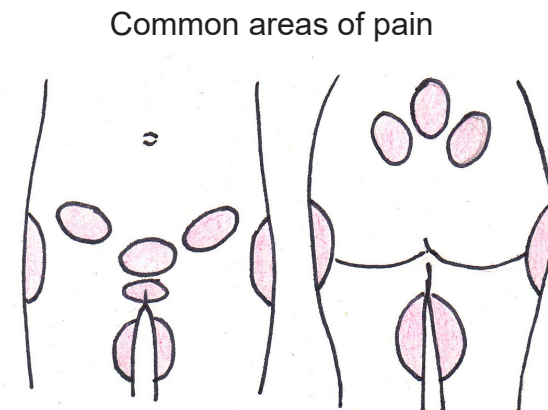
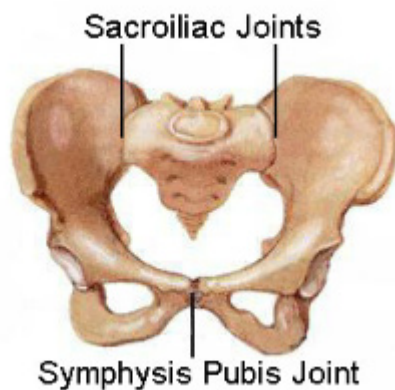


Rehabilitation Department

Pelvic Girdle Pain in Pregnancy

What is pelvic girdle pain (PGP)?

PGP describes pain from the joints that make up your pelvic girdle. This includes the symphysis pubis joint (SPJ) at the front and/or the sacroiliac joints (SIJ) at the back. The pain may be low in your back, hips, buttock, groin or pubic bone. You may have pain in just one place or all around your pelvis. Sometimes you may have pain down one or both legs as far as the knee.



What are the symptoms of PGP?

- Difficulty walking.
- Pain when standing on one leg.
- Pain when negotiating stairs
- Pain/difficulty moving your legs apart
- Difficulty lying in some positions.
- Pain during normal activities of daily living.
- Clicking or grinding in pelvic area.

What causes PGP?

- Hormonal changes in pregnancy can make you more likely to develop pain.
- Changes in the activity of the muscles of your tummy, pelvic girdle, hip and pelvic floor can lead to the pelvic girdle becoming less supported and therefore painful.
- The pelvic girdle may compensate for changes to your posture as your baby bump grows.
- A previous accident or fall that has damaged your pelvis.

What can I do to help pelvic girdle pain?

1. Avoiding any activity where you are taking one leg away from another e.g. side stepping, separating legs when getting in and out of bed and when turning in bed and when getting in and out of the car (see the guides below).
 - **Getting in and out of bed** – Try to turn onto your side with your knees bent, keep knees together, let your feet and ankles go over the edge of the bed and use your arms to push you up into sitting. This is called log rolling.



- **Turning in bed** – With a pillow between your legs and keeping your knees together, contract your pelvic floor muscles and tummy muscles when turning.
Or try turning onto all fours with the bump down towards the bed and lower onto opposite side.
Or log roll into sitting as in diagram above and lay down again with head at the foot end of the bed.
Make it easier to turn in bed by lying on a silky scarf or use non-iron sheets. It helps by reducing friction from nightwear and bed sheets.
 - **Getting in and out of a car** – try to swivel in/out of the car with your knees together. Sitting on a plastic bag may make it easier to swivel. Don't forget to remove the bag when driving but keep it handy to use again when required.
 - **Sexual intercourse** – Try different positions e.g. lying on your side or kneeling on all fours.
2. **Crossing legs should be avoided** when you have pelvic girdle pain. Try asking others to remind you when they notice you doing it.
 3. **Avoid lifting** e.g. shopping bags (split shopping into more bags so you carry less), wet washing (take a few items from the washing machine at a time rather than lifting the full load), children (as much as possible squat down or kneel down for cuddles or encourage them to climb onto the sofa to reach you).
 4. **Try to keep your weight equally over both legs** - Activities that often involve putting more of your weight on one side are:
 - **Dressing** – sit down to get dressed and undressed. Wear flat supportive shoes.
 - **Carrying** – avoid carrying anything in one hand or carrying a toddler on one hip.

