

# COLLINGWOOD POSTPARTUM PELVIC FLOOR PROGRAM



## A Postpartum Pelvic Floor Program for You!

- Who?** Anyone who has delivered in our community, up to 12 months postpartum; brought to you by physiotherapists and midwives.
- What?** Postpartum education, prevention and treatment for pelvic pain, symptoms of prolapse, urinary incontinence, and more!
- When?** At three weeks postpartum, a midwife will call you to see if you are having any pelvic floor concerns. If you require an assessment and do not have private benefits for physiotherapy, you will receive a referral to our program for in-person assessment and treatment.

## Expectations and the First Three Weeks

After delivery, your belly will feel soft and squishy. You may also feel pain or heaviness if you exercise too soon, walk excessively, or stand for too long. Give your muscles at least six weeks for symptom improvement, but full recovery often takes longer than six weeks - that's ok!

### Vaginal Deliveries:

- Your pelvic floor muscles had to lengthen and stretch to allow baby to come out. Feelings of heaviness and inability to feel when you need to pee, or be able to fully control your pee, gas, or sometimes bowels, can be normal in the first few weeks. If these persist past three weeks you will likely need pelvic physiotherapy.

### C-Section Deliveries

- Your c-section scar and layers of tissue will be healing. Your mobility may be reduced for the first two weeks, but you may not have as many vaginal symptoms. Pelvic physiotherapy can help you with your mobility after delivery, and any new or ongoing symptoms after six weeks.

## Managing Bowels



Use a stool to elevate your feet while having a BM. It will make it easier!

### GOAL Soft, regular bowel movements (BM) that you do not have to strain for.

It is normal to go 1-2 days before having a BM after delivery.

Remember strategies for regular BMs:

- Hydration: 2+ litres of water per day
- Fibre-filled foods

Stool softeners and gentle laxatives are helpful when needed.

- Breastfeeding safe options: Colace, Metamucil, Restoralax, Senokot, Milk of Magnesia



## Managing Pressure

### GOAL Blow your breath out on exertion (when lifting, changing position, having a bowel movement). Do your best to not hold your breath.

If your breath is held on exertion, it will put unneeded pressure on your abdominal and pelvic floor muscles. Excessive pressure can lead to more symptoms of prolapse/heaviness, pain, and issues with controlling your bladder and bowels.



## Pelvic Floor Exercises: To kegel or not to kegel?

### Answer: It depends!

The best way to be able to answer this question is to have an individualized pelvic floor assessment.

If you had a vaginal delivery and now are experiencing feelings of heaviness, or are leaking urine, you will likely benefit from pelvic floor muscle strengthening (kegels).

Did you have a c-section? You may not need to perform kegels right after delivery. See our c-section handout for more.

**Caution!** Avoid activities that are making symptoms worse - this is likely too much, too soon. Symptoms could include: heaviness, pain, pinching (in vagina/rectum), leaking, or any activity that is making your abdomen "cone".

## Helpful Links for General Exercises, Strategies & More!

Need some visuals? Scan the QR code to check out our online platform for helpful videos and photos of exercises and strategies you can do at home.

