

Pregnancy related pelvic pain

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Pelvic pain is pain in the pelvic joints that may develop during or after pregnancy. Pelvic pain may occur because of:

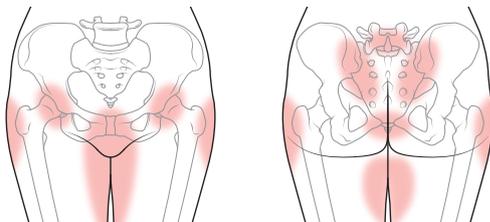
- changes to your posture
- increased pressure on your pelvis due to the growth of your baby
- hormonal changes which soften the ligaments that support the pelvis.

These changes can place increased strain on the pelvic joints making the joints inflamed and painful.

Approximately 20% of pregnant women experience pelvic pain during their pregnancy.

What you might feel

- Clicking, locking or grinding in the pelvic joints.
- Pain in the front or the back of the pelvis, buttocks, groin and/or radiating into the thighs. The shaded areas in the picture below are where pain commonly occurs.



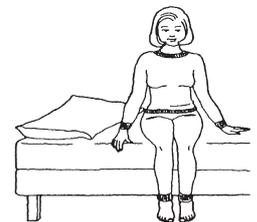
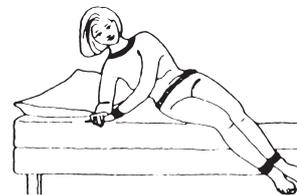
Activities that may increase your pelvic pain

- Prolonged walking.
- Fast walking.
- Getting in and out of the car or bed.
- Rolling in bed.
- Lying flat.
- Deep squatting or lunging.
- Going up and down stairs.
- Standing on one leg (e.g. dressing – putting on pants).
- Moving from sitting to standing.
- High impact exercise (e.g. running and jumping activities).

Managing your pelvic pain

To avoid increasing pelvic pain

- Don't push through pain.
- Take smaller steps when walking.
- Walk shorter distances.
- Reduce heavy lifting and pushing and pulling activities such as, vacuuming.
- Break up large tasks into smaller activities.
- Rest in between activities.
- Keep your knees together when rolling in bed.
- Roll under rather than over when rolling in bed.
- Sleep on your side with a pillow in between your legs.
- Get in and out of bed with your knees together (see the diagram below).



Tips to reduce your pelvic pain

- Use an ice pack on the painful area for 20 minutes every 2–3 hours. Wrap the ice pack in a damp material so that the ice pack does not contact your skin directly.
- Stand tall at all times.
- Sit tall with back support.
- Wear a compression garment or support belt (supplied by your physiotherapist).
- Use crutches or a wheelchair (instead of walking long distances).
- Perform strengthening exercises for the hip, pelvic floor and deep abdominal muscles (as shown by your physiotherapist).
- Use home massage or trigger points to release tight muscles (as shown by your physiotherapist).

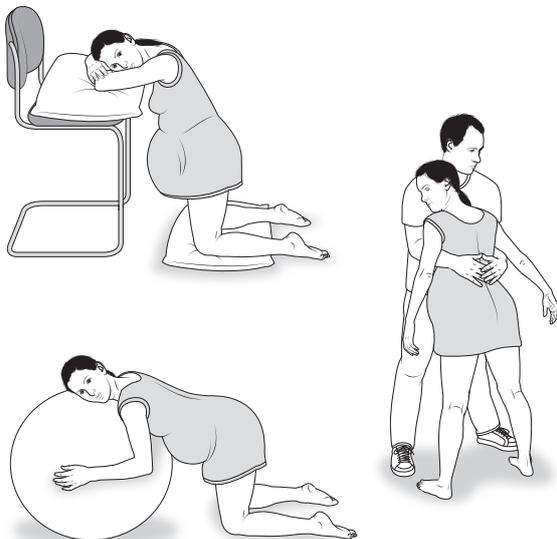
Remember, consult your doctor for advice about taking pain medications during pregnancy.

Make an appointment with a women's health physiotherapist

The physiotherapist will assess you and make recommendations about how to manage your pelvic pain. It is important that you are assessed by a physiotherapist before starting any exercises.

Managing pelvic pain during your labour

- Let the medical team know that you have had pelvic pain during your pregnancy.
- If you have been using a compression garment, support belt or crutches during your pregnancy bring these into hospital to use after the birth.
- Practice the positions below before you go into labour so you are familiar with the positions that are most comfortable for you.
- Avoid positions where your legs are wide apart or where there is uneven weight through your legs.



After the birth

- Rest lying down rather than sitting in chair.
- Continue to ice the painful area (20 minutes every 2–3 hours).
- Use your compression garment, support belt and/or crutches if required.
- Move within your pain limits.
- Attend the physiotherapy postnatal class for information about pelvic pain after birth and return to exercise advice. See ward staff for class times and location.
- If your pain persists you may see a physiotherapist at the Royal Women's Hospital for up to 3 months after the birth of your baby.

For more information

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