

A HEALTHY PELVIC FLOOR AFTER CHILDBIRTH

Pregnancy and birth are a healthy natural function of the female body, not an illness. Yet many women experience injury at the time of birth which may lead to leaking of urine or faeces (incontinence), sagging organs (prolapse), and related problems with sexual intercourse, and with their feelings of self worth. Although birth is the main issue (see risk factors below), women who have never been pregnant, and women who have had elective caesarean surgery, can also experience these problems. This set of health problems has often been 'unmentionable', and some women may feel embarrassed to talk about them.

Pelvic floor exercises help maintain good function. A healthy lifestyle with avoidance of constipation, obesity, chronic cough, and heavy lifting minimises pelvic floor problems. By making informed decisions about your pregnancies and births, you will be able to increase your control over, and improve your own health.

If you are experiencing incontinence or other pelvic floor problems, we encourage you to seek advice from a women's health practitioner (such as a specially qualified physiotherapist, midwife, nurse or doctor), who can guide you to obtain appropriate care.

Pelvic floor exercises

1. Squeeze your back passage (anus) together as if you were stopping yourself from passing wind.
2. Squeeze your front passage (urethra) together as if you need to stop the flow of urine.
3. Lift both together and count to 10.
4. Repeat 10 times.
5. Repeat 1 and 2 and release quickly, 10 times.

(Source: Hendy (2006), p452)

A few points to remember

Practise your pelvic floor exercises during your pregnancy, and re-commence after your baby is born.

The first time you pass urine after giving birth you may feel that the sensation is different, and that you have to consciously let the urine flow. This is a normal sensory change, as tissues have been stretched and displaced. You will need to reclaim and reconnect with your pelvic floor muscles.

Rest for a new mother in the early days and weeks after giving birth will allow your body to become stronger, and stretched tissues to return to their normal tone.

It is important not to become constipated, and not to strain when sitting on the toilet. Straining can result in prolapse.

Frequently asked (or not asked) questions

What is the pelvic floor? It's the soft tissues, including muscle and connective tissue, from your pubic bone in the front to your tail bone at the end of your spine.

What is the perineum? For women, it's the area between the vagina and the anus.

Who needs to do pelvic floor exercises? All adult women.

Will a caesarean birth prevent pelvic floor problems? No.

Risk factors for severe perineal trauma

- Routine episiotomy
 - Birth in lithotomy position (legs up in stirrups)
 - Operative birth, particularly forceps delivery
 - Inexperience of the midwife or doctor in attendance at the time of birth
 - Prolonged second stage and use of oxytocin
 - First birth
 - Baby's head born in an unusual position, such as posterior (malposition)
 - Anaesthesia: local, epidural or spinal
 - Baby's weight > 4Kg, and/or large head circumference
 - Ethnicity (some ethnic groups are at higher risk)
- (Based on Hendy (2006), p449)

Clearly, some of these factors are non-negotiable, such as your ethnicity, the shape of your baby's head, or the fact that you are having your first baby.

However, in preparing for birth, you may be able to reduce the likelihood of complications, by planning to give birth spontaneously, without unnecessary medical intervention, and accepting and working with the natural process. If you plan this with your primary carer (leading maternity carer, a midwife or a doctor) who plans to be in attendance at the time of birth, and that person is committed to protecting and supporting the natural process, you will have confidence if you need to make other decisions during the birthing process.

Reference: Hendy S. *Maintaining the integrity of the pelvic floor* Ch 25. In: Pairman S, Pincombe J, Thorogood C, and Tracy S (Eds) (2006). *Midwifery: preparation for practice*. Elsevier Australia.

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Date revision: April 2012