

Pelvic Girdle Pain and Low Back Pain During Pregnancy

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Pelvic girdle pain is the term used to describe pain in the front (symphysis pubis joint) or back (sacroiliac joint) of your pelvis. It affects up to 70% of women during their pregnancy. Seeking advice from your midwife and physiotherapist can help to manage your pain.

Symptoms may include:

- Pain in your pelvic joints or pubic bone
- Low back pain
- Waddling when walking or difficulty climbing stairs
- Pain when standing on one leg whilst getting dressed
- Pain getting in and out of the car/bed/bath
- Struggling to turn over or get comfortable in bed
- Struggling to complete normal daily activities
- Difficulty walking long distances or over uneven surfaces

How can I help myself?

Activity: Stay active within pain limits

Help: Accept and ask for help from family and friends

Rest: This is important – take regular breaks and try sitting down from activities that normally involve **standing**; like ironing, washing dishes and cooking

Dressing: Avoid standing on one leg – sit down for dressing, drying yourself and doing your hair

Sleeping: Try to use pillows for support. A pillow placed between the knees in side lying is often the most comfortable position.

Turning in bed: Try to keep your knees together and squeeze your buttocks together whilst turning

Stairs: Take your time and try going up one step at a time. Try stepping up with your less painful leg and down with your most painful leg. If possible plan your day in advance and bring items downstairs in the morning to avoid repetitive use of the stairs

Footwear: Avoid high heels and flip flops. Try to wear flat and supportive shoes

Plan: Planning your day and grouping appointments together can help you to avoid excessive travel and walking

Transfers: Keep your knees together when getting in / out of car / bed or bath. Sitting on a carrier bag when in the car can help you to swivel when getting in/ out of the car

Things to avoid during this time: Cross legged sitting, sitting on the floor, carrying heavy objects, carrying a child on one hip, standing on one leg, reaching/pulling/ pushing/ bending repeatedly to one side

A physiotherapist can assess the situation with you. Treatment options during pregnancy may be limited. However we can offer:

- Advice, support and exercises
- For some people a support belt can be useful

It may also be useful to discuss this with your midwife who can advise you about different labour positions to help with the pain.

Try the following exercises as often as you can during the day. They can be useful in helping with the pain:



Lying on your back with your knees bent and feet on the bed.

Gently roll your knees from side to side whilst keeping your upper body still.

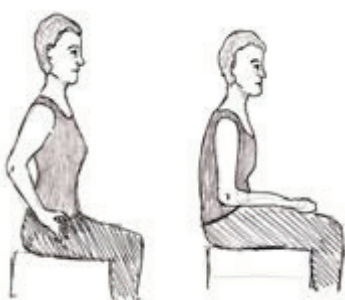
Repeat 10 times.



Lying on your back with knees bent, arms by your side.

Tighten your stomach muscles and push the small of your back against the floor, letting your bottom rise a little. Don't hold your breath!

Hold count 3, relax. Repeat 10 times.



Sit on a firm surface. Sit upright with your shoulders relaxed. If you are sitting on a chair sit clear of the back. Sit up straight tilting your pelvis forward, keeping your chest up and forward. Then drop your chest down while letting your pelvis tip down and back as if you are slumping.

Hold count 3 Repeat 10 times

The number of repetitions is just a guide. You can do more if it feels ok.

After your baby is born

Continue to follow the previous advice and exercises. Your symptoms may be present for a few weeks or months following giving birth. Most people get back to normal within this time. However you are welcome to contact Sunderland Community Physiotherapy Team following the birth of your child if your symptoms do not resolve and / or you are struggling to get back to your normal level of function.