

Scoops



The Newsletter of the Guild of Pregnancy and Postnatal Exercise Instructors
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www.postnatalexercise.co.uk

NEW NAME ! NEW COURSE! NEW CHAIR!

Well! As we hinted at in the last issue the changes that we had in mind are now starting to take shape!

First, is that we have a new name which more closely reflects what the Guild and its members are about. **The Guild of Pregnancy and Postnatal Exercise Instructors** was the name that got the most votes at the AGM and thank you to those of you that took part in the voting. The website name will remain the same, at least for the time being.

Secondly, we are beginning the work on the new course, which will cover the full range of exercise and health advice that the Guild members offer. It is going to be aimed at achieving a full Diploma and we are currently in initial discussions with the University of Surrey.



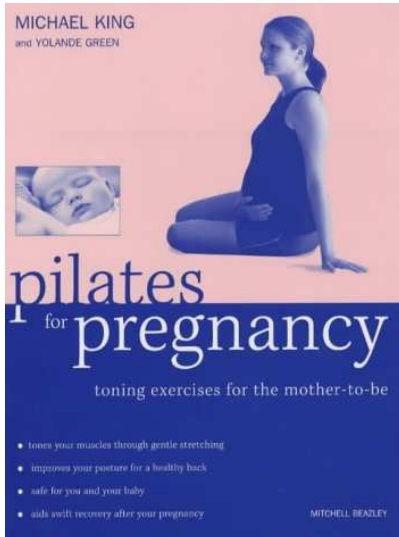
We may approach others so if any of you have any contact with the relevant Sports Science department in your local university let me know.

Finally, **Gillian Fletcher** has had to bow out as Co-chair because of the pressure of her work as President of the NCT, but she will stay very much involved with us. She is going to continue as a tutor and develop the syllabus for the antenatal module. **Gillian Fletcher** and **Marion Grant** developed the Guild's course and remain key members of the tutor team.

However, I am delighted to announce that you have a new Co-chair, **Ruth Barrett**, who was duly elected at the AGM. Ruth trained with the Guild, and then went on to complete the extra modules at Luton to get her Diploma in Higher Education Sport and Exercise Science. I am delighted to welcome her to the post of Co-chair on behalf of you all.

Others who are going to help as trainee tutors are **Moira Clark**, **Emma Backshall** and **Samantha Gillard**, and **Sue Deakin** with publicity. We look forward to working with them over the coming year.
Meg Walker. Hon Sec GPPEI

**PILATES FOR
PREGNANCY**
* * *
**TONING EXERCISES
FOR THE MOTHER TO BE**



Pilates for Pregnancy
Michael King and Yolande Green
**Mitchell Beazley ISBN 1
84000 540 8**

Michael King is a director of the Pilates Institute and Yolande Green is the tutor responsible for the Institute's ante and postnatal training module.

I have had the advantage of having met both of them and have been impressed by their professional approach to their subject. I use this book frequently as I find the photos and explanations clear and easy to follow, especially for the breathing technique, which is something that many mothers seem to find hard, particularly in pregnancy. I like the modifications given for all the exercises according to different stages of pregnancy and ability level.

The book contains two charts to help mothers decide which level of each exercise to choose, according to experience, ability and pregnancy trimester or postnatal condition. I found these confusing at first, however after a bit of study all became clear - but I did need to persevere to work it out! The warm up routine is followed by 13 suggested exercises for pregnancy and 12 suggested exercises for the postnatal period, some of which are duplicated, but with levels for progression.

The warm up routine is mainly standing and although there are check boxes to the side giving general advice, there is no specific warning against standing for too long in one position in pregnancy in case of fainting (postural hypotension). The pregnancy exercises have good ideas for modifications, such as using a folded towel and a warning to roll over to the side if the mother should start to feel dizzy when lying on the back.

