

Pregnancy related pelvic girdle pain (PGP)

Information for patients experiencing PGP (formally known as SPD)

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What is PGP?

Pregnancy related pelvic girdle pain (PGP) is common and a degree of discomfort in the front or back of the pelvis is experienced during 1 in 5 pregnancies. If your symptoms interfere with normal daily activities then you possibly have PGP. Your midwife, GP or physiotherapist may be able to help. If managed well, your pain may not necessarily get worse throughout your pregnancy.

Sufferers of PGP may experience pain in the following areas; symphysis pubis joint (pubic bones) at the front of the pelvis, and or the sacroiliac joints at the back of the pelvis.



People also can feel pain in their groin, lower tummy, hips and lower back. Pain may be experienced in one or all of these areas.

Other symptoms that are sometimes experienced include:

- Problems with walking
- Difficulty standing on one leg e.g. getting dressed or going up the stairs

- Separating your legs e.g. getting in or out of a car
- Difficulty turning in bed
- Discomfort staying in one position for too long
- Pain with normal daily tasks

Causes of PGP

Commonly there is more than one factor that contributes to developing PGP. These include:

- Increased movement at the pelvic girdle joints
- Pelvic floor, abdominal and hip muscles not working effectively
- Longstanding low back or pelvis problems
- Hormonal changes may cause pain in the pelvic joints

Some factors may increase the risk of PGP

- More than one pregnancy
- Increased weight and body mass index (BMI) before and/or by the end of pregnancy
- Previous history of low back pain or PGP
- Hypermobility
- Physical job and awkward working positions

Even without these risk factors you may still develop PGP.

How to ease your symptoms and manage your PGP

Where possible:

- Remain active within your pain limits
- Ask for help from friends and family i.e. picking up children from school
- Consider alternatives e.g. internet shopping
- Educate your family in how they can support you
- Sit down to dress and undress
- Incorporate rest periods into your day
- To get in and out of the car, sit down with knees together, (place a plastic bag on the seat to help you swivel round)
- Sleeping on your side with a pillow between your knees may help

- Bring everything you need for the day downstairs to avoid unnecessary stair climbing
- Take shorter strides when you are walking
- Stairs: Lead with the least painful leg on your way up and the more painful leg on your way down. Do one step at a time. You may find it easier to go up and down on your bottom.
- Sit to do tasks where you would normally stand e.g. ironing
- Wear flat and supportive shoes
- Rest when you can
- Consider alternative positions for sexual intercourse: lying on your side or kneeling on all fours
- Carry shopping equally in both hands
- Avoid things you know will hurt

Where possible avoid:

- Standing on one leg
- Prolonged standing
- Vacuuming
- Pushing heavy objects i.e. supermarket trolleys
- Lifting heavy weights e.g. boxes, full kettles and saucepans
- Carrying toddlers always on the same side
- Crossing your legs
- Squatting
- Sitting on the floor or low sofas/chairs
- Breaststroke
- Yoga
- High impact exercise

Further ideas for management of day-to-day activities are available on the Pelvic Partners website:

www.pelvicpartnership.org.uk

Labour and birth

Planning for the birth of your baby can help alleviate concerns. Discuss this with your midwife; they will have suggestions on alternate birthing positions that will protect your pelvic joints. Think about positions that are comfortable to you and record them in your birthing plan. Consider and discuss a water birth with your midwife as this allows you to move freely and change your position more easily.

During labour

Gravity can help the baby move downwards. Consider standing or kneeling, supported against a wall or over pillows. Avoid lying on your back with your knees apart or sitting propped up on the bed as this can reduce the pelvic opening.

Avoid squatting or placing your feet on your midwife or partner as it could be hard to maintain your 'comfortable knees apart distance' (see below). It will also increase strain on your pelvic joints and could injure your helper's back. Ask if you can lie on your left side or kneel for internal examinations, although this is not always possible.

Pain-free range of movement.

It is a good idea to monitor how far you can comfortably spread your knees apart. You could measure and cut a piece of string to represent the distance between both knees. Keep the string in your Antenatal Record, so that it is available for the midwife when you go into labour. You should take care that your legs are not moved further apart than this, especially during birth, particularly if you have an epidural or spinal block.

You will however be taught how to gently stretch your inner leg muscles, and stop them overworking so that you are able to open your legs a little wider. One of the causes of pain is that these muscles become overactive and pull on the symphysis pubis during pregnancy.



Assisted deliveries

If you need to be put into the lithotomy position (in stirrups), then make sure both legs are lifted at the same time.

