



EARLY POSTNATAL CARE

For healthcare
professionals
to give to parents



Congratulations, you are a new mother.

Early motherhood is a rollercoaster with lots of moments of joy, overwhelm, love, and self-doubt. It is a time of growth for both the baby and the mother and can be very demanding.

This booklet aims to support you in your early postnatal recovery.

Topics covered include:

- 4th Trimester
- C-section recovery
- Exercises for the muscles stretched and weakened by pregnancy and birth
- Return to exercise
- Transition to motherhood - Matrescence



4th Trimester

WHAT IS THE FOURTH TRIMESTER?

The fourth trimester refers to the 12 weeks directly after delivering your baby. This is viewed as another trimester of pregnancy because human babies are not considered fully developed when they are born. During the fourth trimester, you can expect fussiness and crying from your baby. Newborn babies are learning to adjust to life outside the womb.

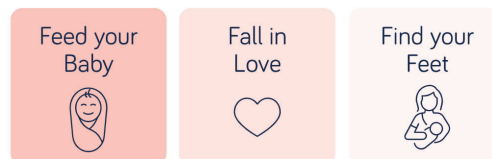
For mums too, the fourth trimester feels like another term of pregnancy. Many of the physical symptoms of pregnancy are still present; a weak pelvic floor, achy joints, and compromised abdominal muscles and hormones that were elevated during pregnancy are still lingering. So women have to navigate mental and physical challenges in those early weeks.

A time for profound rest and healing

The fourth trimester is a time when a mother needs to be cherished and supported as well as a time to heal; there are wounds you can and can't see, for example, your placenta leaves a dinner plate-sized wound inside your uterus after birth. Prioritise your rest and nutrition to give your body what it needs to heal and recover.

Your hormones need to recalibrate, and you need to process your experiences mentally and emotionally. Studies show that sufficient recovery time and a supportive network after birth can greatly reduce postpartum anxiety and depressive symptoms.

Giving yourself this time and allowing yourself to be cared for, also benefits the baby! After birth you are essentially your baby's regulation system; they are learning from you how to regulate their emotional state and nervous system, so by being calm and connected, your baby will feel this way too. All you need to do is...



and someone else does everything else.

C-section Recovery



Not all c-sections are the same and how the birth went will have implications for recovery. Typically planned c-sections can be quicker to recover from compared to emergencies. Some c-section deliveries may include forceps or a lot of manoeuvring to get the baby out, and this is likely to mean increased pain and discomfort with a prolonged recovery time. Recovery from a c-section takes time and patience.

Tips to help recovery post c-section

- **Regular pain relief for 5-7 days** – having less pain allows more movement which aids to reduce swelling, reduces the risk of clots and facilitates the bowels.
- **Fluids and fibre** – getting the bowels moving post-c-section requires a conscious effort. The effects of the anaesthesia and painkillers will impact this. You may require gentle laxatives like Movicol or Lactulose.
- **Gas pain/shoulder pain** – can occur immediately post a c-section. Gentle movement, chewing gum, and peppermint tablets/tea can help.
- **Movement** – aim to get up and move on day 1, early movement aids recovery and prevents post-op complications. Two to three shorter walks in a day feel better for recovery than one long walk.
- **Compression stockings** – usually prescribed in the early weeks.
- **Scar management** – keep the scar clean and dry, run shower water over the wound every day (no products) & pat it completely dry, lie back, and let air to the tummy. This is important for infection prevention.
- **Scar support** – hold pillow against scar when driving home and when laughing/coughing/sneezing/ feeding/toileting.

Tummy Muscle Supports

There is no data yet to show that tummy muscle supports have any major effect on recovery, however, many women feel better wearing one. If a woman would like to use abdominal support a less rigid one is best, such as Tubigrip Size L or K, or supportive leggings such as the recovery leggings from SRC Health (see useful sites section).

C-section scar pain

C-section scar pain can continue for up to six weeks, whilst for some, it may persist for longer. The surgeon's hand, sleep, genetics, nutrition, hydration, the birth story, and other factors will impact the healing and the sensitivity of your tissues.