Supine Hypotensive syndrome

Supine Hypotensive syndrome is covered in detail.....

is covered in detail in the theory explanation at the start of the book and the suggestion is that up to 5 minutes can be tolerated if the mother is comfortable and does not feel dizzy or faint. 7 out of the 13 suggested pregnancy exercises do not require the supine position, although of these, 3 (the Push Up, the Plank and the

Spine Twist) are advised against in the last part of pregnancy for beginner level. A mother using this book would have some choice if she could not lie on her back at all. My only reservation is that mothers are advised that "if symptoms (of dizziness or faintness) continue contact your doctor", implying that difficulty with lying on the back is in some way abnormal, and ignoring the role of the midwife who is normally the main health care provider in pregnancy.

I am disappointed that the Side Kick does not suggest how to cope with hip and/or "bump" discomfort when side lying in the later part of pregnancy, which can be a very real problem for some mothers. My other small concern is that one photo of the Push Up shows the model supporting herself on her knees with her feet raised from the floor. I have never liked this idea for anatomical and mechanical reasons, and in fact had a nasty moment once with a pregnant mother who ignored my teaching point to keep the feet on the floor and pitched forward - fortunately her nose and pride, not her baby, was the injured party!

The postnatal exercises include 3 (The Plank/Leg Pull Prone, Rolling Back and the Side Bend) which would not necessarily be my choice for the immediately postnatal mother. The Side Bend and the Plank in particular are difficult for individuals to set the shoulders correctly, and many women have great difficulty in

PILATES FOR PREGNANCY

(continued)

supporting their own weight in these types of positions, particularly at a time when the shoulder girdle is vulnerable. However the other suggested exercises are well explained - again with good photos and would be easy for a mother to do at home by herself.

The theory section is generally clear and comprehensive, including contra-indications to exercise in pregnancy. Although the advice "be careful not to raise your heart rate too high" is too vague to be of much use, and certainly not relevant to Pilates!

Posture in pregnancy and changes to joints and ligaments are explained clearly with the aid of photos and diagrams. The possibility of separation of the Symphysis Pubis joint is also covered, which I find encouraging as this condition is all too often ignored.

The Postnatal Rec Check is fully explained.....

The Postnatal "Rec Check" is also well explained, with the suggestion that mothers should consult their GP (pity no mention of a specialist physiotherapist) if they feel that the gap is not closing and a warning about starting "sit-up" style exercises too soon.

The benefits and 8 basic principles of Pilates are covered in detail, with specific sections on neutral spine (good, clear photos), breathing,

concentration and relaxation including some brief visualisation ideas. Unfortunately I feel that the Pelvic Floor section is incomplete. Mothers are advised to pull up only the vaginal muscles rather than the whole pelvic floor area. They are also told that "the pelvic floor is most effectively worked at 30%, not 100%". Whilst this is true when executing Pilates exercises, no mention is made of the necessity of achieving a maximal hold when practising pelvic floor exercises for their own sake. The difference between the different types of muscle fibre is not explained, nor the importance of both slow hold and quick squeeze exercises. Mothers are told that the suggested pelvic floor exercises "will help you to maintain the strength and tone in your pelvic floor". I think that this is unlikely using only the exercises suggested here.

A short paragraph at the end of the pelvic floor section states that "in the third trimester you will need to learn to relax the pelvic floor as well as contract it". I imagine that in theory this is to aid the birth process, however this is not explained.

Three models are used in the pregnancy exercise photos, each at a different stage of pregnancy. The three trimesters of pregnancy are mentioned frequently throughout the book, however there is no guide as to when one ends and the next one starts.

There is the suggestion that there is a small risk of

miscarriage in the first trimester. I think it is a shame that this idea is introduced, as it may worry mothers and there is no evidence (that I am aware of) that common sense exercise at a sensible level causes miscarriage.

I think that Pilates would come under this heading and therefore a mother's risk of miscarrying would theoretically be unchanged whether she is doing Pilates or just sitting on the sofa.

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The book makes no mention at all of caesarean section. Given that the national rate is, sadly, over 20% now, I think it is unrealistic to ignore these mothers in the postnatal part. Sometimes caesarean mothers are nervous about what they can and cannot do. Therefore I think some guidance should have been included.

