

Physiotherapy Department

Pregnancy-Related Pelvic Girdle Pain (PPGP) and Low Back Pain (PLBP) Information for Pregnant and Post-Natal Women

What is PPGP?

PPGP is the term used for pain in and around your pelvis. This may be very low in your back, buttocks, hips, groin or pubic bone. You may have pain in just one place or all around your pelvis. Sometimes you may have pain down one or both legs. The pain may start suddenly if you hurt yourself perhaps by falling or increase gradually over a few days or weeks.

How common is PPGP and PLBP in pregnancy?

Anyone can get PPGP, but it is more common in pregnancy. Research shows that more than 50% of pregnant women have PPGP or PLBP. Of these women, 5-8% will have severe pain and/or disability. Every pregnancy is different, and you may not have PPGP or PLBP in future pregnancies.

What causes PPGP and PLBP in pregnancy?

- Pain generally protects our body from injury and helps to heal a wound or injury. Pain can be overprotective, and last for longer than expected. Most cases of PPGP and PLBP are not due to damage to the muscles, joints, ligaments, or discs.
- There are multiple factors that contribute to your pain. Your body and brain are more sensitive to pain during pregnancy. If you have experienced back, hip, or pelvic pain prior to pregnancy, your brain will have developed a memory of this and how you reacted last time.
- Your nerves and brain may already be on high alert for any pregnancy pain. You may react more cautiously this time because of your experience of pain last time.
- Other factors that make your nerves and brain more sensitive to pain are stress, anxiety, poor sleep, tiredness, lacking energy, difficulties at work and/ or home, other pain conditions such as fibromyalgia, endometriosis. These are common in pregnancy. Your pain is still real and can usually be helped by physiotherapy.

What will the Physiotherapist do?

You may be offered an appointment in an online group, or a face-to-face appointment. This will involve an assessment of your movements, joints, muscles and your pain.

Treatments may include:

- Identifying which factors are sensitising your brain and nerves and learn how to manage these by managing stress/ anxiety with mindfulness/ relaxation techniques.
- Learning different ways of moving that are less painful -this can help to reduce pain sensitivity.
- Keeping active – this is important for your brain, nerves, back, hips, pelvis, mental health and more.
- Practicing exercises and stretches to keep you moving and strong.

- Advice about posture, childcare, work activities, delivery positions and pain management (excluding medication).
- Hands on treatments.

Many women with PPGP or PLBP will see a real benefit after just one appointment, and most should be pain free or very much improved after two or three appointments. A small number of women have a problem which can take longer to treat. These women will be seen as often as necessary by the physiotherapist during and after their pregnancy.

I think I've got PPGP or PLBP – what should I do?

You may like to discuss your pain with your midwife or GP. You can access the 'Physiotherapy Advice in Pregnancy' leaflet on the hospital website: [Norfolk and Norwich University Hospitals NHS Foundation Trust » Physiotherapy Advice in Pregnancy v4 \(nnuh.nhs.uk\)](https://www.nnuh.nhs.uk/PhysiotherapyAdviceinPregnancyv4)

How do I get help?

You can refer yourself to the **Pelvic and Maternal Health Physiotherapy Team** if you are booked to have your baby at the Norfolk and Norwich University Hospital.

To do this please telephone 01603 287130. This is a 24-hour answer phone which is checked regularly during weekdays.

Please leave a clear message including the following details:

- | | |
|-------------------------------------|--------------------------|
| - Your Name | - Date of Birth |
| - Hospital Number | - Telephone Numbers |
| - Brief description of your problem | - When your baby is due. |

The Pelvic and Maternal Health Physiotherapy Team will listen to your message and return your call as soon as they are able. At busy times there may be a delay.

Frequently Asked Questions About PPGP and PLBP:

Will it be possible to have a normal delivery?

Most women should be able to have a vaginal delivery unless other obstetric factors are present. Your physiotherapist and midwives can advise you on positions for labour and delivery.

If I had it last time, will I have pain again?

Some women have pain in every pregnancy, and others just in one of their pregnancies. Either way, pain can usually be helped by physiotherapy.

Is it just because I'm pregnant? I've heard that you can't do anything about it.

Physiotherapy treatment can relieve most PPGP and PLBP. It is not normal to have severe disabling pain during or after pregnancy.

Will I need a maternity belt?

The physiotherapist will be able to tell you if a maternity belt might help your pain. Physiotherapy treatment may be better than a belt. For some women a belt may not be helpful.

How long will my pain last after having my baby?

Many women find their pain improves after delivery, either very quickly or within a few weeks. Some women develop pain after birth. If your pain is making it difficult to care for your baby in the first 3 months, you should contact the Pelvic and Maternal Health Physiotherapy Team.