

For pregnant women, back pain during pregnancy is not a trivial matter. If not addressed, it can have a really negative impact on your daily lifestyle, from possibly causing time off work to making your delivery more difficult. Not to mention added stress or anxiety and general lack of enjoyment during this exciting time.

Back pain in the course of your pregnancy can create problems that may continue for an extended period after delivery. This won't be helped by bending, lifting and carrying your precious new bundle! So addressing it as best you can, as quickly as possible is crucial.

Lower back pain in pregnancy that lasts a long time (several weeks or months) is a predictor for postpartum back pain (pain after birth). For this reason, pregnant women are encouraged to seek appropriate back pain treatment during pregnancy. Likewise, any postpartum pain that lasts longer than 6 to 8 weeks should be treated in order to avoid chronic back pain or recurring back problems following pregnancy.

TYPES OF BACK PAIN DURING PREGNANCY

Back pain in pregnancy is very common, but should be avoided. It is estimated that between 50 and 80% of women experience some form of back pain during pregnancy. Pain can range from mild pain associated with specific activities to acute back pain that can become chronic back pain.

Studies show that lower back pain in pregnancy usually occurs between the 5th and 7th month of being pregnant. In some cases, pregnancy pain in the lower back can begin as early as 8 to 12 weeks after becoming pregnant.

Women with pre-existing lower back problems are at higher risk for back pain, and their back pain can occur earlier in the pregnancy.

There are two common types of back pain in pregnancy:

- lumbar, or lower back pain
- posterior pelvic pain.

For obvious reasons it is useful to know the difference between the above two types of back pain in pregnancy and labour pain, which is also felt in the back during pregnancy.

Pregnancy Back Pain

Lumbar Pain

Lower back pain or lumbar pain during pregnancy is generally located at and above the waist in the centre of the back. This lower back pain in pregnancy may or may not be concurrent with pain that radiates down your leg or into the foot. Pain that radiates into the leg or foot is known as sciatica.

In general, lumbar pain during pregnancy is similar to lower back pain experienced by non-pregnant women. This type of pain typically increases with prolonged postures, such as sitting, standing, or repetitive lifting. Tenderness may also be present in the muscles along the spine during pregnancy.

Pregnancy Pelvic Pain

Posterior pelvic pain at (in the back of the pelvis) is four times more prevalent than lumbar pain in pregnancy. It is a deep pain felt below and to the side at the waistline, and/or below the waistline on either side across the tailbone. Such pregnancy pelvic pain may be experienced on one or both sides.

Posterior pelvic pain in pregnancy can extend down into the buttock and upper portion of the posterior (back of) thighs, and does not usually extend below the knees. It can be associated with pubic pain. The pain does not quickly resolve with rest, and morning stiffness may also be present.

Posterior pelvic pain during pregnancy can

be brought on or exacerbated by the following activities:

- rolling in bed;
- climbing stairs;
- sitting and rising from a seated position (such as getting in and out of cars, bathtubs and bed);
- lifting, twisting, bending forward; and
- running and walking.

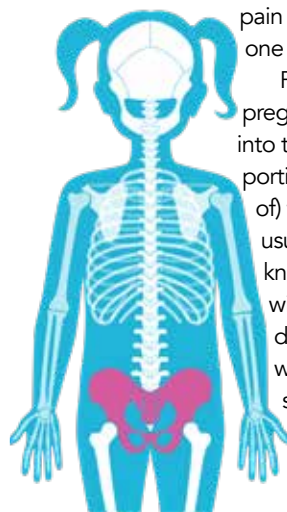
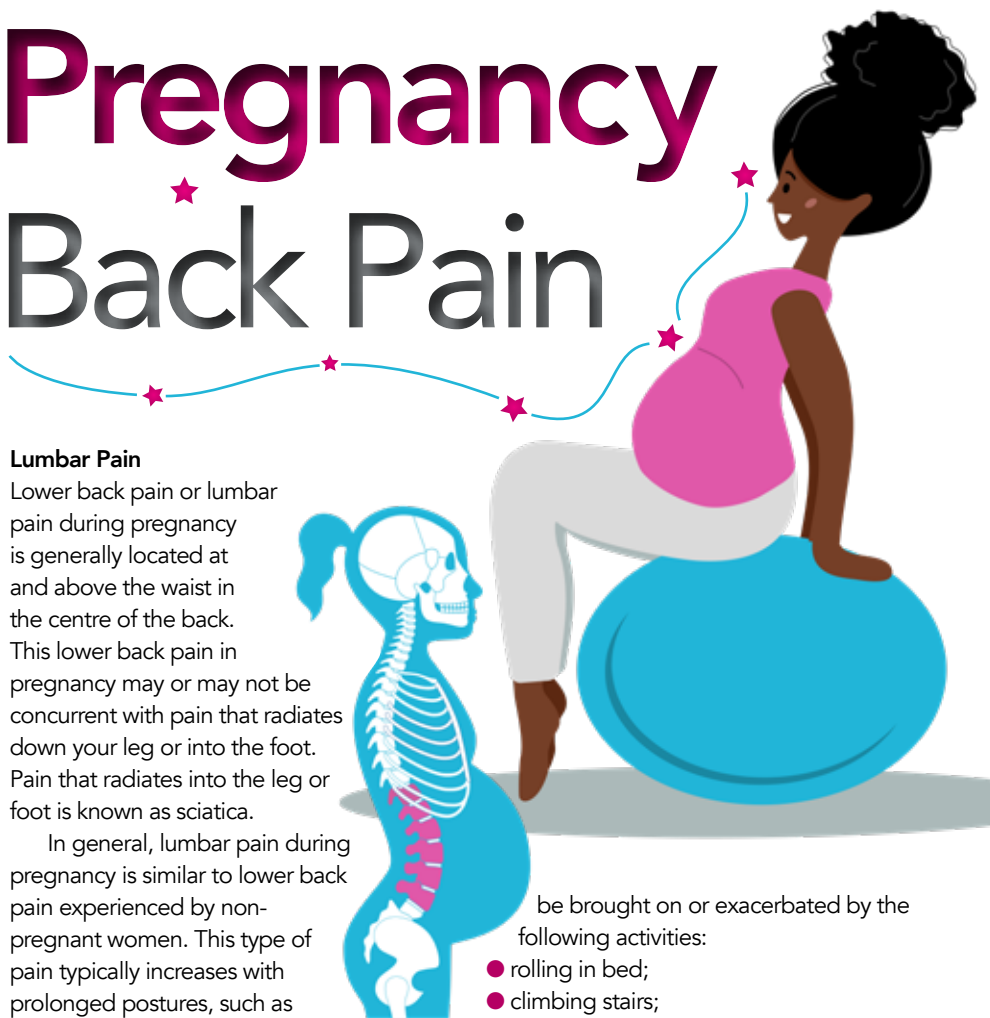
A job that involves prolonged postures at extreme ranges (such as sitting at a computer and leaning forward, or standing and leaning over a desk or workstation) increases the risk of developing pregnancy pelvic pain.