I would make one or two final criticisms. The postnatal model is a little too slim for my liking! And it is a great pity that no baby is shown anywhere other than a very small photo of a

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baby asleep on the front cover. But, overall I liked this book very much, mainly for the attention to detail, the clear photos and the detailed explanations.

Moira Clark

EXERCISE FOLLOWING FERTILITY TREATMENT

by Moira Clarke

Most of my work is teaching ante and postnatal exercise and Pilates. I live and work in a fairly affluent area of Kent and many mothers here seem to delay conception because of their careers. The average age of the pregnant woman in my classes is mid to late 30s.

A number of the mothers I see have received IVF or some form of fertility treatment or conception assistance. A quick count of my records of attendees at just one my classes over a 2 year period tells me that I have seen a total of 158 mums in that class, of which 8 (5%) declared receiving some sort of conception assistance. All 8 had normal, healthy pregnancies, including one set of twins! These women are, in the main, fit and healthy and usually already exercising in some form or other and, in theory (although very often fatigue and sickness temporarily halt their initial enthusiasm), they wish to continue. Research, in particular James F Clapp, is showing, more and more, the physical and mental benefits of regular weight bearing exercise in the healthy pregnant woman. James Clapp's work has also shown no link between a healthy woman continuing her normal, usual exercise routine and increase of incidence of miscarriage. He

also states that "beginning an exercise programme at this time is unstudied but it appears that it should be safe as long as the energy expended is limited" - within the woman's own limitations.

Certain types of exercise are not advised in pregnancy. Activities involving a high risk of falling or trauma to the abdomen, scuba diving or exertion at altitude (American College of Obstetricians and Gynecologists 2003). Certain conditions would also contraindicate a raised activity level or require extra care eg repetitive miscarriage (over 3), bleeding, premature labour, incompetent cervix, multiple pregnancy and so on. Because many women find the

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first three months or so quite hard in terms of nausea and increased fatigue I find their activity level, quite naturally, drops off. Even though they start with the best of intentions, once they lose the habit of regular exercise, it can be quite hard to encourage them to carry on at their own pace, or resume later. In my experience, many women who do carry on feel a lot better about themselves, tend to have better control over their weight, have a better birth experience and a quicker postnatal recovery. The beginning of pregnancy can be a time of great uncertainty for all women, particularly for first time mothers and women who are pregnant after

possibly a long and traumatic (and expensive) process. They look for reassurance that by continuing their usual exercise routine they are doing the "right" thing for themselves and their unborn child.

Myth and anecdote are rife - suddenly everyone is an expert, and very little that I generally hear to do with pregnancy and exercise, from lay and health professional alike, seems to be based on up to date research. Part of the problem is that research in this field is limited and not easily available.

James F Clapp seems to be the leader in this field and, as previously stated, his work seems to be showing positive results for the exercising mother.

So - my problem has been to try to reassure the mums that I see, to encourage them to continue something which they enjoy, which will benefit them and their baby in the short and long term, and to make sure that the activity chosen is safe and effective within individual limitations. I always try to ensure that the information that I offer is based on up to date, accurate research - and trying not to show my frustration when a mother is offered advice from elsewhere which seems to come more from the mythical and anecdotal branch of the information tree than the truly relevant research based twig! Mothers, quite naturally, become confused and anxious when presented with conflicting points of view. The end result is sometimes that they choose to do nothing (the safest option from their point

EXERCISE FOLLOWING FERTILITY TREATMENT (continued)

of view), put on too much weight, and develop postural and joint weakness and imbalances which do not serve them well postnatally, for future pregnancies and in later life. The IVF mums that I see seem to fall into two categories - the ones who have been told "carry on with life as normal" and the ones who have been told "be careful, take it easy".

In my experience, neither behaviour seems to affect the outcome - but maybe I only see the more confident mums? Which advice is right? So began my search for information about exercise following fertility treatment. If James Clapp's studies are to be believed, continuing an exercise programme (at a sensible level within individual limitations) does not increase the risk of miscarriage. Difficulty conceiving is not necessarily the same as difficulty in maintaining a pregnancy. Therefore, if the problem lies only with conception then once a healthy pregnancy has been established the main difficulty will be with the mother's feelings of confidence and emotional comfort with activity. If the problem includes difficulty with maintaining a pregnancy, then clearly this requires individual assessment and care.

