

Pregnancy-Related Back & Pelvic Pain

Overview

More than 50% of all pregnant women will experience back and/or pelvic pain during their pregnancy. This pain usually begins in the third month of pregnancy and peaks in the third trimester before declining in severity. Most women report a return to pre-pregnancy levels of low back pain within six months of delivery, but some go on to experience chronic low back or pelvic pain. The 12-month postpartum rate of back or pelvic pain is 37%, and the six-year rate is 18%. Research has found that an individualized exercise program that includes stabilizing exercises and aerobic exercise is part of an effective treatment strategy for pregnant patients with back or pelvic pain (see exercise details below). If you have severe back or pelvic pain, or if pain persists for more than 1 week or is accompanied by fever, burning during urination, or vaginal bleeding, you should contact us. Do not try to treat yourself.

Exercise Guidelines

Drink plenty of fluids to stay hydrated, and be careful to avoid overheating. Wear comfortable clothes and a good support bra. Choose exercise shoes that fit well. Get up slowly to prevent dizziness after doing floor exercises. Exercise in moderation. If you cannot talk normally while exercising, you're probably pushing yourself too hard.

Who Should Not Exercise During Pregnancy?

Talk with us before beginning an exercise program if you have any of the following medical problems: asthma, heart disease, or pregnancy-related conditions such as bleeding or spotting, low placenta, threatened or recurrent miscarriage, previous premature births or a history of early labor or weak cervix.

Caution

Stop doing any exercise if you experience pain or discomfort anywhere in your back. Good pain means some muscle soreness and/or fatigue. Bad pain means sharp and/or persistent pain. Also, stop exercising if you notice: dizziness, chest pain, rapid heartbeat, shortness of breath, feeling cold or clammy, abdominal pain, vaginal bleeding, an absence or decrease in fetal movement, calf pain or a sudden swelling in your ankles, hands or face. If any of these symptoms continue after you stop exercising, contact us.

Stretching (warm-up & cool down)

Always do 5 minutes of warm-up stretching before aerobic exercise or stabilizing exercise to get better results and help prevent muscle injuries. Likewise, do 5 minutes of cool-down stretching after your workout (use the same stretches you did to warm up). You may consider a prenatal yoga class.

Lower Back Stretch

Begin lying on your back, knees bent with feet flat on floor. Arms should be extended to your side. While maintaining shoulder to floor contact, gently roll your knees to one side. Hold for 20 seconds. Return to the starting position. Then repeat on the opposite side. Repeat 3 times.

Overhead Reach & Side Bend

Begin in a standing position. Interlock your fingers and reach toward the ceiling, extending both arms and pressing your palms upward, attempting to straighten arms completely. Once arms are fully extended, bend laterally to the side. Hold for 20 seconds. Repeat 3 times. Alternate sides.

Neck Flexion & Extension

Begin by sitting upright in a chair. Maintain good posture. Flex your chin to your chest. Hold 5 seconds. Extend head up and back. Hold for 5 seconds and relax. Repeat 3 times.

Neck Rotation

Begin by sitting upright in a chair. Maintain good posture. Rotate your head fully to one side. Hold for 5 seconds. Return to a straight position. Then rotate fully to the opposite side. Hold for 5 seconds and relax. Repeat 3 times.

Neck Lateral Bending

Begin by sitting upright in a chair. Maintain good posture. Lean your head completely to one side attempting to touch your ear to your shoulder. Do not raise your shoulder. Hold for 5 seconds. Return to a straight position. Lean your head completely to the opposite side. Hold for 5 seconds and relax. Repeat 3 times.

Aerobic Exercise

Regular exercise during pregnancy is important to your overall health and can help relieve common discomforts like backaches and fatigue. If you have exercised before your pregnancy, you can probably continue at the same level of activity. But check with us first. At least 30 minutes a day of moderate cardiovascular exercise is recommended, but even shorter or less frequent workouts can help you stay in shape and prepare for labor. If you haven't exercised for a while, it is important to start slowly and to gradually build up the duration of your exercise sessions.

Most exercises are safe to perform during pregnancy, as long as you are cautious and do not overdo it. Any of the following exercises will provide aerobic benefits: brisk walking, stationary cycling, low-impact aerobics, stair climbing, elliptical trainer and swimming. You may want to alternate the types of exercise you perform in order to avoid overuse injuries and boredom.

Stabilizing Exercises (Perform the following exercises 2 times a day.)

Pelvic tilt -- on your back (only until the 20th week of pregnancy)

Lie on your back with your knees bent. Inhale through your nose and tighten your stomach and buttock muscles. Flatten the small of your back against the floor and allow your pelvis to tilt upward. Hold for a count of five. Gradually increase your holding time to 60 seconds. Repeat five times, working gradually up to 20. *Special Instructions:* Do not arch your back, bulge your abdomen or push with your feet to obtain this motion.

Pelvic tilt -- on all fours (after the 20th week of pregnancy)

Get down on your hands and knees, arms shoulder-width apart and knees hip-width apart, keeping your arms straight but not locking the elbows. As you breathe in, tighten your abdominal muscles and tuck your buttocks under and round your back. Hold for a count of five and then release. Gradually increase your holding time to 60 seconds. Repeat five times, working gradually up to 20. *Special Instructions:* Do not hold your breath. Try to keep your neck in a neutral position. If your shoulders get tired, rest before continuing.

Bird Dog

Begin on your hands and knees with your head and back in a straight position. Hands should be under your shoulders, hips directly above knees. Raise one arm to shoulder level as opposite leg simultaneously lifts off floor, extending to hip height. Hold for a count of five. Gradually increase your holding time to 10 seconds. Return to start position and alternate sides. Maintain a straight spine position, not allowing your hips to twist or rotate. Do not hyper-extend low back when extending leg. Repeat five times, working gradually up to 20.

Additional Treatment Option: Spinal Manipulation

The current scientific literature suggests that chiropractic treatment is a safe, effective intervention for reducing back and/or pelvic pain intensity and frequency in pregnant women. If you are considering chiropractic care, we recommend an evidence-based chiropractor, **Ramzi Dalloul, DC, who can be reached at 303-412-0037; 8778 Wolff Ct. #100, Westminster.**