

# Pelvic Girdle Pain in pregnancy



## What is Pelvic Girdle Pain?

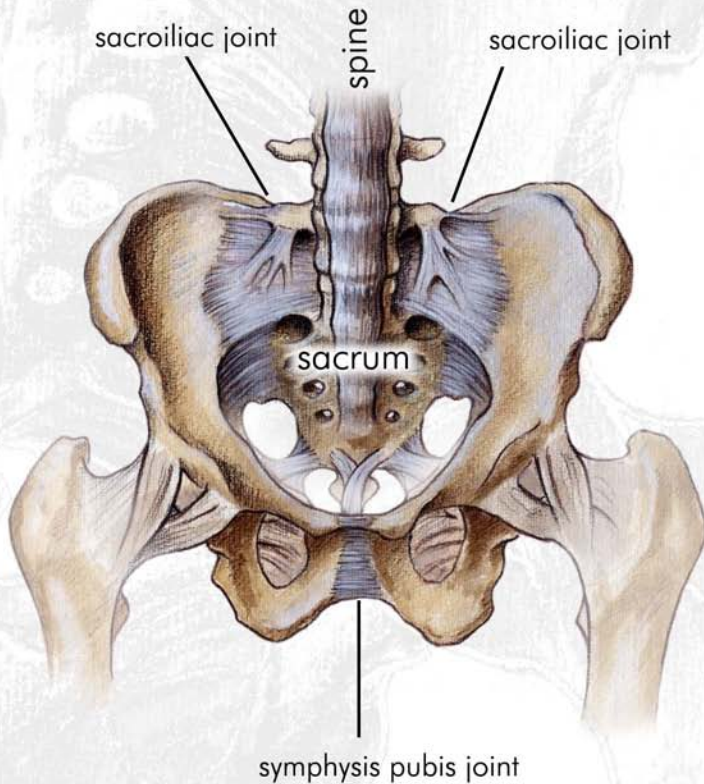
Pelvic girdle pain (PGP) is the name given to pain and discomfort in the pelvis. It is associated with pregnancy and childbirth.

It can result in mild to severe mobility problems both before and after birth.

The symptoms are often dismissed as the normal aches and pains of pregnancy whereas it is in fact a significant obstetric problem.

This condition used to be referred to as Symphysis Pubis Dysfunction.