It is important to keep the scar and surrounding tissue hydrated to optimise skin quality and minimise sensitivity. Creams such as silicon cream, vitamin A or D, or rosehip can help.

C-section Scar Massage

You can start c-section scar massage when the scar is dry, not scabby, and not bleeding or oozing. This usually happens around the six-week mark post-birth. However, this varies from person to person. Starting indirectly is another way to ease into scar massage. You could take a clean blusher brush and gently stroke around the sensitive area, then progress to gentle massage circles around the scar before progressing to massaging the scar itself. 5-10 minutes every night is recommended.

What is a keloid scar?

A keloid scar occurs when scar tissue extends beyond the original boundaries of the wound. Usually, it is a sign of overproduction of collagen in the healing process. This results in lumps of scar tissue forming around the incision and may restrict mobility.

Some options to improve the appearance of a c-section keloid scar include silicone scar strips or gel.

Exercises for the muscles stretched and weakened by pregnancy and birth

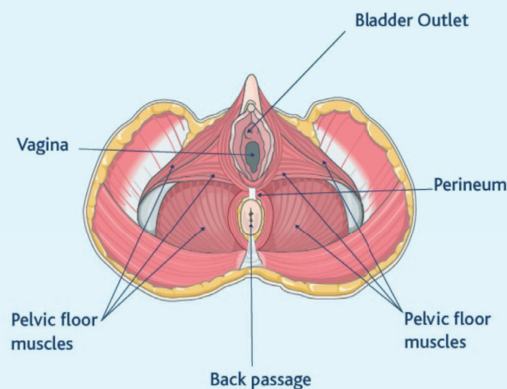


Pelvic Floor Muscles

Following pregnancy and birth, leakages can sometimes occur from the front and/or back passage. This may resolve after a short time. Exercises can help but if the problem persists beyond twelve weeks postnatally, contact your Chartered Physiotherapist in Women's Health, Public Health Nurse or GP.

What are the Pelvic Floor muscles?

The pelvic floor forms a broad sling of muscle, lying across the bottom of the pelvis, through which pass the openings from the bowel, vagina (birth passage) and the urethra (passage from the bladder). They are the main support for the pelvic organs and give control of the three passages.



It is important to make them strong again as weakness of the pelvic floor can cause symptoms such as leakage of urine when coughing, urgent or frequent need to pass urine, leakage of wind and/or stool from the back passage, or decreased satisfaction during intercourse.

Early pelvic floor care

Rest

Being on your feet is inevitable as a new mother but getting rest whenever you can, aids pelvic floor recovery. Lying down reduces the pressure on your pelvic floor and reduces swelling. This will speed up your recovery. Even 10 minutes a few times a day can help you feel so much better.

Get a footstool for your bathroom

Your bowels open much easier when your knees are positioned higher than your hips (like a squat). Having your feet resting on a footstool when on the toilet increases the rectal canal angle by putting you in a squat-like position. When you squat during a bowel movement or use your footstool, the sit bones (in your bottom) can separate and open the angle. This allows the sphincter to fully expand and waste to move through with the help of gravity. No more straining!

Increase fibre and fluid

If fluid and fibre are not enough to keep your bowels regular it may be a good idea to use a laxative in the early days after childbirth, to soften your bowel motion and prevent straining on your pelvic floor.



Manage swelling in the perineum

After a vaginal delivery, you will find it difficult to feel your pelvic floor muscles after childbirth due to swelling. Cooling ice packs for the perineum can help to manage the swelling. You could pop your maternity pad into the freezer for 20 minutes before use and you will have your own homemade cold pad. Perineal spritz and sprays are full of natural essential oils which can help to ease perineal discomfort, soothe pain, have antibacterial properties, and help promote healing. Once you are able, wearing a compression garment (SRC recovery shorts) can provide your pelvic floor and abdominal muscles with support.

Start gentle pelvic floor exercises

Initially, pelvic floor exercises aim to help with healing and increase blood flow to the area. Strengthening will come later as your body heals. At this phase squeeze gently within your pain limit. There is no need to push into pain. Research has shown that the best cue is to “squeeze your anus”. Try thinking about this when doing your pelvic floor exercises. It is normal to feel like nothing is happening in the beginning as your pelvic floor may still be swollen so don't expect to be able to hold for 10 seconds straight away.

