

Antepartum and Postpartum Physical Therapy

The natural changes of both pregnancy and delivery (either vaginal or C-section) affects the body is common but not normal. The pelvic floor muscles, connective tissue, joint alignment and mobility as well as postural changes can occur leaving the women with discomfort and pain during pregnancy (antepartum) and/or after delivery (postpartum).

A pelvic health physical therapist at Complete Physical Therapy can easily treat both pregnancy (antepartum)or postpartum-related symptoms with manual therapy, neuromuscular re-education and individualized home exercise programs.

Common Antepartum Complaints:

- Swelling. Carpal tunnel, lower extremity pain/discomfort
- Ligamentous instability. Ankle, feet , pelvic and back pain
- Low back pain. Facet or disc etiology
- Neck pain and headaches. due to changes in posture
- Tightness and pain in the legs due to the flattening of the feet
- Arm pain or tingling. Nerve compression associated with an increased chest diameter
- Sciatic, hip, sacral, pubic symphysis a.k.a pelvic girdle pain and tailbone pain
- Urine leakage. Strained pelvic muscles and increase in intraabdominal pressure
- Preparation of pelvic floor muscles for childbirth.

The pelvic floor muscles and core stabilizing muscles are intimately involved in the childbirth process. These muscles function at their maximum potential when they are lengthened, strengthened, and free of myofascial trigger points. Impaired muscles are not always symptomatic. A physical therapist can individually examine each muscle internally and externally. If impairments are found the physical therapist can treat the problems with manual therapy and exercise resulting in improved function. In addition, treatment will increase the potential for successful vaginal deliveries with less pelvic floor muscle injury and postpartum pain and dysfunction.



Common Postpartum Complaints:

- Urinary difficulties. Stress incontinence, Urge incontinence and the inability to to start the flow of urine at will or empty their bladder.
- Anal incontinence. Difficulty controlling gas or bowel movements.
- Perineal pain. Women, especially those who tore during childbirth or are recovering from an
 episiotomy. (The perineum is the area of skin between the vagina and the anus.) In addition, tight
 pelvic floor muscles cause some to experience persistent perineal pain, even after their wound heals.
- Pelvic pain. Some women have pain during sex for many months or even years after childbirth. And some have chronic vulvar pain, burning or itching. Others have pain during bowel movements. These symptoms are often caused by tight pelvic floor muscles, which can lead to inflamed tissue and nerves.
- Pelvic organ prolapse. Childbirth can weaken the pelvic floor muscles the uterus, bladder, and/or bowel can slip out of place. Rehabilitating these muscles can help prevent or improve this condition.

Evaluation and Treatment

During a patient's first appointment at Complete Physical Therapy for antipartum or postpartum a medical history will be taken and followed by an external and/or internal musculoskeletal examination. The patient is in full control of the appointment and between the patient and therapist a plan of care will be created. If the patient wants to have another person in the room they are welcomed

Your evaluation may include:

- Musculoskeletal Examination: Assessment of structures, muscles, tissue, and a manual evaluation of the pelvic floor muscles. We can identify problematic muscles and scar tissue and develop a treatment plan based on our findings.
- Diastasis Recti Examination: Corrective exercises are provided and a specifc home exercise program.

Your treatments may include:

- Scar mobilization: Cesarean section, episiotomy, and other vaginal scars will be mobilized and desensitized.
- Manual techniques: Reduce tone and tension in the pelvic floor muscles and pelvic muscles using
 myofascial release, trigger point dry needling (TDN), strain counter strain and Instrument Assisted Soft
 Tissue Mobilization (IASTM),
- Pelvic Floor Muscle: Strengthening and relaxation/lengthening exercises.