Supporting Postpartum Pelvic Floor Healing

LA Best Babies Network - Parent Coach Webinar May 20, 2024

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Workshop Objectives

- ✓ Understand the anatomy of the pelvic floor.
- ✓ Understand the relationship between breath, posture, and body mechanics on pelvic floor health.
- ✓ Understand common physiological changes that occur within the pelvic floor during delivery and after giving birth
- ✓ Identify specific strategies to support pelvic floor healing after giving birth



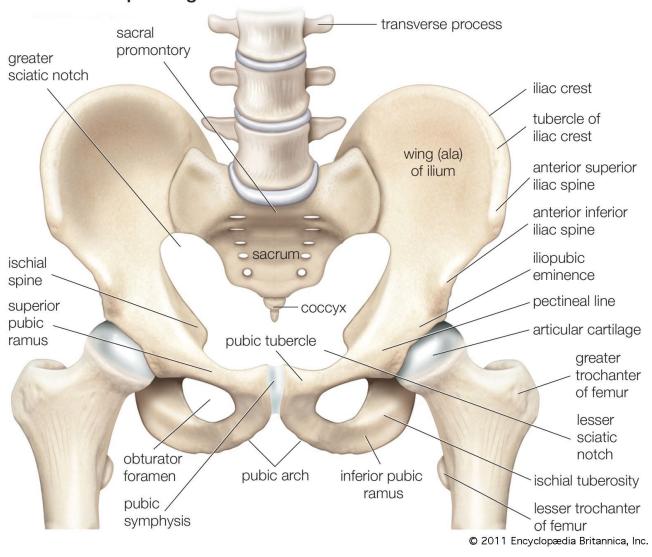
About me...

- Clinical Doctorate in Occupational Therapy (OTD), University of Southern California
- Faculty, University of the Pacific
- Pelvic Floor Therapist, Supported Mama
- Pregnancy and Postpartum Corrective Exercise Specialist (PCES)
- Perinatal Mental Health Certification (PMH-C)

Pelvic Floor 101

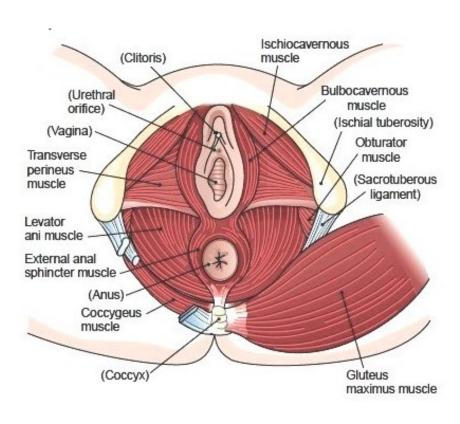
Bony Landmarks

Bones of the pelvic girdle

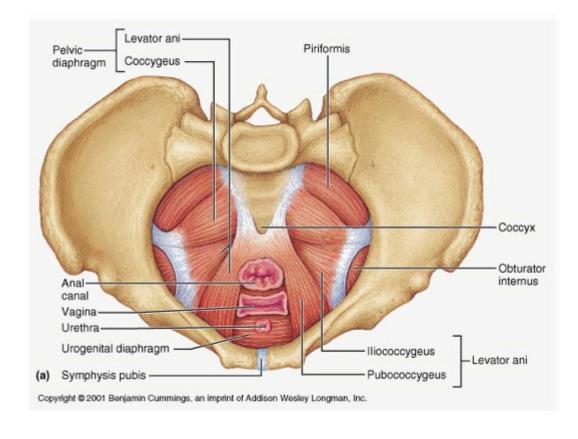


Pelvic Floor 101

Superficial Muscles



Deep Muscles



What are the functions of the Pelvic Floor?