Emotional effects of PGP

There can be limiting beliefs about what we are capable of, and we can be very affected by what professionals say will happen to us. The reasons that you will be experiencing the symptoms of PGP are that your body is changing to allow room for your baby to grow and your hormones are working to enable your pelvis to become ready to have your baby. It is just that sometimes the process begins a little sooner in some people. It is however a normal process and just means that you have to be more careful about managing the symptoms.

Understanding the processes that are going on in your body make it easier to deal with emotionally and once you have been taught to manage your symptoms effectively you will become aware of the things that affect you most, enabling you to manage the symptoms more successfully. It is important to take time for yourself and find ways to bond with your baby to make the pregnancy more enjoyable for you. Birth can be a really good experience. If you are interested in the experiences of others who have had a very positive experience ask your physiotherapist about this.

Taking care of you is important now. So do ask others to help, make sure you follow the advice in this booklet, eat sensibly, pace yourself, and focus on an easy birth and a great outcome.

Looking after your pelvic floor muscles is essential, not only following your baby's birth but throughout your life. In the early days exercising these muscles will help to reduce discomfort and swelling in the vagina. Longer term keeping these muscles strong will aid control of your bladder and bowels. Good pelvic floor muscle strength can also help prevent a prolapse and contribute to a healthy sex life.

After you have had your baby

It's important that you receive effective pain relief when required and adequate supplies for when at home.

Looking after your baby:

- Change nappies on a surface at waist height
- Carry your baby in front of you rather than on one hip
- Kneel at the side of the bath rather than leaning over
- If you have to carry the baby in a car seat, hold it in front of you, rather than out to the side, or ideally use a buggy.
- Where possible sit in a firm but comfortable chair to feed your baby.
- Make sure your back is well supported; placing a small, rolled towel behind your lower back helps

Reference

Pregnancy-Related Pelvic Girdle Pain and Other Common Conditions in Pregnancy. Pelvic, Obstetric and Gynaecological Physiotherapy (POGP): 2018.

Exercises

The following exercises should be performed antenatally and postnatally.

Pelvic floor exercises

Because these muscles span the base of your pelvis, strengthening them will also help to minimise back and pelvic problems. You may find them easiest to do lying on your side or in a comfortable sitting position.

The Basic Pelvic Floor Action

To contract your pelvic floor muscles, you need to:

- Imagine that you are trying to stop yourself passing wind, and at the same time imagine you are trying to stop passing urine.
- You should feel a squeeze and lift inside your vagina. It is important to keep the rest of your body relaxed and do not hold your breath.

Long Squeeze

- Tighten your pelvic floor muscles as above and see how long you can hold them for until you get tired.
- Then relax for the same length of time as you were squeezing for.
- See how many times you can repeat the exercise.
- Start with as many as you can manage comfortably, but as they get easier, aim to build up to doing 10 long squeezes, holding each one for up to 10 seconds, with a 10 second rest inbetween.
- Aim to do 3 sets of long squeezes a day.

Short Squeeze

- Tighten your pelvic floor muscles as above and then immediately let them go.
- Again, start with as many as you feel comfortable doing but aim to build up to 10 short squeezes.

• Aim to do 3 sets of short squeezes a day.

The Knack

Contract your pelvic floor muscles before any activity that could put additional strain on your pelvic floor, such as coughing, turning in bed and standing from a sitting position.

The Squeezy App

The NHS-recommended Squeezy App is a useful tool to help build your routine with these exercises.

Lower abdominal exercises

- Breathe in and as you breathe out, pull in your lower tummy as if you're trying to pull your belly button back towards your spine. This should be a gentle and comfortable muscle contraction.
- Repeat 5-10 times, 3 times per day.
- This exercise can be completed most easily while lying on your side.

This muscle is an important muscle that helps to support your back and pelvic floor. It is especially important when you are pregnant to make the muscle work gently when you are walking or standing to support your bump and to prevent postural aches and pains.

Pelvic tilting exercises

This exercise may help to reduce pubic symphysis pain as well as strengthening your abdominal muscles.

- Lie on your back with your knees bent or stand with your back against a wall with your knees bent slightly.
- Gently pull in your lower tummy muscles and pelvic floor, squeeze your buttocks and press the small of your back into the bed or wall. Hold for 10 seconds.
- Repeat 5-10 times, 3 times a day.
- This exercise should be done within your pain limits

Further information and advice can be obtained from:

Women's Health Physiotherapist Tunbridge Wells Hospital at Pembury Tel: 01892 632902.

Women's Health Physiotherapist Maidstone Hospital Tel: 01622 224300

Leaflets and advice can also be obtained at: https://pogp.csp.org.uk/information-patients

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