- Start by holding your squeeze for 1-2 seconds and build up to 10 seconds as your body is able.
- 10 contractions, x 3 times a day is the recommendation for pelvic floor exercises.
- Gentle rhythmical squeezes, in the first 48 hours after childbirth will help ease pain and reduce swelling. These should be done frequently, for 30 seconds at a time. You will often hear that you can do your pelvic floor exercises anywhere, however, after childbirth, you might find that you need to lie down as reconnecting with your pelvic floor can take time and concentration.
- As you get stronger add some quick strong squeezes to the 10-second hold, remembering to relax completely after each exercise.
- Quickly lift and squeeze your pelvic floor muscles before laughing, coughing, sneezing or lifting; this will protect the pelvic floor and prevent undue pressure on the muscles. This technique is known as “the knack”. Get into the habit of using “the knack” in all situations where extra pressure is coming on the pelvic floor, including each time you stand up, or lift your baby. Doing the pelvic floor exercise is like operating an elevator. Initially, you will only be able to take the elevator up to the first few floors, but as you get stronger, you will be able to go right up to the top (tenth) floor. Aim as part of your exercise routine to do some exercises, holding the muscle at the third floor, but aiming to hold for 20 seconds; this will improve your endurance; at other times, take the elevator to the top floor, but hold for 10 seconds. This will improve muscle strength.

Remember, pelvic floor exercises are for life. Get into the habit of doing these exercises several times a day. They can be done at any time and in any position. If done correctly, no one should know you are doing them, so they can be done while standing in queues, talking on the phone, at meetings, etc! It is a good idea to make them part of your daily routine i.e. doing them each time you brush your teeth.

How to know if you are doing your exercises correctly:

1. Try to gently slow or stop the flow of urine towards the end of your stream, then relax and finish emptying your bladder. This is a test and not an exercise.
2. Gently insert two fingers into your vagina, and try to feel the muscles contract from the back, sides and front.
3. When you resume intercourse, try squeezing around your partner's penis. Your partner will be delighted to give you feedback as to how your strength is improving!
4. If in doubt, ask your GP to refer you to a Chartered Physiotherapist in Women's Health.



Return to Exercise

Mindful, gentle and gradual increase in movement

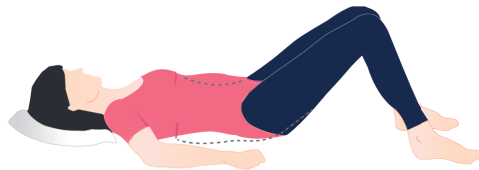
Every woman's postnatal experience is different and will also vary from baby to baby for the same woman. First and foremost, we recommend giving yourself grace as you navigate the early days of recovery, prioritise rest, and listen to your body. Allow yourself time to gradually return to exercise, avoiding setting unrealistic expectations for your recovering body. All return to exercise should be on a gradual pain-free basis. For both vaginal and c-section births, we recommend beginning to reconnect with your core and pelvic floor through breathwork and gentle exercise early postnatally. This is setting your foundation for a return to exercise and can be started as early as day one - or whenever you feel ready.

Examples of early postnatal exercises

Deep tummy exercise

Lie on your back with your knees bent:

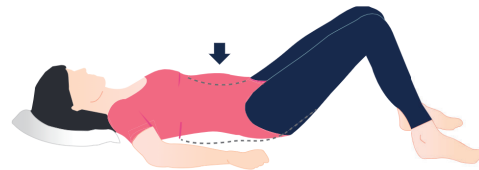
- Breathe in; as you breathe out, gently draw your lower abdomen in towards your spine.
- Hold for a few seconds, breathing normally, then relax. Be careful not to move your back or pelvis.
- Start holding for 5 seconds and progress to holding for 10 seconds as you get stronger.
- Repeat 10 times.
- Try drawing in your pelvic floor at the same time if possible.
- Once you have mastered it in lying, this exercise can also be done while sitting and standing.