If a multiple pregnancy results, then this too, requires special care on an individual basis. I have had mums of twins in my classes who have delivered early, either planned or spontaneous, or gone almost full term. The exercises and intensities have had to be adapted to accommodate the mums' extra bulk and limitations of movement, but this is no different from any other hugely pregnant woman. In my experience, there has never been any indication or suggestion that certain activities or exercise in general has had any connection with the birth of twins before their theoretical due date. The December 2003 issue of MIDIRS Midwifery Digest has an article on early pregnancy loss (EPL) following assisted reproductive technology treatment. This concludes that risk factors increasing EPL are

**..risk factors ...are
smoking and poor quality
embryos....**

smoking and poor quality embryos. Other factors studied included age and obesity, but not exercise. A healthy, balanced, lifestyle surely, can only favour a mother's physical and emotional well being at a time when she is likely to feel under confident and anxious.

To try to back up my gut feeling I went in search of some research based facts. I mailed 5 organisations asking for any help or information they could give me. These were :

- The National Infertility Support Network.
- The Miscarriage Association The Royal College of Obs and Gyns.
- The National Fertility Association.
- The British Fertility Society.

All replied. Only one - the British Fertility Society - were able to give me any information at all. The Royal College of Obs and Gyns told me that they are producing guidelines on exercise in pregnancy. They, however, did not give me a date for publication and The National Infertility Support Network very sweetly asked me if 'I could let them know if I found anything out!'

The Secretary of the British Fertility Society, who works in the field of reproductive medicine, advised me as follows: "There is no evidence base for advising one thing or another. My own view is to advise patients to continue what they themselves feel comfortable doing and not place any restrictions".

An exception to this advice would be recurrent early pregnancy loss which is felt to be a case for reducing exercise to non impact. This would be the general advice for any pregnancy where there was a history of early miscarriage. In the meantime I continue to encourage all mums to enjoy their pregnancy, however it started, in the knowledge and belief that the individual benefits are there to be had.

Moiria Clark

MY OWN JOURNEY by Deirdre Chandler

On Sunday 14th March I attended the **Sue Woodd workshop in Cricklewood** on "Harnessing the Power of the Mind." We had an exhilarating day, and I drove home feeling refreshed & inspired. When Meg then emailed me a couple of days later, and asked me to write up the workshop, I was delighted to accept the offer. Although I set aside some time on the Friday afternoon of that week, I ended up having some extra work from one of my other jobs. That evening I wanted to start on the article, but my mind could not settle. I was incredibly tired, so thought an early start might help. Sleep eluded me as I thought about all the things I had to do. The following morning started badly, I rose early, but had a dull ache in my head. From previous experience, I know that feeling is going to spell bad news. Sure enough, having prepared a slow cooker lunch before breakfast, taught a French lesson & done the dance class pick-up, I was only fit to crawl into my bed. By noon, I had a full blown migraine, and there was nothing I could do about it! Why should all this personal detail be relevant to writing up the day? It is because this is a sign that my life is out of balance. That was one of reasons the Sue Woodd workshop attracted me. As a starter for the day, Sue asked everyone why they had

come. A few of the participants, like Sue & Meg, had met on Monica Linford's Ch'i Ball training the previous summer. Others had a knowledge of various alternative therapies. The rest of us came because we wanted to know how to find some "off-duty" time within our lives, how to focus easily on one thing at a time, and how to gain practical ways of bringing ourselves back to our true selves. I fall into the latter category, thus can only report back from the view point of someone who knows very little about alternative therapies. For those who attended, please bear with me if I don't relate the activities in the order in which we did them.

Sue gave us a huge amount of theoretical and practical knowledge

Sue gave us a huge amount of theoretical and practical knowledge, which spanned the earth's magnetic field, the conscious and unconscious mind, Yin & Yang, the art of oriental face reading, and the five elements (fire, soil/earth, metal, water & wood) which occur in traditional Chinese medicine. I have chosen to describe two of the practical exercises we did, which I found very beneficial.