5. **Household chores** - ask for and accept help from your partner, friends and relatives.
6. **Stairs** - Avoid where possible. Go upstairs one step at a time with the most pain free leg first and the other leg joining it on the same step. Go downstairs with the most painful leg first, then the other leg joining it. Try and limit the amount of times you have to go up/down stairs.
7. **Walking** - Remain active within the limits of your pain. Listen to your body to guide how far you can walk. Avoid taking long strides when walking and try to slow your pace.

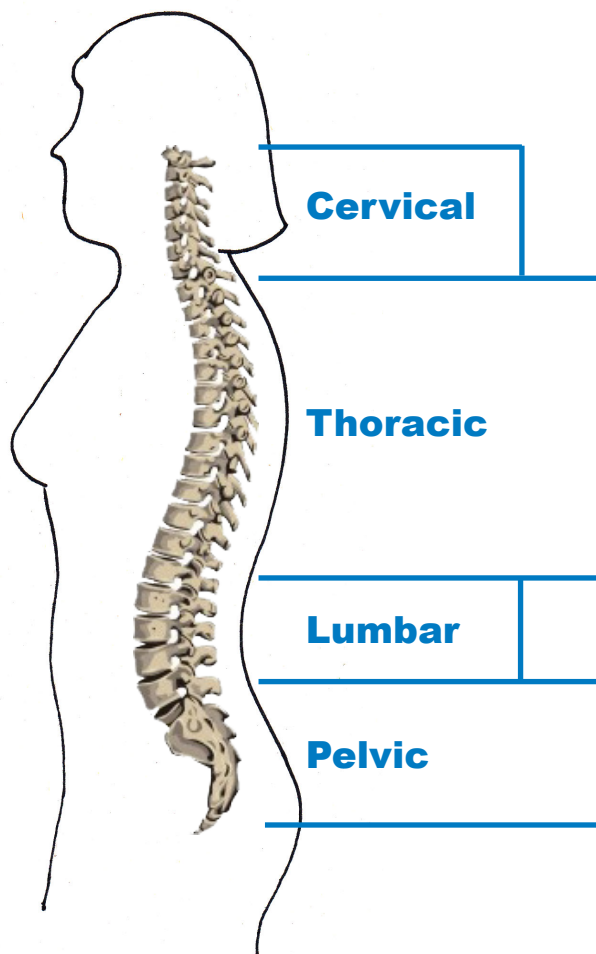
Exercise

- **Swimming** - swimming is excellent during pregnancy but breast stroke legs can often increase your pain. Try doing backstroke or front crawl instead, or use round breaststroke arms with kicking front crawl legs.
- **General exercise** - do not take up any exercises which you would not normally do apart from the exercises advised in this leaflet. Only low impact exercises are appropriate and if you feel any exercises make your pain worse it is advisable to stop.

Posture

Try and keep the natural curves in your spine which ever position you are in

See diagram below:



- **Avoid getting into asymmetrical positions.** This may happen when you are:
 - Standing - avoid standing on one leg and avoid standing for long periods.
 - Sitting - avoid sitting on the floor, sitting twisted and sitting for long periods, avoid slouching
 - Sleeping - sleep in a neutral position, pillows are useful to support you e.g. a pillow between your legs and one under “baby bump.”



Pain Relief

- **Heat** - Many women feel heat is beneficial – either by way of a warm shower or bath or by applying a wheat bag or hot water bottle wrapped in a few layers of towel to the low back. Always ensure that a hot water bottle is wrapped in a few layers of towel and do not exceed 20 minutes at a time, in order to minimise the risk of burns. Do not apply heat to the symphysis pubis or abdomen in pregnancy.
- **Ice** - If you are experiencing pain at the front around the symphysis pubis, ice can be beneficial. Wrap a bag of frozen peas in two layers of towel and apply to the painful area. Do not worry, although this is a sensitive area the effect is a gentle cooling. Again do not exceed 20 minutes to minimise the risk of ice burns.

