

Although your new baby will probably bring you immense emotional satisfaction, physically you may feel uncomfortable and strange in your own skin. After 9 months of pregnancy and hormonal changes, your body naturally undergoes a transformation. Some women experience a temporary sinking sensation or looseness in the vaginal area that can be distressing. The uterus, bladder and rectum can all come down a bit during labour. This may produce a feeling that you are falling apart. Luckily, this sensation dissipates after a few weeks. To assist the process new moms are advised to eat healthily to avoid constipation, refrain from lifting heavy objects, and perform gentle post-natal exercises to tighten slack muscles and stretched skin.

The most important exercises postpartum focus on strengthening the abdominal and pelvic floor muscles. Having a strong, stable base from which to work and move alleviates pain later on, and assists with daily tasks such as carrying your baby and getting in and out of the car. These exercises also minimize or alleviate some of the discomfort associated with childbirth. Abdominal exercises cannot be done too soon, incorrectly or with too much vigour initially, especially if you have had a C-section. Luckily, pelvic floor (Kegel) exercises can be done immediately after childbirth. Before embarking on any exercise program, please check with your health care team.

What is the pelvic floor?

The pelvic floor muscles (PC muscles) support the bladder, uterus and rectum, so it is essential that their tone be restored after stretching during childbirth. The pelvic muscles are situated between the pubic bone and tailbone, creating a cradle for your bladder, bowel and uterus. If these muscles and the connective tissue are damaged, they can affect your ability to hold and release urine and faeces when you need to, and contract and relax your vagina during sex.

Pelvic rehabilitation

If the pelvic floor muscles are tight or weak, they can produce a number of inconvenient, uncomfortable and painful symptoms. Pelvic rehabilitation can help with a number of conditions related to the pelvic floor. These problems may develop in the first 6 months following childbirth or strike later in life:

- Urinary difficulties. Some women experience urinary incontinence and leak urine when coughing, sneezing or running. Others feel a sudden, frequent urge to pee, even when their bladders are not full. Women may struggle to start the flow of urine at will, or empty their bladders completely.
- Anal incontinence is marked by difficulties controlling gas or bowel movements.
- Perineal pain is most common in women who tore during childbirth or are recovering from an episiotomy. The perineum is the area between the vagina and the anus. Some women experience persistent pain, even after their wounds have healed.
- Pelvic pain. The tightening of the pelvic floor muscles can result in inflamed tissue and nerve endings. This can produce a number of painful symptoms, such as painful intercourse for many months or years after childbirth or painful bowel movements. Some women have chronic pain, burning or itching in their vulva – the tissue surrounding the opening to the vagina. Inflammation in this area can make it uncomfortable to wear tight clothing or underwear.
- Pelvic organ prolapse occurs when pregnancy and childbirth weaken the pelvic muscles to such an extent that one or more of the organs they support (uterus, bowel or bladder), slips out of place.

Note: Kegel exercises are less helpful for women with severe urine leakage. These exercises are also not helpful for bladder overflow (unexpected leakage of small amounts of urine due to a full bladder).

Strengthening pelvic floor muscles

Physical therapists recommend that women start doing gentle kegel (pelvic floor) exercises immediately postpartum, whether they have had a vaginal birth or caesarian section. Kegel exercises are easily incorporated into your daily routine, such as during nursing or feeding times. There are several types of pelvic exercises – those focusing on endurance (whereby women contract and lift their pelvic floor muscles, holding them for 5-10 seconds) and others involving quick, brisk muscle contractions (known as “flicks”).

How to do kegel exercises

It takes time and patience when learning how to isolate, contract and relax your pelvic floor muscles:

- To identify these muscles, stop urinating midstream. This isolates the correct muscles. If you feel the muscles in your bladder, vagina and anus tighten and move up, you have done the right exercise.
- Repeat this action several times until you become familiar with the sensation of contracting and relaxing the correct muscle group.
- Caution: Once you have mastered the technique, don't make a habit of stopping and starting your urine flow midstream. This can have the opposite effect and weaken your muscles. Incomplete emptying of the bladder also increases your susceptibility to urinary tract infections.

- Once you are familiar with your PC muscles, empty your bladder completely. Lie on your back to perfect the technique. Begin by tightening your pelvic floor muscles, hold the contraction for 5 seconds, and relax for 5 seconds. Repeat the exercise 4-5 times. As you improve, aim to increase your contraction and relaxation times to 10-seconds each.
- Breathe deeply and relax your body while performing these exercises. Ensure that you are NOT tightening your stomach, thigh, buttock or chest muscles.
- You can do these exercises anytime and any place. Most people prefer to do the exercises while sitting or lying.
- Repeat these exercises 2-3 times per day.
- Once these exercises become easy, you can increase the resistance by performing them with your knees apart.
- The second kegel exercise is called the "flutter". It involves contracting and relaxing your PC muscles as quickly as possible. Repeat this action 10 times. You will notice improvements in speed with consistent practice.
- The third exercise is subtler. Imagine you are sucking a tampon into your vagina. The long-term goal is to hold and relax this contraction 10 times.
- Improvements are generally seen after 4-6 weeks, with major changes occurring after 3 months.
- If you feel any pain or discomfort while performing these exercises, you are probably doing them wrong.
- If you are finding it difficult to isolate and exercise the correct muscles, biofeedback training may be helpful. During these sessions, your doctor inserts a small probe into your vagina or rectum. As you relax and contract your pelvic floor muscles, a monitor will measure and display your pelvic floor activity.
- You can also enlist the assistance of a physical therapist.

The success of Kegel exercises is reliant on correct technique and adherence to a regular resistance exercise program. It may be helpful initially to work with a nurse or doctor to identify the pelvic floor muscles. Many women report that performing the exercises 5 minutes before they get up in the morning and five minutes before bed is a helpful routine. The principle behind Kegel exercises is to strengthen the pelvic floor, therefore improving urethra and/or rectal sphincter functioning. Kegels are beneficial at any stage of life, as childbirth, age and gravity all have an impact on PC muscles. Following childbirth, kegels maintain the blood flow to your genital and perineal areas, therefore encouraging your body to heal from tearing, swelling, or bruising. As with the acquisition of any skill, kegels take practice. Once you can isolate your PC muscles, you can perform these isometric exercises anywhere and reap the benefits throughout life.

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