

Obstetric Physiotherapy Services

Due to COVID 19, patients have avoided attending GPs with pregnancy related musculoskeletal pain including pelvic girdle pain and pregnancy related lower back pain. As services reopen there will be an increased number of patients presenting with these symptoms. This is a quick guide about general advice and resources for patients, and when to refer on.

General advice for patients with pregnancy musculoskeletal disorders

- Keep active within the limits of your pain, try to move every 40 minutes to an hour;
https://pogp.csp.org.uk/system/files/publication_files/POGP-FFPregnancy.pdf
- Ensure good manual handling when lifting other children or shopping.

Specific advice for pelvic girdle pain

https://pogp.csp.org.uk/system/files/publication_files/POGP-PGP%28Pat%29%28UL%29.pdf

- Squeeze your bottom muscles and keep your knees together when turning over in bed or getting in and out of a car;
- Avoid standing on one leg – sit down to put on shoes and socks;
- Take the stairs one at a time;
- Avoid asymmetrical activities such as carrying a child or heavy shopping on one side.

Advice for exercise during pregnancy

- Pregnant women should be aiming to complete 150 minutes or moderate intensity activity each week including strengthening activities twice weekly
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/829894/5-physical-activity-for-pregnant-women.pdf
- It has multiple benefits including controlling weight gain, improving mood and sleep and helps to prevent comorbidities including gestational diabetes and hypertension;
- Women should be able to talk comfortably during all exercise.

Contraindications to exercise

- Cervical cerclage / cervical incompetence
- Placenta praevia / low lying placenta
- Unexplained vaginal bleeding
- Intrauterine growth restriction / concerns about babies size
- Pre-eclampsia
- Complex CVS or respiratory disease

What do obstetric physiotherapists do?

- Complete a thorough subjective and objective assessment including previous pain and obstetric history;
- Provide education and advice about how to manage symptoms;
- Prescribe exercise to optimise movement and function;
- If appropriate, they can provide adjuncts such as maternity belts or crutches.

When to refer to pelvic health physiotherapy?

- Pelvic Girdle pain and pregnancy related low back pain;
- Difficulty returning to exercises postnatally;
- DRAM in the first year postnatally.

Who not to refer to physiotherapy

- Patients who are more than 12 weeks postpartum can be referred to routine MSK physiotherapy