Support of internal organs

Sphincteric for toileting

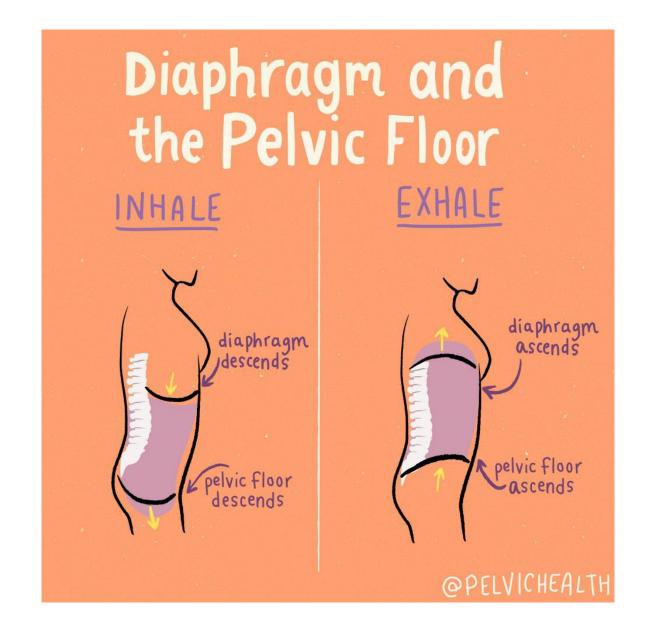
Stability of the core

Sexual

Sump-pump for circulation

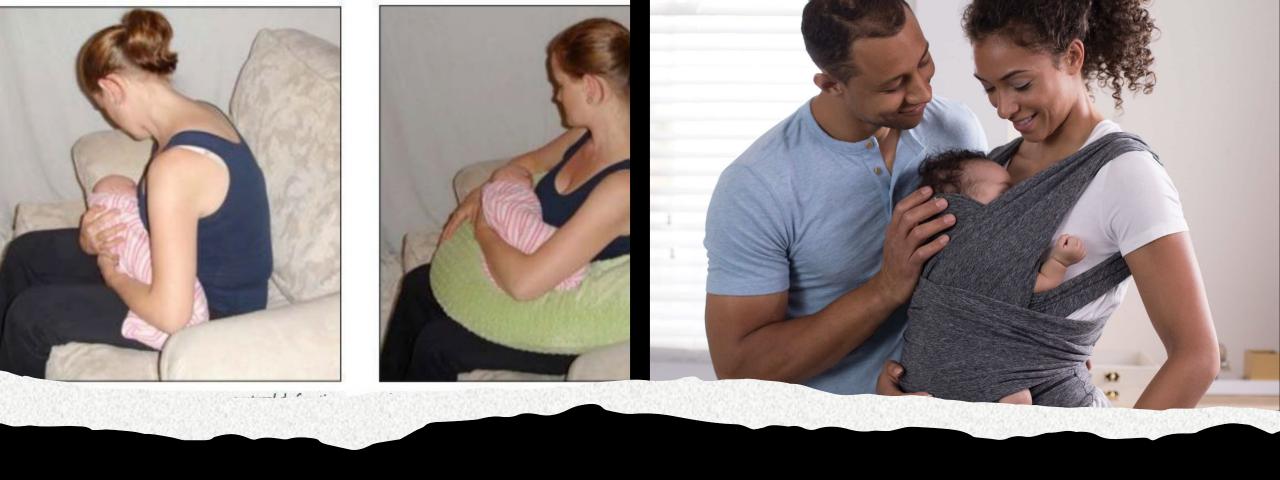
Relationship to Breath

Think about the core canister like a soda can or balloon...





Relationship to Posture & Body Mechanics



Body Mechanics Considerations

- Repetitive daily tasks of newborn care
- Impact of the environment

Common Physiological Changes

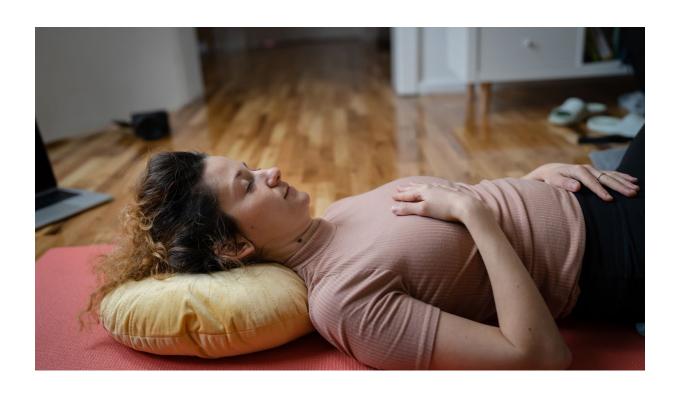
- During delivery
 - Vaginal birth: stretching of pelvic floor muscles of up to 250% of resting length
 - C-section: incision through 7 layers of tissue
 - Note pelvic floor dysfunction still possible
- After delivery
 - Recovery of muscles and connective tissue takes 4 – 6 months



