

# Pelvic Girdle Pain (PGP) Fact Sheet

## Physiotherapy

PGP describes pain that is experienced in the front (symphysis pubis joint) and/or back (sacroiliac joints) of your pelvis. This is a common problem, affecting to 1 in 5 pregnant women at some point during her pregnancy.

There is a wide range of symptoms, and in some women these will be much worse than in others. The most common one is pain and tenderness over the pubic bone at the front, which may extend to one or both groins and inner thighs, and/or pain across one or both sides in your lower back. Some other symptoms include:

- Difficulty walking
- Pain when standing on one leg.
- Pain moving your legs apart.
- Clicking or grinding may be felt or heard in the pelvic area.
- Difficult or painful hip movements, including turning over in bed and lying in certain positions.

Having some of these symptoms does not necessarily mean that you are going to get worse. In fact, understanding how PGP may be caused and getting the right advice on how you can help yourself might make the problem manageable for you.

PGP is normally related to a lack of stability in the pelvic girdle joints, caused by the loosening of the pelvic ligaments. Postural changes as a result of the increasing weight of your baby and changes in the activity of the muscles in your tummy, pelvic girdle, hip and pelvic floor may place further strain in your pelvis. Sometimes the position of the baby can cause symptoms related to PGP.

To manage your PGP effectively, the first thing you need is some general advice:

## DO

- Listen to your body. Try to remain as active as possible within your comfort limits but avoid activities that make the pain worse.
- Rest more frequently.
- Ask for and accept help from others, involving partner, family and friends as possible.
- Sleep on your side with a pillow between the legs. Turn over with your knees together and squeezing your buttocks. Keep knees and shoulders in line to avoid twisting.
- Sit down to do things that you would normally stand for e.g. getting dressed and undressed; ironing...
- Go upstairs one step at a time with the less painful leg first. Go downstairs leading with the most painful leg.
- Wear flat, supportive shoes.

## AVOID

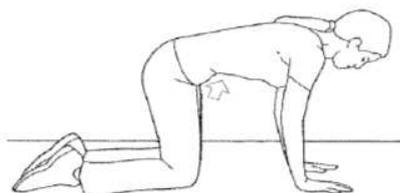
- Standing on one leg to put on trousers or tights.
- Stooping or bending during activities
- Movements that involve separation of your legs e.g. getting in/out of bed; getting in/out of car; if swimming avoid breast stroke; take small steps when walking; consider alternative positions for intercourse.
- Asymmetrical positions of the pelvis e.g. avoid twisting movements and sitting cross-legged.
- Sitting on the floor or low chairs or soft, deep couches.
- Avoid lifting heavy weights.
- Using your feet to move objects on the floor.

You may find some relief by wearing some SUPPORT around your pelvis to improve the stability, for example supportive underwear or three layers of Tubigrip.

Tubigrip is obtainable from Antenatal Clinic. It may feel tight, but it is safe for you and your baby. It should fit from below your bust to below buttocks, covering your hips, your lower back and your symphysis pubis.

### Stability Exercises:

- Deep abdominal exercises. Your deep tummy muscles provide support for your back, pelvis and your baby and they encourage good posture.
  - Place your hand on the lower part of your tummy under your bump.
  - Breathe in through your nose.
  - Gently draw in your tummy muscles as you breathe out. Your tummy should move away from your hands and towards your back.
  - Try to increase the time you hold this contraction up to a maximum of 10 seconds while you continue to breathe normally.
  - Repeat up to 10 times.



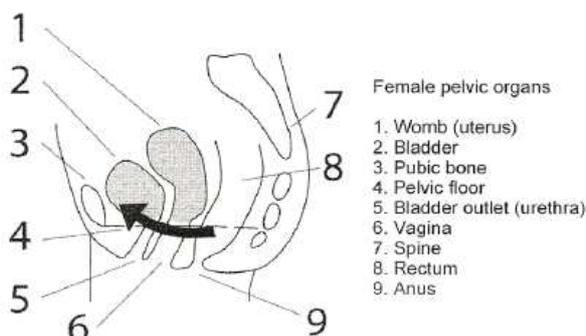
This exercise can be performed in any position e.g. side lying, sitting, standing, but kneeling on all fours can be a comfortable position to start to learn the exercise, which should then be practiced during your daily activities such as shopping, vacuuming, getting up from a chair...

