

Post Natal Physical Activity Recommendations

Week	Details of Exercise	Comments	Considerations	Useful Resources
O-2 weeks	Pelvic Floor Muscle Exercises (PFMEs)	Aim to do these daily initially, remember to contract and relax the muscles. A good cue is to try and focus the squeeze around the back-passage. At first you may have little sensation but this will improve with time.	Between each long squeeze, ensure you fully relax the muscles with a deep breath. You can start PFMEs lying down if easier, then progress to sitting & standing. Eventually aim for 30 x 10 second holds and 30 x short-squeezes throughout the day. Aim to increase the duration of long holds towards 10 seconds.	Squeezy NHS Pelvic Floor App Chartered Society of Physiotherapists: Personal Training for Your
	Basic Core Exercises	Focus on deep core muscle activation and breathing exercises to get you diaphragm flexible again; keep the pressure off the front of your stomach.	Getting up by rolling onto your side reduces the pressure on the front of the abdominal wall, helping the healing abdominal wall regain tension.	Pelvic Floor Ready Steady Mums
	Gentle Stretching	Stretching can help reduce muscle aches and pains, keeping limbs mobile.	Think gentle & slow. For comfort not flexibility	
	Light Walking	This does not have to be far or fast; think "every movement counts" and build gradually, even if just moving around the house.	Balance activity against your stage of recovery; your symptoms should improve day-on-day in the early weeks; if they don't, seek further advice.	
2-4 weeks	PFMEs	Continue your PFMEs throughout	Continue to progress PFMEs throughout the postnatal period and aim to maintain them for life!	CSP: Pilates in Women's Health physiotherapy
	Core Exercises	These can now progress a little more to incorporate isometric, mat-based pilates pelvic stability work.	Avoid movements that cause symptoms (see flowchart).	
	Bodyweight Strength & Balance Exercises	Bodyweight strength and balance exercises can commence, targeting the major muscle groups (upper and lower body) to get the brain and muscles communicating again.	Find a comfortable range of movement, speed and repetition. If a movement is not achievable, modify it; add support, height, don't go so low. Be guided by fatigue and current sleep disturbance.	
	Progress Walking	If you feel ready, try to increase the length of walks, or perhaps be more active around the house.		
4-6 weeks	Low-impact aerobic activity	At this stage, static bike cycling or use of a cross- trainer can resume	Work within comfort-zone; consider wearing padded shorts on the bike; adjust duration spent in the saddle according to symptoms of pain/discomfort/swelling. Adjust resistance according to abdominal, low-back and pelvic pain/discomfort	Active 10



Post Natal Physical Activity Recommendations

6-12 weeks	Postnatal check-up Increase Low-Impact Aerobic Activity Add Resistance to Strength Work	At 6-8 weeks you will have your postnatal check up with your GP. You may be given medical clearance for more strenuous activity. Aim to increase guidance towards the CMO physical activity guidance. Power-walking, using a cross trainer and a bike can progress. Swimming can start at 8 weeks (as long as passing of vaginal lochia has stopped). You can start to add weight/resistance to strength work at this stage. Start slowly and build gradually. Aim for two strength and balance sessions per week.	You might start postnatal group exercise classes. If you do have any ongoing symptoms (see flowchart) seek further advice before increasing exercise intensity at this stage. High-impact activity such as running and jumping should not resume until 12 weeks under current expert guidance; however you can increase low-impact aerobic activity according to symptoms. Start to increase range of movement and experiment with less stability. If you are not sure how to progress strength work there are level 3 qualified personal trainers with postnatal experience. Postnatal group classes or online offerings are another option.	Baby Buddy App CMO Physical activity for women after childbirth (infographic)
3-6 months	Recommended amount of aerobic & strength-based activity Higher impact exercises; running & jumping	Continue to aim to achieve 150 minutes moderate-intensity physical activity, 2 strength sessions per week and reduce sedentary time. Running can technically resume at this stage, but expert guidelines suggest that you need to be able to do certain movements and exercises symptom-free before restarting. Commence gradually following a walk-run programme such as couch 2 5k. The same approach applies to any high-impact activity, gradually building-up.	Examples of progressive exercises for return to impact include stomping, hopping, bounding and jumping. If you develop any symptoms of pelvic floor dysfunction, ensure you are doing regular PFMEs, try modifying the FITT principles, ensure you are able to breathe adequately to allow function of the diaphragm and pelvic floor, reduce stride length and increase cadence, or seek further advice.	Couch 2 5k See links below for more detailed information on returning to running https://blogs.bmj.com/bjsm/2019/05/20/ready-steadygo-ensuring-postnatal-women-are-run-ready/https://www.running-physio.com/postnatal-guide/https://bism.bmj.com/content/early/2020/05/06/bjsports-2020-102139
6 months +	Buggy Running	Buggy running is not recommended prior to 6 months. Commence gradually using the two handed method initially. Note that buggy running can impact movement at the trunk and back.	This is mainly to protect the baby's neck and spine as prior to this it is not developed enough to withstand the motion of the buggy The two handed method most replicates normal running. For this reason stretch out your lower back and glutes, and build in upper body and core strength-based exercises into your week to reduce injury risk	IVELISÉ

Before moving to the next stage, review your progress. Sometimes, being a certain number of weeks postnatal does not translate to the recommended activity at that stage being appropriate for you. If you're having difficulty with any of the activities or are starting to develop new symptoms, do not progress: stay on the same level and seek further help. At any stage, if you have new symptoms that develop and persist despite modification of the frequency, intensity, and the duration of time spent doing the activity, refer to the trouble-shooting flowchart and try going back a step to see if that helps. If they continue despite these efforts, seek a review with your GP or women's health physio.