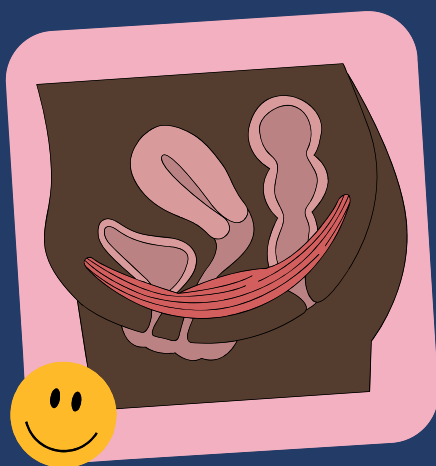
Your pelvic floor is under more pressure during pregnancy, which can cause the muscles to stretch and weaken. There are several reasons for this: the weight of a growing baby/babies, hormonal changes (which can change the structure of your pelvic floor), and baby/babies pressing on your bladder – resulting in reduced support for your bladder neck and urethra (wee pipe).

During a vaginal delivery your pelvic floor can stretch over 3 times its resting length which can cause weakness. You may also have some degree of tearing during birth. 9 out of 10 first time vaginal deliveries experience a tear, which can again affect the strength of your pelvic floor. Other factors that can affect your pelvic floor during delivery are:

- Forceps or ventouse delivery
- Pushing for more than 2 hours
- Vaginal birth with baby facing up
- Giving birth to a baby larger than 4kg
- Perineal trauma particularly 3rd or 4th degree tears



Pelvic floor exercises after birth



After birth your pelvic floor muscles will likely feel weak and you may even struggle to contract them. It is recommended you start gentle pelvic floor contractions as soon as it is comfortable and catheter (if you have one), has been removed. This will also help with healing if you have had a tear. Please see below for guidance on how to find your pelvic floor muscles. Start with gentle contractions to help improve your connection to your pelvic floor. You may find it easier to do pelvic floor exercises lying down to start with. If you struggle with connecting to your pelvic floor after birth or are unsure if you are doing these exercises correctly, please book to see a Pelvic Health Physiotherapist.

How to find your pelvic floor

- 1. Gently tighten your back passage (anus)** – as if you are stopping yourself passing wind. Do not squeeze your buttocks or leg muscles. Do not hold your breath. Continue to breathe normally.
- 2. Gently tighten your vagina/front passage** – as if you are trying to stop the flow of urine. Try to feel the muscles gently lifting upwards and forwards towards the pubic bone.

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3. Feel the muscles working together, then relax.

4. As your connection to your pelvic floor improves, gently tighten the pelvic floor muscles as above, and hold. How many seconds can you hold? Aim for 5 seconds. When you let go, can you feel the muscles relax? If not, you have held too long – try again with a shorter hold of 1-2 seconds. It's important to discover your hold time.

Once you can comfortably contract your pelvic floor, start to develop a routine with a mixture of short and slow contractions on a daily basis.

Exercise 1 - slow pull-ups

Take a breath in. As you breathe out, tighten the pelvic floor muscles slowly. Continue to tighten for your length of hold, then relax and feel the muscle let go. Rest for 5 seconds. As it gets easier, gradually increase length of hold and number of repetitions, aiming for 10 seconds.

Exercise 2 - fast pull-ups

Tighten the pelvic floor muscles quickly. Let go straight away.

Pelvic floor exercise routine

Do exercise 1 and 2 at each session. As soon as you can, increase to 10 slow and 10 fast pull-ups. Aim to repeat each session 3 times each day, so in total you will be doing 30 slow and 30 fast pull-ups a day. As your muscles get stronger you can progress to doing the exercises in sitting and then standing.

Do not practice stopping the flow of urine midstream as this may interfere with the normal process of emptying your bladder

The knack

Try to get in the habit of tightening your pelvic floor muscles before you cough, sneeze or laugh.

If you struggle to locate your pelvic floor or are unsure if you are doing these exercises correctly then please get in touch and we can support you with this.

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Your bowels after birth:

Constipation can be common, and it's important to manage. Straining can stretch and weaken your pelvic floor and lead to other issues like a prolapse. We have some handy tips below to manage this a bit better:

- Correct toilet position with feet resting on a step (as shown below)
- Avoid straining
- Relax on the toilet
- Try using breathing techniques like mooring or ssh to help empty
- Keep hydrated – aim to drink 1.5-2 litres of fluid a day if you are bottle feeding. If you are breastfeeding you need to drink 2.5-3 litres a day
- Ensure you are eating enough fibre
- If your stools are still firm speak to GP or pharmacist about stool softeners





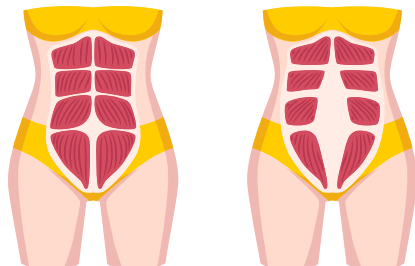
Healthy bladder habits

After your delivery you may start to notice you have to rush to the toilet to go for a wee. Or even not make it to the toilet in time. Some people can also experience some dribbling of wee after they have stood up from the toilet. You may find the tips below helpful:

- Aim to drink 1.5-2 litres of fluid if you are not breastfeeding. If you are breastfeeding you need to drink 2.5-3 litres a day
- Avoid bladder irritants, e.g. fizzy, caffeinated, or alcoholic drinks
- Avoid 'just in case' wee's (trying to wee when you don't have the sensation to)
- Take your time weeing and don't strain
- You could try rocking on the toilet forwards and backwards to help you empty better
- Pelvic floor exercises

Your tummy muscles after birth

Your stomach muscles stretch during pregnancy, particularly your rectus abdominus and the connective tissue that connects them – called the linea alba. This is a normal process as your baby is growing. Once you give birth, it takes time for this to improve. In two-thirds of people it resolves in 8 weeks. After this 8-week mark, if you have doming – or a large gap between your tummy muscles – you may have diastasis recti and should see a Pelvic Health Physiotherapist for exercises.



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Pregnancy related pelvic girdle pain (PPGP)

It can be common to experience some pelvic pain during pregnancy and most of the time the pain will resolve completely by 6 weeks post birth, but this is not always the case. If you are struggling with pain, please book in to see a Pelvic Health Physiotherapist using the QR code. Early intervention is best.



Exercising after birth

Returning to exercise after your delivery can help with your physical and mental recovery. Everyone will recover at different rates, so it's important to listen to your body. The current guidelines for exercise after delivery is to slowly build up to 150 minutes of moderate-intensity exercise with two sessions of strength-based work a week. It is not recommended you return to high-impact exercise sooner than 3 months after delivery e.g. running or jumping.

If you are unsure how to return to physical activity safely, then a Pelvic Health Physiotherapy appointment would be helpful.



Whether you are doing low-impact exercise (like walking or weight training) or high-impact exercise (like running) you want to ensure you are symptom-free.

If you experience:

- urinary urgency or leakage
- faecal urgency or leakage
- the sensation of heaviness or dragging in the pelvis/vagina
- pain in pelvis, vagina, perineum, or abdomen.



Then please contact us. You can book an appointment with Liberty Pelvic Health Physio using the QR code or link below.



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Liberty Pelvic Health Physio

Our vision:

Helping you to: Breathe well, Connect
with your body, Move with ease.



More Information:

Contact us:
03 983 0241

Our website:
www.libertyphysio.co.nz

Our locations:
Merivale
Moorhouse Avenue
Cashmere