Pelvic tilt

Lie on your back with your knees bent:

- Breathe in; as you breathe out, draw in your belly button and gently flatten your lower back into the bed.
- Hold for a few seconds, breathing normally then relax.
- Start holding for 5 seconds and progress to 10 seconds as you get stronger.
- Repeat 10 times.
- Try drawing in your pelvic floor at the same time if possible. Once you have mastered it in lying, this exercise can also be done while sitting and standing.



Bridge

Lie on your back with your knees bent:

- Breathe in; as you breathe out, gently draw your lower abdomen in towards your spine.
- Slowly curl your tailbone, lower back and mid back up off the ground.
- Hold at the top for a breath in and then slowly curl back down your mid back, lower back, pelvis and tailbone.
- Repeat 10 times.



Shoulder and upper spine stretch

Sitting on chair:

- Clasp hands and bring arms up overhead.
- Side bend to the right side, keeping ribs down and in.
- Hold for 2-5 seconds and then repeat on the other side.
- Repeat 5 times on each side.

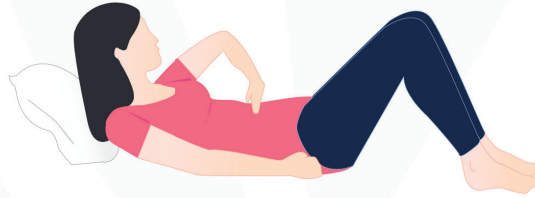


After a couple of weeks of reconnecting with your core and pelvic floor and giving your body time to heal, you may feel comfortable progressing into some more intense exercise, however, it is recommended not to return to high-impact exercise until a minimum of 12 weeks after birth. This includes running, jumping activities or regular gym classes.

A period of low-impact exercise is recommended for the first 12 weeks. This does not mean that you can't do any exercises. Preparing your body with specific strengthening and stretching exercises will set your body up for returning to higher-level exercise later.

If you have had a C-section or limited mobility during pregnancy gentle exercises such as the static bike or cross trainer can start from 6 weeks postnatal, with the advice to stop/slow down if any of the symptoms below occur. However, every woman is different. Many postnatal-specific yoga and pilates classes can be started at 6-8 weeks post c-section, once you are comfortable getting up and down off the floor, but traditional classes in the gym are best avoided until 12 weeks as they may put too much stress on the scar and recovering abdominal muscles.

During pregnancy, your tummy muscles stretch and lengthen to accommodate your growing baby. The connective tissue between your left and right sit-up muscles becomes thinner and wider, creating a separation or gap in the middle which may take some weeks to close. Slight separation towards the end of pregnancy should be considered a normal and necessary adaptation for the growing baby. This separation generally resolves naturally in the weeks after childbirth. For reasons unknown, it may not naturally resolve in approximately 1/3 of women. Before progressing with the exercises, it is good to check your tummy muscles for a gap or separation.



- Lie on the floor with your knees bent and gently place the fingertips of one hand down and into your abdomen just 2 finger widths above your tummy button.
- Take your pelvic floor muscles to the third floor as described earlier, then lift your head and shoulders towards your toes, breathing normally as you do this.
- You may feel a slight gap that closes across your fingers as your head lifts. If you feel a gap remaining at 6 weeks postnatal, consult your GP who will refer you to a Chartered Physiotherapist who can show you how to rehabilitate effectively.

Signs to Slow Down or Stop Exercising:

- Signs of pelvic floor dysfunction- changes to bladder or bowel function (such as leaking, urgency or pain), vaginal pressure or heaviness
- Bleeding
- Pain anywhere, especially over the scar
- Any exercise that makes you hold your breath
- Doming/tenting of the abdominal wall

If you need advice about increasing activity or to determine if you are ready to resume sporting activities, please ask your GP, or contact your Chartered Physiotherapist in Women's Health.

Transition to Motherhood - Matrescence



We now know that mother's brains change during pregnancy and well into motherhood. These changes are like a software upgrade, new qualities and skills develop preparing us for the responsibility of caring for a human being.

These brain changes allow deeper emotional capacity which brings a new level of empathy, awareness, intuition and compassion. This develops unconditional love and interdependence; bringing meaning and purpose to life.

