



Exercise in Pregnancy

By Lisa Houchins

Published: Aug 4 2005 - 12:00am

White Papers

Exercise in Pregnancy

Preparing for birth should be much like preparing for an athletic event because labour and birth are indeed physical events we can prepare our bodies for. A healthy and fit mother will not only feel better during pregnancy, she will have the strength and flexibility to move during labour easily and comfortably.

After the first trimester, activities that involve lying flat on her back for long periods of time should be avoided. That's because the weight of a developing baby may press down on and compress blood vessels that play an important role in blood circulation to the uterus, pelvis and legs.

As fatigue tends to be most common in the first and third trimesters, she may find herself less able to exercise during these periods.

Contact sports or extreme sports (for example, skiing, scuba diving, and sky diving) should be avoided because they have the potential to do harm to mother and baby.

Discuss with primary caregiver any unusual symptoms experienced during or after exercise, such as



discomfort in her chest, neck, jaw, or arms; nausea, dizziness, fainting, or excessive shortness of breath; or short-term changes in vision.

Consider exercising in a medically supervised program, at least initially, if there are any peripheral vascular disease or kidney problems. Those with peripheral neuropathy should not run, jog, or walk long distances without the approval of their doctors, and those with retinopathy should check with their eye doctors before initiating an exercise program.

Preparation

A woman's exercise level during pregnancy depends largely upon her level of fitness before she became pregnant. In other words, the more physically fit before, the more activity she can do safely during pregnancy. It is important to realize that during pregnancy is not the time to strive for exercise milestones or try to lose weight. It is a good idea to monitor heart rate, a good way to monitor optimal exercise intensity without overexertion.

Strengthening and toning torso, back, pelvis, thighs and stomach will help with the labour process. Exercise performed safely during pregnancy can lessen your fatigue, improve your self-confidence and mood, reduce backaches and bad posture, and strengthen your endurance during a prolonged labor.

Muscular Control of the Vagina and Perineum ("Kegel")

This exercise is very important. Sitting, standing or lying down; contract and tighten the muscles of the pelvic floor (those used to stop the flow of urine flow). Think of pulling the opening of the vagina all the way up to the cervix. Hold for a count of five and slowly release. After releasing, relax and bulge your perineum down. Putting a hand over the perineum as it tightens and then bulge it out can



identify this. Do four to six sets of twenty-five, spread over the course of the day. This is commonly known as the "Kegel" exercise, after Doctor Arnold Kegel, who identified the importance of this exercise.

Tailor Sitting

Sit on the floor with soles of feet together. Lean upper torso forward until a gentle pull is felt in inner thighs. Hold the stretch for twenty to thirty seconds, building the length of stretch time gradually. Repeat three to four times. Sit in this way whenever possible; choose to sit on the floor at least three times daily.

Pelvic Rock

Kneeling on all fours (or leaning on chair seat if mother has carpal tunnel syndrome), tighten the abdominal muscles, especially the lower muscles, while tightening and tucking in bottom. This may be done frequently throughout the day to ease back discomfort and strengthen abdominal muscles. Repeat twenty to thirty times.

This is an excellent exercise to move a posterior (baby's back is to mother's back) baby into an anterior position (optimal position, baby's back to mother's front, usually with the back on mother's left front). It is important that if baby is posterior, mothers should avoid reclining (on couch, in recliner, bucket seats in vehicles) and assume upright, forward leaning or side lying to help baby turn.

Squatting



Stand with feet and heels flat on floor, about a shoulder width apart. Face a chair or other stable object for support. Feet should point outward, not forward. Hold onto the support, and bend knees out while lowering bottom to no lower than knees, keeping feet flat on floor. Slowly build time until this position can be held comfortably for a minute or longer.

There is some concern about assuming this position during pregnancy as it is felt that it may commit a baby who is in a posterior position which is known to prolong pregnancy (non-progressing prodromal labour as baby attempts to turn prior to active labour), prolong labour and increase labour pain. However, most posterior babies do not engage (move into the pelvis) prior to labour. If baby is believed to be posterior, focus on pelvic rocking (above).

Beach Ball Hold

Sit on floor, knees bent, feet flat on floor. Holding lower abdominal muscles in tightly, tuck chin to chest, cross arms across chest, and lean back slowly while keeping feet flat on floor until upper torso leans back at approximately forty-five degree angle. Hold this position for a count of ten seconds. Return to original position by using hands on knees to support lower back. Repeat ten times and build slowly until you can repeat twenty to thirty times.

Practicing Good Posture

Stand against a door and try to touch it with the small of your back. Place hands under ribs on each side of the chest. Now pretend to lift the rib cage up. There will be an automatic straightening of the shoulders, tuck hips under, and raise chin. Hold head high and be proud to be pregnant!



Walking

Walk daily, starting slowly and building slowly until walking one to two miles in thirty to forty-five minutes is comfortable. Wear supportive and comfortable shoes, and stretch thighs and calves before and after walking to avoid muscle damage. Walk with abdominal muscles pulled in, bottom tucked tight, back straight, and head looking forward. Swing arms to increase aerobic exercise.

A "side-hitch" indicates inadequate oxygen intake; breathe slowly and deeply, slowing pace if necessary.

Important Points to Remember:

- Pay special attention to proper footwear.
- Drink lots of water and stay well hydrated before, during, and after activity.
- Warm up before a workout, and cool down afterwards.
- Skip exercising any time you have a fever.
- Exercise to the point of mild fatigue and never to the point of exhaustion.
- Mothers should avoid exercising in hot, humid climates and not get overheated (more than 100.4 deg F core body temperature).

Alert Caregiver when:

- Vaginal bleeding or spotting, abdominal cramping, absence of fetal movement, or prolonged contractions after stopping exercise.



- Light-headedness or dizziness, serious headache, shortness of breath, palpitations, fast resting heart rate (more than 100 beats per minute), and chest pain that continue past a short rest period.

*This may be copied and distributed with retained copyright.
© International Cesarean Awareness Network, Inc. All Rights Reserved.*

wp_exercise.doc
8/4/2005

©2005 ICAN, Inc.