5 facts about exercise during the child-bearing year



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Exercise during pregnancy has many benefits to mother and baby

At least 150 minutes of weekly, moderate-intensity exercise:

- controls gestational weight gain
- limits weight gain in pregnant women who are overweight or obese
- reduces the risk of preeclampsia/gestational hypertension
- reduces the risk of gestational diabetes and associated macrosomia
- improves mood and sleep.

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Pelvic floor exercises during and after pregnancy greatly reduce the risk of pelvic floor dysfunction

A supervised pelvic floor muscle training protocol should be followed and include:

- strength-training principles & emphasising maximum contractions
- awareness of functional pelvic floor muscle activation during exercise and daily activities that involve increased pressure on the pelvic floor.



Exercise prevents and reduces pelvic girdle and lower back pain during pregnancy

Individualised physio-prescribed exercise includes:

- abdominal strengthening exercises
- pelvic floor muscle training
- targeted stretches
- low impact exercises—walking, stationary cycling & swimming.









It is recommended to wait at least three months after childbirth before considering a return to running

A low-impact exercise regimen should be followed, incorporating:

- basic cardio—walking, cycling & swimming
- low-load pelvic floor and abdominal exercises
- a graduated return to more load from
 - 3–6 months.

At 6–12 weeks postnatally, every mother should have an individualised pelvic health assessment and guided pelvic floor rehabilitation to:

- prevent and manage pelvic organ prolapse & urinary incontinence
- improve sexual function.

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