



RESTORING YOUR CORE AFTER CAESARIAN SECTION

DAY 1-3:

1. Support the incision:

- use your hands or a small towel to support the incision during coughing, laughing, etc.
- get out of bed by rolling onto your side, swinging your legs over the edge of the bed and pushing up into sitting- exhale gently during each step
- repeat the same steps in reverse to get into bed

2. Gentle abdominal and pelvic floor muscle contractions:

- lie on your back with your knees bent, exhale through your mouth as you gently contract the pelvic floor muscles (50% effort); simultaneously draw in your lower abdominals as if you were trying to zip up a tight pair jeans
- hold 5 seconds, rest 10 seconds, 2 minutes every 2 hours

3. Protect the pelvic floor during bowel movements:

- use a footstool so that your knees are higher than your hips
- lean forwards and rest your arms on your legs
- relax the pelvic floor and exhale gently through a closed fist- avoid straining!

4. Breathe with your diaphragm:

- lie on your side or your back, place your hands around the lower part of your rib cage and feel for the outward movement of the belly and ribs when you breathe in

5. Prevent leaks:

- contract the pelvic floor muscles maximally before and during coughing, sneezing, laughing or anytime you anticipate a leak of urine

6. Posture

- lengthen the space between your ribs and your pelvis

DAY 4 – WEEK 6:

This is a critical time to allow the abdominal and pelvic floor muscles to shorten and to regain their normal muscle tone. Lengthened muscles need to shorten before they can be strengthened!

Things to avoid during this period:

- heavy chores such as vacuuming, carrying laundry and scrubbing floors
- lifting anything heavier than your baby
- repetitive stair climbing
- sit-ups and jogging

Things to keep in mind:

- all abdominal contractions should be pain-free
- always do a pelvic floor contraction before and during an abdominal exercise (otherwise the increased intra-abdominal pressure generated during the abdominal exercise will cause downward pressure on an already stretched pelvic floor!)
- the deep abdominals need to be trained before the superficial abdominals (so no sit-ups, curl-ups or crunches for at least 6 weeks!)

To shorten and tone the pelvic floor and deep abdominal muscles:

Continue with #4 above and progress to:

- hold 10 seconds, rest 10 seconds, 10 times, while maintaining a diaphragmatic breathing pattern
- progress to other positions: on all 4s, sitting, standing, etc.
- pelvic tilting: lie on your back with your knees bent, exhale gently through your mouth, contract the pelvic floor and lower abdominals as you tilt your pelvis backwards, gently pressing your low back into the bed; 3 sets of 10, rest 10 seconds between contractions

Start pelvic floor muscle strengthening:

- lie on your back with your knees bent, exhale through your mouth as you do a close to maximum pelvic floor muscle contraction; hold 5 seconds, rest 10 seconds, 30 times
- progress to sitting and standing

WEEK 3-4:

Start low impact cardio:

- walking, swimming, cycling

WEEK 5:

Mobilizing the abdominal scar:

Begin scar tissue mobilization once the scar is fully healed in order to prevent the scar tissue from attaching to the deeper muscle layers. Castor oil or vitamin E oil can be used but are not necessary:

- massage the scar along the line of the scar
- stroke back and forth across the scar
- roll the scar between your thumb and index finger
- pick the scar upwards, lifting it away from the belly

5 minutes, once a day, for 1-2 weeks

References:

American Physical Therapy Association's Section on Women's Health, 2011.

Essential exercises for the childbearing year. Elizabeth Noble. 2003.

En forme après bébé: Exercices et conseils. Chantale Dumoulin. Hôpital Sainte-Justine: 2000.