Unlike many other forms of lower back pain in pregnancy, a previous high level of fitness does not necessarily prevent posterior pelvic pain while pregnant.

Labour Pain

It is important to note that labour pain is a different type of pain. It is similar to an intense menstrual cramp and has certain characteristics. The pain:

- is persistent;
- increases in intensity and frequency over a short period of time; and
- is not affected by your level of activity (whereas back pain associated with pregnancy is often activity-induced).



☎ 020 8789 3881

✉ info@putneyclinic.co.uk

🌐 putneyclinic.co.uk



CAUSES OF BACK PAIN DURING PREGNANCY

Both pregnancy pelvic pain and lower back pain may be caused by several factors and possibly a combination of:

- ligament laxity during pregnancy altering joint alignment and loading in the lower back;
- muscle strain due to changes in the way your body is moving and the distribution of your weight/load; and/or
- weak abdominal or core muscles and pelvic girdle muscles.

Natural changes in your body during pregnancy are common causes of back pain.

- 1. Weight gain.** Pregnancy can cause you to gain as much as a quarter of your body weight, adding stress to the back and other weight-bearing structures.
- 2. Centre of gravity changes during pregnancy.** Secondary to weight gain, the weight is typically carried anterior (in the front) as well as posterior (behind). This change in your centre of gravity creates:
 - o muscular imbalances which put strain on weight-bearing structures in the body and are more problematic if superimposed on existing imbalances (such as muscle weakness and inflexibility); and
 - o muscles that fatigue more quickly than usual which in turn often results in poor posture and/or makes poor posture even worse.
- 3. Hormonal surges (relaxin and oestrogen).** Pregnancy-related hormones can cause problems by creating joint laxity, especially in the pelvis. These hormonal surges, along with the additional weight and change in centre of gravity, contribute to decreased joint support.

Activities can also cause back pain during pregnancy. Some or all of these factors can

cause pregnancy pain in the lower back or posterior pelvis especially with activities that create asymmetrical loading of the spine, pelvis, and hips. Common activities that load the spine in an uneven fashion include:

- walking and running
- rolling over in bed
- bending forward
- twisting
- lifting
- navigating stairs.

MANAGEMENT OF BACK PAIN DURING PREGNANCY

Conservative (non-surgical) treatment of back pain in pregnancy generally includes performance of appropriate exercise and use of proper body mechanics. These efforts promote and support proper posture, which is essential to avoiding unnecessary stress to supporting structures.

Often just a few visits to a physical therapist experienced in pre/postpartum treatment can be very helpful to minimise or alleviate unwanted pregnancy pain in the lower back. If more extensive back pain treatment is required, a physical therapist should perform an individual evaluation and recommend a treatment programme for you. Hands-on treatment including



massage and gentle mobilisation can offer much needed relief, and is safe provided the therapist is experienced.

Maintaining an optimal level of function throughout your pregnancy and having the least amount of discomfort are the main goals of treatment for back pain during pregnancy. Although certain activities may have triggered the pain it is crucial you remain active throughout your pregnancy to make for an easier delivery and faster recovery. Your therapist can guide you with a safe exercise programme and advise on posture and lifting techniques.

Your physical therapist can help treat your back pain through:

1. teaching you good postural habits while pregnant;
2. showing you specific body mechanics for routine activities (such as housework, job and sleeping) that will reduce the load on your back;
3. advice on sleep hygiene – how you sleep is crucial to ensuring your back and neck are well aligned, but getting enough sleep is also critical (fatigue and stress increase your experience of pain and sleep is when your body is able to heal and recover from the day);
4. a home exercise programme appropriate for your stage of pregnancy;
5. self-help techniques for pain management (hot or cold packs, stretches) and mobilisation during pregnancy;
6. hands-on treatment (such as soft tissue work, gentle mobilisation, and stabilisation exercises) as determined by evaluation by a healthcare professional.

Remember, although back pain is fairly common during pregnancy, it should definitely not be accepted as just part of the process. To help make your pregnancy as pleasant as possible and facilitate an easier delivery, back pain symptoms should always be addressed as quickly as possible and managed throughout your pregnancy.

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