# Anatomy of the pelvis

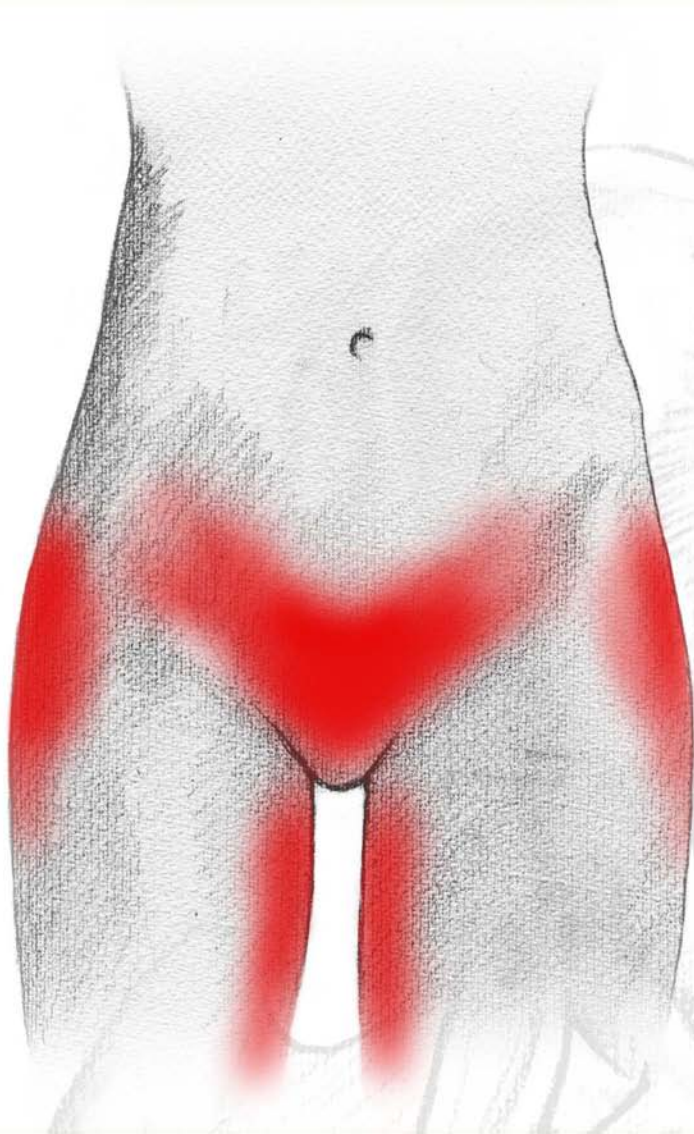


The pelvis is made up of three bones; the triangular shaped sacrum at the base of the spine, and two wide curved bones to the front and sides. These joints articulate (link up) with each other at the sacroiliac joints and the symphysis pubis joint.

The bones form a ring and work as an interdependent group, so any changes of movement at one joint will affect the function of the others. This means that if one joint becomes stiff or stuck, others will compensate by moving excessively and become painful.

The pelvis is also very dependent on the muscles around it, therefore any changes in muscle control will result in increased stress across the joints.

Normal function of the pelvis is dependent on the bones, joints, ligaments and muscles working together in balance and harmony.

