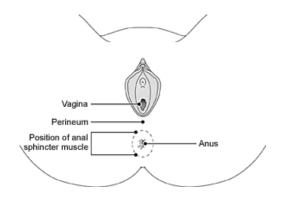


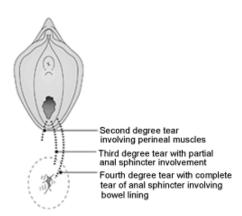
Pelvic Floor Exercises for Post-Perineal Tears

Bottom view of female pelvis



Types of tears

- 1° tear: Small tear involving only skin-deep tears.
- 2° tear: Deeper tear affecting the muscle of the perineum and skin. An episiotomy is a second-degree tear.
- 3° tear: A more extensive tear downwards involving the vaginal wall and perineum down to the anal sphincter, which is the muscle that controls the anus.
- 4° tear: A more extensive tear involving the anal canal as well as the rectum.



Following repair of a third or fourth-degree tear, a small group of women may have persistent problems with bladder or bowel control. This is called incontinence and will require medical review and further management.

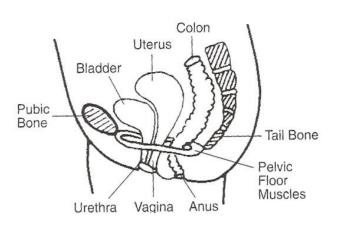
Causes of tears

- Long second stage of labour (pushing for more than 1 hour)
- Shoulder dystocia (the shoulders of the baby do not deliver easily in the normal way)
- Baby lying back to back with the mother, causing a larger part of the head to present first
- Large baby of over 4kg
- Assisted vaginal birth, e.g. with forceps or ventouse.

Benefits of pelvic floor exercise

- Improves pelvic floor muscle strength, endurance and coordination
- Improves blood circulation in the pelvic region
- Speeds up recovery

Side view of female pelvis



Pelvic floor exercise

The pelvic floor muscles form a hammock between the pubic bone and the tailbone. They help to support the pelvic organs and control bladder and bowel functions.

These muscles can be weakened by the effect of childbearing and delivery. Commence exercise when urethral catheter is removed.

- To exercise the muscles, imagine that you want to stop urinating.
- Tighten your muscles around the front and back passages, and pull up inside.
- Contract as hard as you can, then release gently and slowly.
- Do not hold your breath, or tighten your buttocks and/or thighs.

For strength (to be performed immediate)	ly after childbirth)	١
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Perform a series of quick, short and hard squeezes, for _____ repetitions.

For endurance (to be performed 4 – 6 weeks after childbirth)

- Perform long hold for seconds, rest seconds and repeat times.
- These exercises can be done lying down, sitting or standing.
- Remember to tighten your pelvic floor muscles before you cough, sneeze or lift items.

Progression

Perform the exercises above during activities such as walking and stair-climbing.

Other recommendations

- Drink at least two litres of water (6 8 glasses a day) and include a lot of fibre in your diet (e.g. fruit, vegetables, wholemeal bread/pasta) to prevent constipation and regulate your bowel movements.
- Apply ice packs to the area every two hours for at least 24 to 48 hours.
- Avoid heavy lifting as you need to avoid any strain or pressure on the back passage.
- Get in and out of bed on your side as this reduces strain to your perineum.



• Try not to strain when moving your bowels and use the recommended defaecation position. The passage of hard stools can disrupt repair and delay healing.



Tighten the pelvic floor muscles when laughing and coughing.

This information serves as a guideline. For individualised modifications, please approach your physiotherapist.

Rehabilitation Centre — Physiotherapy National University Hospital 5 Lower Kent Ridge Road, Singapore 119074 Tel: 6779 5555 Website: www.nuh.com.sg

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