One physical exercise we did was shaking. Stand with your feet hip with apart, let the soles of the feet spread to support your weight. Keep the spine in a long neutral position, pull the shoulders down from the ears, keep the chest open

and allow the shoulder blades to drop down at the back. Close your eyes. When you feel ready, instigate a small, relaxed, rhythmic, vertical bouncing movement throughout the whole body. Imagine that energy is gradually coming up through the floor into the body. It passes through the shins, calves, knee joints, thighs, pelvis, abdomen, ribcage and the shoulder girdle. It then travels down the upper arms, past the elbow joints, down the lower arms into the hands, reaching the tips of each finger one by one. It then loops back up the arms along the shoulder girdle, up the back of the neck, into the back of the head, over the top of the head and gently opens upwards & outwards across the face from the centre line, to the cheeks and ears. (N.B. These are not the words Sue used.) Although I did not write

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up the exercise, what has remained with me is the amazing feeling of calm I experienced, when we stopped the bouncing and opened our eyes. My feet felt deeply connected to the floor, my breathing felt as if it was deep in my abdomen and my chest, neck and face felt free of tension.

Throughout the day, Sue emphasised that she did not want us to take copious notes, but to feel/ experience what she was saying. At one point we did some T'ai Chi Ch'uan. Again

I did not note down the movements, but one part consisted of gathering up unwanted energy/ feelings and throwing them away from the body.

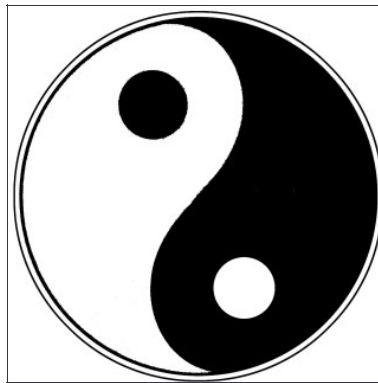
Again, this is only a partial memory of how the exercise went.

Stand with the feet apart in a wide stable position. Keep the knees bent. The back is straight, but relaxed, the pelvis slightly lower than in normal standing. As you inhale as slowly as possible, draw the hands up just in front of the body, softly bending the elbows as you do so. When the hands are level with the chest, turn the palms outwards, and with a short sharp exhalation, fling the fingers open as if throwing any unwanted energy/ thoughts away from you. This simple exercise has a real cleansing effect. The latter really surprised me. I did a little bit of Tai Chi years ago, in my late twenties, and found it to be a very calming flowing form of exercise. At that point I didn't manage to harness my energies into the exercise, so I didn't pursue it. Now at a different stage of my life, I definitely need a calm form of exercise, but am delighted that Tai Chi may also encompass a less sedate side, for the venting of pent up feelings.

To finish the day we tried out some more exercises for the mind, using the Sylva Mind Control Method. These took me into such a relaxed state that I fell asleep & felt myself falling off my chair

twice. We didn't have time for questions at the end, but if we had, I would have asked Sue if it's all right to fall asleep when trying out these exercises, or do we need to stay more in control of our minds?

Only two days before the workshop, I had admitted to a colleague at work that I sometimes found it very hard



to keep my eyes open when reading/ marking in the afternoons. She replied in amazement, "Oh, how strange, that has never happened to me." Am I the odd one out?... Possibly, yet in the past two months I have listened to two radio programmes discussing sleep. The first mentioned a sleep clinic which had been set up at the Radcliffe Infirmary in Oxford. It was a responding to a need of growing numbers of the population who experience difficulties with sleeping. Their premise was that most adults require about 7-8 hours of sleep a night. They suggested that we give sleep a high priority rating in our lives. Interestingly the tools they used for helping people achieve a better night's sleep are not unlike those, which are aired during my

postnatal discussion sessions on this subject. The other radio programme was questioning whether we as a society still felt "time-poor." One of the interviewees was very clear about us respecting our natural energy rhythms. He maintained that we need between 7 & 8 hours sleep each night. He also said that we all have our own body clocks, and the best thing we can do for ourselves (whether we are larks or owls) is to try and synchronise as closely as we possibly can with our own natural body clocks. We might have a 24/7 society, but it can be detrimental to our long-term health if we try & participate in it too fully.

