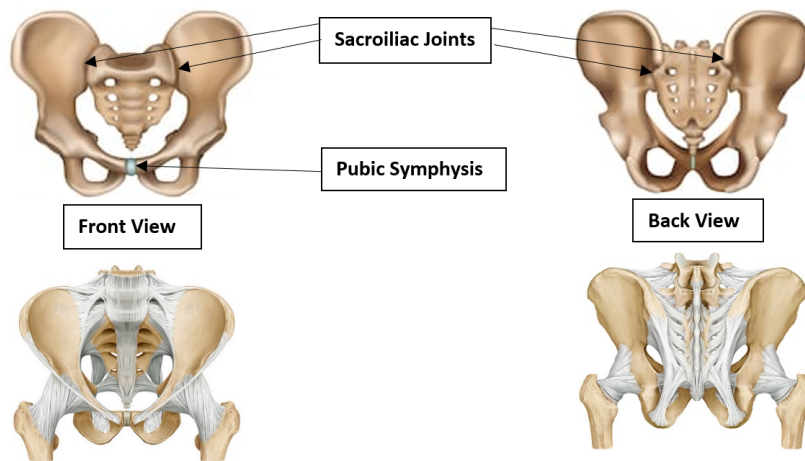


Pelvic Girdle Pain

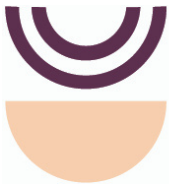
The pelvis is made up of two 'hip' bones and the sacrum at the base of the spine. There are three joints in the pelvis, the pubic symphysis at the front and two sacroiliac joints (SIJ) at the back. These joints are usually held in a very stable position by close fitting joint surfaces and by many strong ligaments.



During pregnancy hormonal changes cause the ligaments in the body to become more flexible. When combined with postural changes and increased pressure placed on the joints by the growing baby, this can result in a slight increase in movement occurring in these joints. This means that the muscles that also cross the joints (e.g. buttock muscles) must work harder to maintain good control and stability of the pelvic joints. When the muscles become overworked by these increased demands this can result in painful joints and sore muscles.

Treatment of this pelvic girdle pain can involve massage to relieve sore and tight muscles, joint mobilisation, taping or use of a stability belt (i.e. SIJ belt) for the joints, ice packs or heat packs, specific exercises and activity modification.

To help the body cope with these increased demands and reduce pain or fatigue in the pelvis, some modifications to daily activities are recommended (see over page). If a particular activity is causing you discomfort, then start by implementing modifications to this activity first. It is important to seek help early for pelvic girdle pain and continue to follow a treatment plan until the pain has settled and some exercise therapy can be implemented to prevent pain from returning.



Tick	Activity causing pain	How to modify
	Prolonged sitting	Get up from sitting every 30 minutes
	Prolonged standing	Stand for a maximum of 30 minutes at a time When standing keep weight even between both feet (avoid hanging on one hip)
	Walking	Walk slower, stick to flat ground (avoid hills), wear supportive shoes like runners, walk for max 30 mins at a time Consider using an exercise bike staying seated to maintain cardio fitness if walking is significantly limited
	Going up/down stairs	Bring both feet onto each step instead of one foot per step Step up with the less painful side Step down with the more painful side
	Getting out of bed	Keep your knees together throughout, roll onto your side and use your hands to push yourself up to sitting
	Rolling over in bed	Keep your knees together, roll under instead of rolling over (i.e. roll under to a kneeling position on hands and knees and continue to end up on your other side)
	Sleeping	Lie on your side with a pillow between your knees so that both knees are in line with your hips Keep both knees symmetrical (i.e. make sure one knee is not bent up further than the other knee)
	Getting in/out of the car	Keep both knees together, use one hand on the doorframe and one hand on the dashboard to help you sit your hips down onto the seat, then keeping your knees together bring both legs around into the car (you can place a plastic bag on the seat to make it easier to swivel around on the seat)
	Standing up from a chair	Make sure both feet are grounded down with even weight between them before you stand up (don't start walking before you have fully stood up)
	Putting on pants, undies or socks	Sit down to get dressed rather than standing on one leg
	Exercises where you are weightbearing through one leg or the legs are positioned asymmetrically	Stick to exercises where your legs are symmetrical in the way they are moving and weight stays even between both legs (e.g. squats instead of lunges)
	Holding/lifting a toddler	Minimise the amount of time that you are holding a toddler on one hip Encourage them to climb up onto your lap when you are sitting down if they want a cuddle Rather than picking them up from the floor, encourage them to climb onto a couch/chair for you to pick them up from a higher level