Common Perinatal Pelvic Floor Conditions

- Perineal tears
 - Grade 1 (least severe) Grade 4 (most severe)
- Pelvic organ prolapse
 - Experience of heaviness
- Incontinence
 - Leakage (urinary or fecal)
- Hemorrhoids
- Pelvic pain
 - Pubic bone (SPD), sacro-iliac (SI) joint, hip
- Diastasis Recti Abdominis (DRA)
 - "Ab separation"

Strategies to Support Pelvic Floor Healing: Immediate Postpartum Phase



Healing & Rest

- Padsicles
- Encourage rest
- Avoid doing too much too quickly

Toileting Support

- Nourishment
 - Plenty of water/fiber
- Position
 - Relax pelvic floor
 - Knees higher than hips
- Breath
 - A gentle push with the exhale
- Manage pressure
 - Apply pressure at perineum
 - Pillow against c-section incision

Additional Strategies to Support Pelvic Floor Healing

- 360 Degree Breath
- Gentle upper body stretching
 - Side bends
 - Open chest
- Advocate for referral to a pelvic floor therapist



Perinatal Mental Health Considerations



- Sense of disconnection from body
- Lack of control
- Each day is "new"
- Shifting identity
- Performance expectations
- PMAD's affects 1 out of 5 within first year of life (Postpartum Support International)

Resources

Pelvic Health:

- @the.vagina.whisperer
- @doclizziedpt
- @mamamadestrong
- @carolinepackarddpt
- @drmelissaoleson

Movement:

- @thebellemethod
- @goodfortheswole

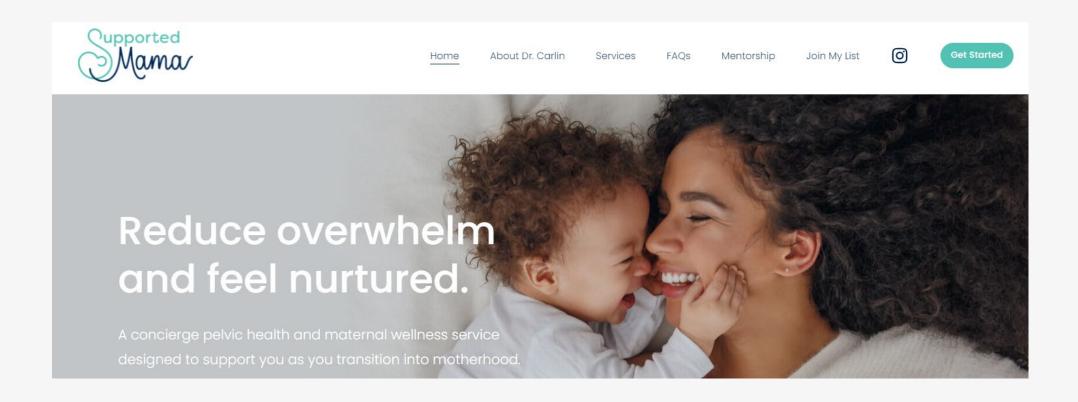
Maternal Mental Health:

- @postpartumsupportinternational
- Maternal Health Hotline
 - 1-833-TLC-MAMA (1-833-852-6262)
- Postpartum Support International
 - free online support services





Questions and Discussion



THANK YOU!





References

- Da Mota, P.G., Pascoal, A.G.B., Carita, A.I, & Bo, K. (2015). Prevalence and risk factors of diastasis recti abdominis from late pregnancy to 6 months postpartum, and relationship with lumbo-pelvic pain. *Manual Therapy*, 20(1), 200 205.
- Selman, R., Early, K., Battles, B., Seidenburg, M., Wendel, E., & Westerlund, S. (2022).
 Maximizing recovery in the postpartum period: A timeline for rehabilitation from pregnancy through return to sport. *International Journal of Sports Physical Therapy*, 17(6), 1170 1183.
- Sperstad, J.B., Tennfjord, M.K., Hilde, G., Ellstrom-Engh, M., & Bo, K. (2016). *British Journal of Sports Medicine*, *50*, 1092 1096.