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

After the first trimester, activities that involve lying flat on the 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, an expectant woman 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 your primary caregiver any plans for an exercise routine or any unusual symptoms experienced during or after exercise, such as: discomfort in the chest, neck, jaw, or arms; nausea, dizziness, fainting, or excessive shortness of breath; and short-term changes in vision.

Consider exercising in a medically supervised program, at least initially, if there is a history of peripheral vascular disease or kidney problems. Those with peripheral neuropathy should not run, jog, or walk long distances without the approval of their doctors. 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 a woman is prior to conception, the more activity she can safely withstand during pregnancy. It is important to realize that a pregnancy is not the time to strive for exercise milestones or to lose weight. It is a good idea to monitor heart rate, as it helps to monitor optimal exercise intensity without overexertion.

Strengthening and toning the torso, back, pelvis, thighs and stomach will help with the labor 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 highly important. While sitting, standing or lying down, contract and tighten the muscles of the pelvic floor (those used to stop the flow of urine flow). Try to visualize 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 as it bulges can help to identify the difference. Do four to six sets of twenty-five, spread over the course of the day. This is commonly known as the "Kegel" exercise, after Dr. Arnold Kegel, who identified the importance of this exercise.

**Tailor Sitting**

Sit on the floor with the 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, gradually extending the length of stretch time. Repeat three to four times. Sit in this way whenever possible, or at least three times daily.

**Pelvic Rock**

Kneeling on all fours (or leaning on a chair 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 also 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 positions (on couch, in recliner, bucket seats in vehicles) and assume upright, forward leaning or side lying positions to help baby turn.

**Squatting**

Stand with feet and heels flat on floor, about 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 the knees, keeping feet flat on floor. Slowly increase the 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

*This material may be copied and distributed with retained copyright. © International Cesarean Awareness Network, Inc. All rights reserved.*
a baby who is in a posterior position which is known to prolong pregnancy (non-progressing prodromal labor as baby attempts to turn prior to active labor), prolong labor and increase labor pain. However, most posterior babies do not engage (move into the pelvis) prior to labor. If baby is believed to be posterior, focus on pelvic rocking (above).

**Beach Ball Hold**

Sit on floor with knees bent and 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 the upper torso leans back at an 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 the lower back. Repeat ten times and gradually increase reps 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 as the hips are tucked under and the chin is raised. 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 after.
- Skip exercising any time you have a fever.
- Exercise to the point of mild fatigue but never to the point of exhaustion.
- Mothers should avoid exercising in hot, humid climates and not get overheated (more than 100.4 degrees F core body temperature).
Alert Caregiver when these symptoms are observed:

• 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.