



## Did you know...

- The pelvis must shift, rotate and stretch in order to allow for baby to pass through. It is common for the pelvis to get “stuck” in this position contributing to pain and dysfunction.
- C-section scarring can significantly affect your uterus and bladder function.
- Menstrual cramps can be attributed to pelvic floor dysfunction and/or scarring.
- The pelvic floor muscles are part of your inner core team, alongside your diaphragm and core muscles. All must fully contract and relax for proper function.
- Waiting 12 weeks prior to resuming vigorous exercise is recommended. Resuming too early can result in pain, incontinence and prolapse.



## What's normal?

- Going pee 5-8 times during the day and 0-1 times at night.
- Soft formed stool, regular bowel movement.
- Not needing to push for number 1 or 2.
- Painfree and pleasurable sex after 6 weeks.
- NOT peeing your pants with coughing, sneezing or exercise.
- NO pelvic pain with daily activity or exercise.
- Less than a 2 finger width gap between the abdominal muscles.

# Post Partum Pelvic Floor Health

## What New Moms Need to Know



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# When to Seek Help

While common after childbirth, it is untrue that the following are “just how it is” once you have given birth. The below are not normal and are treatable.

## 1. Incontinence.

Incontinence is very common after childbirth, but it does not have to be your new normal. **Pelvic Floor Physiotherapy** can alleviate incontinence in many postpartum moms. If you experience leaking with coughing, sneezing or on exertion this is termed *stress* incontinence. If you feel the need to pee more than 5-8 times a day and/or are unable to hold until you can make it the washroom, this is *urge* incontinence. These symptoms should not persist longer than the first few weeks after baby is born.

## 2. Prolapse.

Prolapse is when your organs like your bladder, uterus or rectum sag down out of their typical position and is also fairly common after birth. You may feel a sensation of fullness, heaviness, movement in your abdomen or vagina, or it can interfere with toileting. Often prolapse is undetected until it has progressed enough to create significant symptoms. Postural correction, breathing and pelvic floor treatment can help in most cases.

## 3. Pain in your pelvic area.

If you experience pain when going to the bathroom, wiping yourself, having sex, during exercise or if you have constant pain in your hips, lower back, perineum or pubic area, it is advised to seek an assessment from your doctor, midwife or a pelvic floor physiotherapist.



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If you had pain during your pregnancy or have any of the above listed concerns, speak to your health care practitioner and seek help. Many women suffer needlessly for years with these common issues, for which conservative management can help. Early detection and treatment is very valuable. When left untreated, the above symptoms can contribute to more challenges with subsequent pregnancies and deliveries, and beyond.

**POST PARTUM IS FOR LIFE!**