



“LOW BACK AND PELVIC PAIN IN PREGNANCY”

Research evidence shows that more than 50% of women will experience low back and / or pelvic pain during their pregnancy. There are several terms that are used as “diagnostic labels” for these symptoms such as Pregnancy Related Pelvic Pain, Pelvic Girdle Pain, Symphysis Pubis Dysfunction as well as simple Low Back Pain. While all of these terms describe the area of pain, none of them are actually a diagnosis, because the reasons why each woman develops low back pain or pelvic pain during pregnancy is very individual and probably due to a combination of factors.

At present, the exact causes of low back and pelvic pain in pregnancy are not certain but several of the factors involved in back and pelvic pain during pregnancy, have been identified.

The hormonal changes that occur during pregnancy include an increase in the levels of the hormone relaxin which results in a softening of the ligaments in the entire body. This will have an effect on the low back and pelvis that often means the muscles around these structures have to work harder to support the body. Sometimes these muscles “overwork”, resulting in pain. It is this excessive muscle action that often results in the feelings of “the pelvis being out or misaligned.” People think that the hormonal changes in pregnancy make women vulnerable to their pelvis becoming unstable and the bones “slipping out”. This is extremely rare and would usually require some kind of violent trauma such as a fall to cause such a situation, rather than just pregnancy itself.

Postural changes related to the growing size and weight of the baby also play some role in the development of pregnancy related pelvic pain. The growing baby alters a woman’s centre of gravity and many women develop an increased curve in their low back (lordosis) to cope with this. An increase in the lordosis compresses the joints in the low back and often results in pain.

Additionally, the weight of the baby sitting on the pelvic floor can cause problems. The pelvic floor is one of the “Core Muscles” that helps to support and stabilise the spine and pelvis. Increased strain on the muscles during pregnancy, due to the weight of the baby means that the muscles may struggle in this support function, causing stress on the joints of the pelvis and low back.

The growing baby also stretches the abdominal muscles and the rib cage which can restrict movement around the upper back. During pregnancy women often report pain and stiffness in these areas as well.

The symptoms of low back and pelvic pain in pregnancy are highly variable depending on what structures are put under strain. The following is a list of common symptoms reported:

- pain in the low back
- buttock and leg pain
- pain over the pubic bone at the front
- pain radiating down the inner thigh area
- groin and lower abdominal pain
- pain in the hip region
- pain with walking and especially climbing stairs
- pain / clicking rolling over in bed at night
- stiffness in the upper back
- difficulty getting out of a car

Clinics at:

Point West, 116 Cromwell Road
Kensington, London.

The Lodge, Parkside Hospital
53 Parkside, Wimbledon, London.

What can Physiotherapy do to help?

A physiotherapist will undertake a thorough examination to determine which structures are involved in causing your symptoms. This is highly individual and different in each woman.

They will then use gentle techniques such as manual therapy, joint mobilisation, muscle energy techniques, muscle release techniques and massage to loosen up any areas of stiffness or muscle overactivity. Some exercises to help loosen and stretch areas of restriction will be given to you. They may refer you to a Sports and Therapeutic Massage Therapist for help in gently releasing the overactive muscles.

Following this, it is essential that the physiotherapist examines how you control your low back and pelvic muscles and teaches you to work the muscles in a correct fashion. They may give you a pelvic belt or apply tape to help the muscles work in the correct pattern.

These muscle activation patterns need to be practised regularly and your physiotherapist will give you an exercise programme to practise at home.

They will also talk to you about things that you can do throughout the day to help ease your symptoms and avoid the pelvic and lower back pain that is experienced during pregnancy.

Some people think that low back pain and pelvic pain are things that have to be endured during pregnancy and that they will go once the baby is born. This is not the case. On going pain and altered movement patterns can set up problems that last after delivery. To ensure this doesn't happen, it is essential to seek help early on if symptoms develop. A physiotherapist will be able to help you prevent ongoing problems.

In some cases, women do not have pain during pregnancy, but develop symptoms after delivery. This is not uncommon in cases where intervention such as forceps and stirrups are required or if there is tearing or cutting of the pelvic floor muscles. These problems are usually caused by changes in the muscle function, in a similar way to problems that develop during pregnancy. A physiotherapist will assess your low back and pelvic region and probably address it in a very similar manner.

Claire Small

M Phty st, MMAPCP

Specialist Musculoskeletal Physiotherapist

For more advice on low back and pelvic pain in pregnancy or any other medical treatment please contact us on **0870 2000 878** or info@puresportsmed.com

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