This process of change is known as Matrescence. Just like adolescence in our teenage years, it is a transition that can take years to work through. It can at times feel overwhelming, but it also has the potential to be empowering and transformative.

The process of Matrescence, mother becoming, can be like a rollercoaster. What you can do to help prepare for an uplifting and positive journey is:

- All of the above; profound rest, gentle return to exercise.
- Appreciate and celebrate your body as it is now, for what it just did and the wonder of it.
- Feel it, think it, don't push it away- embrace all your emotions at this time for what they are. Sit with them without judgement.
- If you don't feel like yourself- reach out. Ensure that you feel heard and listened to.
- Carve out time for yourself every day, finding stillness and calm within you (breathing, mindfulness, grounding techniques, self-massage). Even 5 minutes a few times a day can make a huge difference.
- Nurture the relationships in your life that offer sustenance and strength.
- Acknowledge yourself on the journey - it's normal for your transition to: take much longer than you thought and feel like you've lost yourself and your whole life has changed.
- Trust your intuition for your needs and your baby's needs.
- Keep visitors to a minimum and if they do come, rest and let them look after you.
- Do the bare minimum. Ask yourself, what's the least I can do today?
- Look for the many ways you can create support (food training, doula, lactation support, online mothers groups). Weave your safety net; gather your family, friends, and professionals so they can catch you on those wobbly days!
- Have a directory of tools, supports and resources that you can access when needed.



Useful Sites

www.cso.ie/en/statistics/birthsdeathsandmarriages/

Central Statistics Office. This site lists the most popular babies' names registered with the CSO.

www.citizensinformation.ie/en/birth-family-relationships/

Information on public services available on a range of childcare issues from adoption, fostering, before and after baby is born, benefits and entitlements relating to birth.

www.rollercoaster.ie

For the ups and downs of pregnancy and parenting.

www.welfare.ie

The website of the Department of Social and Family Affairs. Check out maternity and child benefit entitlements.

www.hse.ie/pregnancy-birth

HSE website with information about pregnancy and birth.

www.nurturehealth.ie

Provides professional counselling support services to women & partners.

www.doula.ie

A community of professional Birth and Postpartum doulas which promotes, develops and supports the doula profession in Ireland.

www.doulacare.ie

Offering birth and postpartum doula support to families around Ireland.

www.thebumproom.ie

Physiotherapists with years of experience supporting, motivating and reassuring women in pregnancy, postnatal and motherhood.

www.activepregnancyfoundation.org Supporting women to stay active throughout pregnancy and beyond.

www.srchealth.com

Compression garments for pelvic support.

www.stressnomore.co.uk

Website with information on pelvic floor health.

www.easiturn.com

Sleeping aid for pregnant mothers.

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- www.themummyphysios.com** Expert Womens Health Physiotherapists with specialised online programmes supporting women from pregnancy right through to a strong postnatal journey. Online support and guidance offered.
- www.thepogp.co.uk/resources/** Valuable resources with specific educational booklets on various different Womens Health issues.
- www.podcasts.apple.com/gb/podcast/celebrate-muliebrity-with-michelle-lyons/id1689238440**
Celebrate Muliebrity with Michelle Lyons Podcast.
Reputable podcast with evidence based and reliable information.
- www.absolute.physio/wp-content/uploads/2019/09/returning-to-running-postnatal-guidelines.pdf**
Return to running guidelines- an amazing resource to test your readiness to run.
- www.gov.uk/maternity-allowance#:~:text=You%20can%20get%20Maternity%20Allowance,after%20the%20baby%20is%20born.** Maternity allowance info in UK.
- www.pandasfoundation.org.uk** Dedicated to support those affected with perinatal mental illness.
- www.yesyesyes.org** Natural products for Vulva care.

For queries please call our freephone:



01225 751 098

Exercises and information are provided by The Bump Room, a team of physiotherapists who offer online and in-person pregnancy and postnatal classes.

For further information, the Bump Room website offers a range of free resources including classes to help manage pelvic girdle pain.

Also Available
Planning for Pregnancy Care



Attachments

Attachment