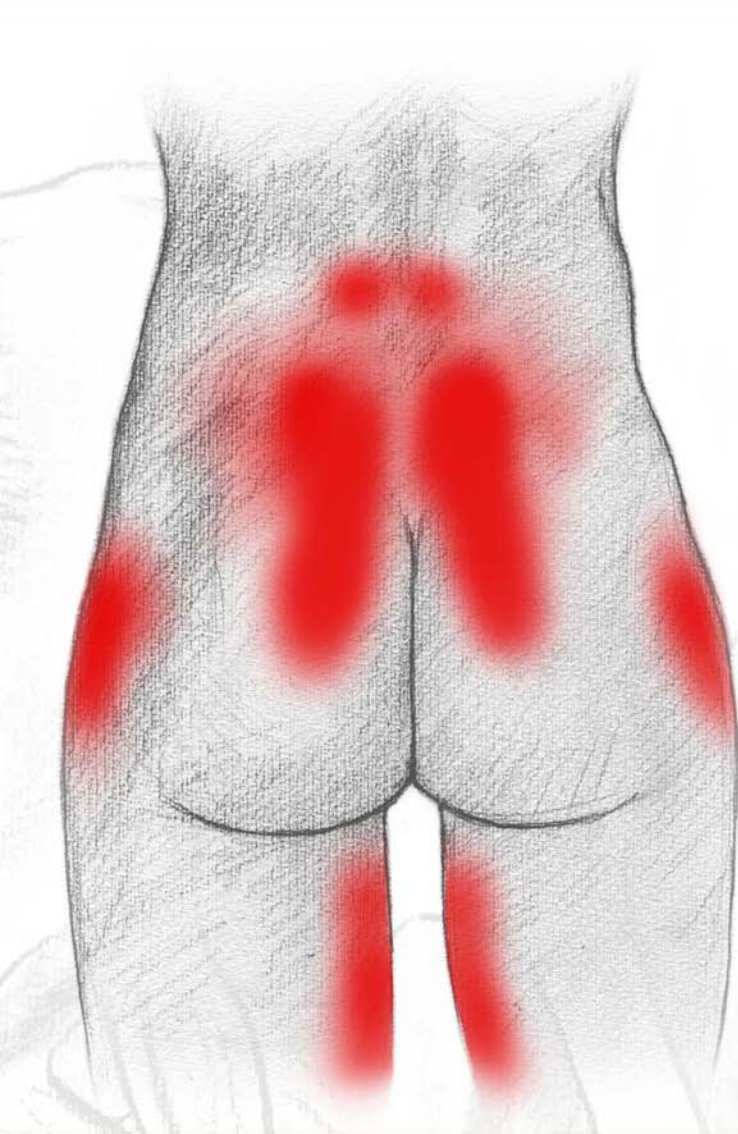


## Symptoms of PGP:

- ~ Symphysis Pubis joint pain
- ~ Ache, stiffness or pain in the lower back
- ~ Catching or sharp pain in the groin
- ~ Dragging or pain in the lower abdomen
- ~ Pain and pulling in the inner thigh or in front of the thigh
- ~ Pelvic floor pain or heaviness
- ~ Stiffness or pain in the mid back

## Mobility problems associated with PGP:

- ~ Difficulty turning in bed
- ~ Difficulty rising from sitting to standing
- ~ Difficulty using the stairs
- ~ Problems with walking ranging from discomfort to needing the use of crutches
- ~ Difficulties with the activities of daily living



## Treatment at Milltown Physiotherapy

At Milltown Physiotherapy we advise early assessment and treatment of these symptoms to provide relief and to help prevent symptoms worsening to the point of severe pain and mobility problems.

Recurrence rates are high, so if you have suffered from PGP in a previous pregnancy we recommend a full assessment as early as possible.

We have a team of chartered physiotherapists with appropriate training and a special interest in treating women with PGP. Our therapists take a full medical history and conduct a thorough assessment of the spine and pelvis to ascertain why the symptoms of PGP are developing.

We formulate a treatment plan specific to the individual's needs. We provide 'hands-on' manual treatments to realign the pelvic and spinal joints, release tight muscles and facilitate weak muscles.

We prescribe a specific home exercise programme to achieve optimal control of the pelvic joints.

We give advice on how to best manage your PGP. This advice includes information on back care, lifting, suggested positions for labour and birth, looking after your baby and toddler, and general advice on the 'dos and don'ts' of a pregnancy and birth with PGP. We teach ante- and post-natal Pilates to improve posture, joint awareness and strength.

This often debilitating condition can be managed effectively during and after pregnancy. Most patients report symptomatic relief and improved function.

All treatments and exercises are safe and appropriate for a pregnant mother and her developing baby at all stages of pregnancy.

Recommended websites and contact details:

Pelvic Partnership - [www.pelvicpartnership.org.uk](http://www.pelvicpartnership.org.uk)  
Tel: 0044 1235 820921

Association of Chartered Physiotherapists in Women's Health - [www.acpwh.org.uk](http://www.acpwh.org.uk)

Terms for PGP commonly used:

SPD (symphysis pubis dysfunction)  
This was commonly used to describe pelvic girdle pain but it now goes under the umbrella term of PGP.

SYMPHYSIOLISIS  
Sometimes used to describe pain around the pubic bone at the front of the pelvis.

OSTEITIS PUBIS  
This is inflammation of the pubic bone which needs to be diagnosed using X-Ray and MRI.

DIASTASIS SYMPHYSIS PUBIS  
Separation at the pubic joint. This is diagnosed using X-Ray.

PGP is caused when this system becomes imbalanced. This can be due to the growing baby, hormonal changes making the ligaments lax, or changes in posture associated with pregnancy.

These changes can alter the positions of the sacroiliac and symphysis pubis joints resulting in pelvic instability.

The muscles that control these joints may become tight and painful while other muscle groups can become weak and inhibited.

These joint and muscle changes can result in varying degrees of pelvic girdle pain.

In some cases the condition can result from trauma during the pregnancy (fall or knock) or from the birth itself.

The pain can remain static or can worsen throughout the pregnancy and in some rare cases result in severe mobility problems.

Hours of opening  
Monday - Friday  
7.30am - 8pm

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