Much of what I gained from spending the day with Sue Woodd was about taking time away from the pressures to lead 24/7 lives. She was encouraging us, perhaps two or three times a day, to spend 5 - 15 minutes slowing down the rate of our brain waves and to reach the alpha state. It is only from this deeper state that we can leave the ego-mind and tap into our inner wisdom. This is the state from which we can really start to examine our patterns of behaviour, and if necessary change them for new ones.

That is my challenge over the next few months. I need to use the tools which Sue generously shared with us, to help me ensure that regular migraines are a thing of the past.

Thank you, Sue!

**THE COMPLETE
GUIDE TO
POSTNATAL FITNESS**

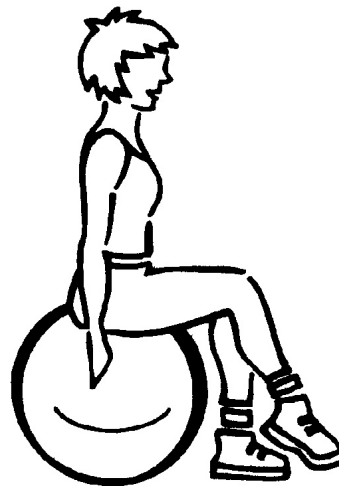


**The Complete Guide
to Postnatal Fitness
by Judy DiFiore
2nd edition**

I am delighted this book has been written and then re written. It is even more in-depth and comprehensive than the first edition and there is no doubt that this edition has been researched and referenced to a high standard. The diagrams illustrating the exercises throughout the book are first class.

The book is divided into three sections - Part One - The Implications of Pregnancy and Delivery for Exercise, with chapters on Structure and Alignment, The Abdominal Muscles including specific exercise for this muscle group, the Pelvic Floor, explanations, terminology, exercises, the Breasts and Postnatal Complications. Part Two, All

about Exercise includes chapters on Physical Fitness, Preparing to Exercise, Core Stability Training including work with a foam roller (new to me) and stability ball, selected postnatal exercises again an innovative and interesting section, different ways of achieving Cardiovascular Training and their suitability postnatally, Resistance Training, Group Exercise sessions, Water workouts and Relaxation. Part Three Teaching Strategies includes a chapter on planning a postnatal exercise session and teaching and evaluating such sessions, very valuable for a trainee teacher.



Against every exercise shown, and there must be nearly 150 diagrams, there is a detailed explanation about the purpose, the preparation, the action, technique tips, cautions and progression for each one. This is a comprehensive, detailed and, in my opinion, indispensable book for any teacher of exercise postnatal women whether in a 1 to 1 or group setting.

What is more Judy alerts us to the information that an exercise that was previously considered to be appropriate in the early postnatal period i.e. up to 6 weeks postnatal, and is not now considered safe to use. This has been alerted by The Association of Chartered Physiotherapists in Women's Health who recommends that all fours kneeling position should be postponed until six weeks after delivery. Taking this on board is crucial in our effort to keep up to date with the latest research and has implications for every teacher, whether yoga, pilates, body control, chi pilates, exercise to music or other basis for exercise training. All exercises need to be reviewed with this information in mind.

So, a big 'Yes!' This book should be on your desk, shelf or backpack as an inspiration for correct technique, latest research findings and motivational teaching. For the price of £14.99 this authoritative book is a tutorial and study day all in one! Meg.

DON'T FORGET DATES FOR YOUR DIARY:-
Weekend Workshop on Pilates Ante and Postnatal on Sat/Sun 26th and 27th June 2004 with Judy DiFiore

Stability Ball and PNEX with Judy DiFiore and Moira Clark on Sunday 18th September 2004

Sacroiliac Joint Instability With Lucy Townsend and Sarah Fishburn in November, date to be finalised. Venue Didcot