N.B. If you have circulatory problems do not use heat or ice. If in doubt discuss this with your physiotherapist or midwife.

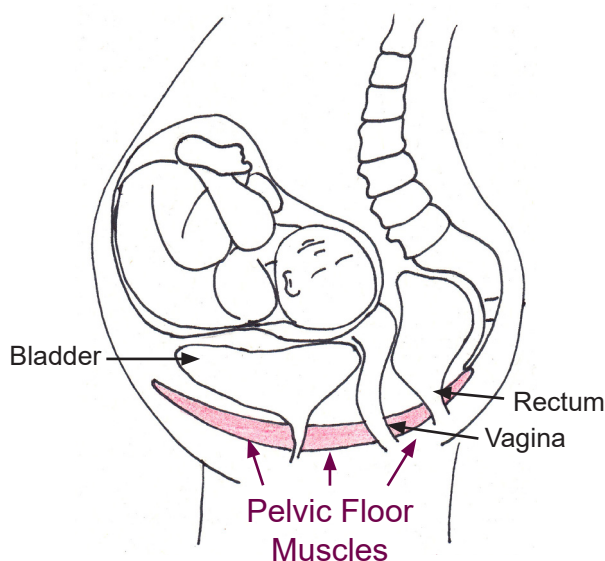
Additional aids

- **Maternity support belts** - Some women find maternity belts to support the pelvis useful. It is important to remember that your abdominal muscles need strengthening, so any use of belts need to be coupled with the exercises given in this leaflet, or the muscles may weaken further. It should not be worn when resting but can reduce pain when worn whilst carrying out essential daily activity. There are all sorts of maternity belts available, the simpler the better to allow taking the belt on and off more easily. If the belt is not too wide it can be moved more easily to support your area of pain; be it lower back, under baby bump or pubic bone. These can be purchased from a number of on-line retailers.
- **Elbow crutches** - If you are really struggling with walking and mobilising in daily function, using elbow crutches can help as some of your body weight is taken though your arms and therefore off the pelvis. Please contact the Physiotherapy Department if you feel these would help you.

Exercises

Pelvic floor exercises

Diagram to show location of pelvic floor muscles in pregnancy



Your pelvic floor muscles:

- Stabilise your pelvic joints
- Support your pelvic organs preventing prolapse
- Wrap around your bladder and bowel to prevent incontinence
- Have an important role in sexual function

During pregnancy these muscles naturally lengthen and weaken putting you at risk of future problems. Exercises will help to retrain and strengthen the muscles and improve the control of the pelvic girdle and in turn reduce/prevent pelvic girdle pain.

There are 2 types of muscle fibre which need exercising:

- **Slow pelvic floor muscle fibre exercises**

Imagine that you are trying to stop yourself passing wind and at the same time stop the flow of urine.

You should feel a squeeze and lift from around your back and front passages. It is a gentle exercise and you should not be pulling in your buttocks or tummy muscles.

Hold the contraction for as long as you can and repeat until your muscles are tiring. To strengthen the muscle further you need to build up the endurance of the muscle so that it works harder and longer.

- **Fast pelvic floor muscle fibre exercises**

Tighten and relax the muscles quickly, up to 10 times.

How often and how many?

Build up to 10 slow contractions, holding for 10 seconds and 10 fast contractions. Do these 3 times every day.

You can carry out the exercises in lying, sitting or standing.

The pelvic floor muscle contractions can also be done functionally whilst completing activities such as bending, getting in/out of bed or the car, when doing any lifting you feel you are able to do safely. Contracting the muscle quickly before coughing or sneezing will help to prevent any urine leakage you may experience.

Pelvic Tilt

Pelvic tilt is an exercise that allows you to help find your neutral pelvic position. This is the position that provides equal weight distribution and allows more effective engagement of your pelvic muscles. It can be done in different positions as demonstrated below:

1. Sitting

Start by sitting up tall and then tilt your pelvis backwards as if you are trying to curl your tail bone down into the chair. Return to the starting position.