### Pelvic Floor exercise

Your Pelvic Floor Muscles form the base of the bony pelvis and they help to support the pelvic organs, maintain bladder and bowel control, stabilise your lower back and pelvis and improve sexual enjoyment and performance.

During pregnancy, these muscles need to be exercised daily to maintain their support, improve the circulation in the area and prevent problems such as constipation and haemorrhoids.

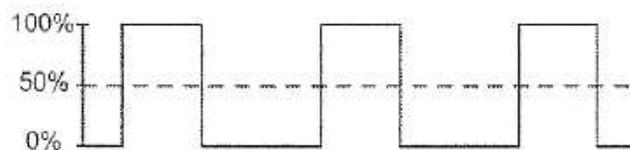
It can be practised in any comfortable position as long as your legs are slightly apart.



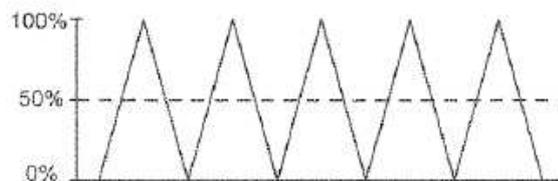
### Basic exercise

Imagine that you are trying to stop yourself from passing wind and at the same time trying to stop the flow of urine. The feeling is one of “squeeze and lift”, closing and drawing up the back and the front passages. Try to do this without squeezing your legs together or clenching your buttocks.

**Slow contractions:** Tighten your pelvic floor as described above and hold strongly for as long as you can, up to a maximum of 10 seconds, breathing normally throughout. Release the contraction and rest at least for another 10 seconds. Repeat slowly as many times as possible, up to a maximum of 10 repetitions.



**Quick contractions:** Repeat the exercise, this time squeezing up as hard as you can and then releasing immediately, up to 10 times, without holding the contraction.

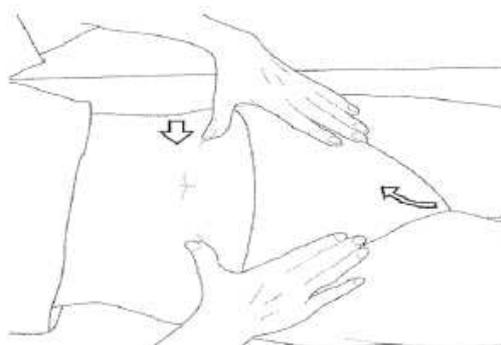


Try to tighten these muscles up before coughing, sneezing, lifting, laughing or squatting so they can resist the rise in abdominal pressure.

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### Abdominal and PFM exercises

Working the deep abdominal muscle and then bringing in a pelvic floor contraction is really important to protect your spine and pelvic joints when performing some of your daily activities. Try to use this combined contraction when moving and handling objects, changing positions, standing for some length of time...



### Pelvic Tilting

Lie at an angle of 45 degrees supported by a wedge or pillows, with your knees bent and your feet flat on the surface.

- Pull in your abdominal muscles and tighten the muscles of your buttocks so you tilt your pelvis and flatten your back onto the support.
- Hold the position for 5-6 seconds, then relax. Progress by gradually building up to a maximum hold of 10 seconds.
- Repeat a maximum of 10 times.
- Pelvic tilting can be performed in different positions, for example sitting, side lying, standing, 4-point kneeling...

If despite following all the advice provided and performing your stability exercises you still feel unable to cope with the pain or suffer from severe difficulty mobilising, you can book yourself on to one of our **PGP classes** held at the **Liverpool Women's Hospital** by leaving your name and Hospital number on the following number: 0151 702 4170.

### Useful websites:

- [www.pelvicpartnership.org.uk](http://www.pelvicpartnership.org.uk)
- <http://acpwh.csp.org.uk/publications/pregnancy-related-pelvic-girdle-painformothers-be-new-mothers>

If you would like to make any suggestions or comments about the content of this leaflet, please contact the Patient Quality Manager on 0151 702 4328.

Please note that Liverpool Women's NHS Foundation Trust is a smoke free site. Smoking is not allowed inside the Hospital building or within the Hospital grounds, car parks and gardens.

Staff are available to give advice about stopping smoking, please ask your Nurse or Midwife about this.

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