

5224: Mommy + Bootcamp? Not in the Same Sentence!  
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What's normal 0-8 weeks:

- Possible feeling of bottom falling out, not sure how to sit/stand
- May experience pain in hips, back or pubic area
- Difficulty controlling urine/stool/gas
- Muscle stiffness
- Healing time!

What to do 0-8 weeks:

- Perfect posture
- Pillows, props, positioning
- Gentle TVA contractions
- Gentle PF contractions
- Refer to PF Physio
- Stretch tight muscles

What's normal 8+weeks:

- Bleeding stopped
- Full control of bladder, bowels
- Pain free
- May begin structured program – slow progression is key
- Watch for signs of DRA
- Avoid bulging of LA

What's not normal

- Ongoing pain of pelvis, back, groin or abdominals
- Leaking of urine or stool with increased pressure
- Pressure
- Bulging of LA during any exercise
- Refer

Postnatal Guidelines:

- Most types of exercises can be resumed in the PP period
- Watch for DRA, PF, pubic symphysis
- Some women may need to reduce intensity or time
- 6 week PP checkup good opportunity to discuss
- Addition of ST with emphasis on hip, scapular and trunk stabilizers
- TVAs & IO (limit RA and EO work)
- Running and other impact activities 12-16 weeks if stable!
- Growth of babies in exercising women normal, lactic acid present in breast milk – nurse before or wait 1 hour after (only affects palatability of milk)

### Pelvic Floor

- May be too weak or too tonic
- 92% of those incontinent at 5 weeks are still @ 5 years
- 5-7 years after delivery 44.6% have some form of incontinence
- 66% of women with DRA had at least 1 support related PF dysfunction
- Refer to PF Physio

### DRA

- 100% had DRA in 3<sup>rd</sup> trimester
- Most with DRA at 8 weeks will remain wide at 1 year (without intervention)
- IRD variable
- Abdominal muscles can't close a DRA – can only prevent it
- IRD @ rest w. UI – 69% present symptoms
- 50% could decrease symptoms by 20% with proper TVA act.
- Many can CU w. EO/IO & narrow IRD – not optimal

### Correcting DRA

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### Posture

- Ribs over hips key
- Avoid pulling DRA in standing, seated

### Breathing Mechanics

- Chest or belly breathing not optimal – pressure

### Workout

- Ready stance 45 glide
- Ball wall hip abduction w. partial squat
- Scap set & retract
- Supine heel press (multifidus)
- Supine 90/90 breathing
- Lying draw ins w. marches
- TVA Press