2. Standing

Stand against a wall. Flatten your back against the wall by squeezing the buttocks and pulling the stomach in.



3. Lying with knees bent

Squeeze the bottom muscles and flatten your back down. Hold for a few seconds and release.



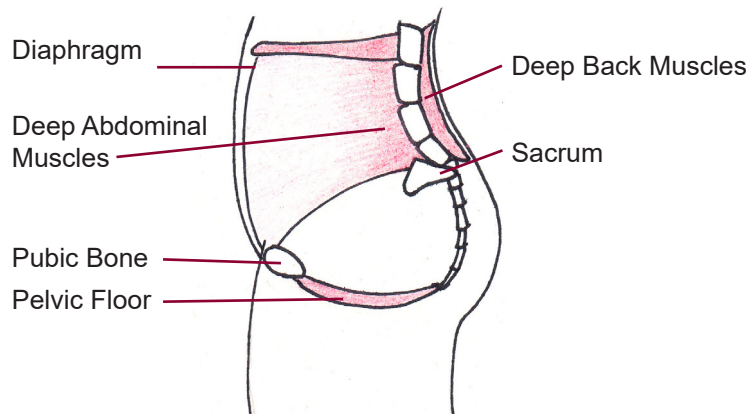
4. Hands and knees

Squeeze your abdominal and bottom muscles to tuck your tailbone under and hunch your back upwards. Finish the exercise with the lower spine/pelvis in the neutral position.



As your baby grows you may find your lower back curves more. This change in posture is necessary to maintain your balance as your centre of gravity changes with your growing “baby bump.” Pelvic tilting eases the strain from this posture and should ease pain in the lower back.

Deep abdominal muscle exercise



This exercise strengthens the muscles that help to stabilize your back and pelvis. You should do this exercise in a position that you find comfortable, initially this may be on your back with your knees bent up or on your side.

1. Let your tummy sag. Breathe gently.
2. When you breathe out draw in your lower tummy as if you are trying to zip up a tight pair of jeans. You should be relaxed from above your belly button and be able to breathe normally.
3. Hold the contraction for 3 breaths in and out and repeat 4-5 times. Practice 4 times a day. Build up to 10 contractions holding for 10 seconds.

When you get better at this, start to use it in different positions and during different activities e.g. as you stand, as you lift and as you turn over in bed.

These abdominal muscles work with your pelvic floor muscles.

Remember the 3 P's :-

- **PACE** your activity
- Practice your **PELVIC FLOOR EXERCISES**
- Maintain a good **POSTURE**

Can I still have a normal labour?

Most women with PGP can have a normal vaginal birth. Advise your Midwife that you have PGP. During labour use gravity to help the baby move downwards by staying as upright as possible: -

- Kneeling
- On all fours
- Standing

Try to avoid lying on your back or sitting propped up on the bed as these positions reduce the pelvic opening and may slow labour. Using a birthing stool or squatting may be less well tolerated if you have PGP. Being in water may help you to change positions more easily. You may be able to lie on your side for internal examinations.

What if the PGP continues after baby is delivered?

Most women find the pain resolves soon after birth. However if this is not the case within the first few weeks, please ask your Midwife or GP to refer you into the Women's Health physiotherapy team or if you have been referred to this team during pregnancy just phone to make an appointment.

Additional Information:

Scan the QR code below to take you to Women's Health Physiotherapy website



<http://www.cht.nhs.uk/services/clinical-services/physiotherapy-outpatients/patient-careinformation/>

Pelvic, Obstetric, Gynaecological Physiotherapy (POGP) www.pogp.csp.org.uk

If you have any comments about this leaflet or the service you have received you can contact :

Physiotherapy Department
Huddersfield Royal Infirmary
Telephone No: 01484 342434

MSK Physiotherapy Admin Office
Telephone No: 01484 905380

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਚ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਚੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

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"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"