

MY PERINEUM, WHAT ABOUT AFTER THE BIRTH THEN?

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This is where perineal rehabilitation begins because the muscles have been so distended that it is advisable to reappropriate them. Even if you have given birth to a small baby, even if you have not had an episiotomy or tear, even if you have given birth by caesarean section, it is advisable to re-educate your pelvic floor. The mere fact of pregnancy and the hormonal impregnation associated with it has an influence on the relaxation of the perineal muscles.

That said, the more the integrity of the perineum is respected, the shorter the rehabilitation will be. It has been shown that the earlier rehabilitation is undertaken, the better the results. In addition, pelvic floor muscle contraction exercises promote uterine involution, have a beneficial effect on intestinal peristalsis, proper bladder function and increase local circulation (thus promoting the regression of hemorrhoids and the healing of cesarean section or episiotomy).

According to Ayurvedic medicine, the ability to control contraction and perineal relaxation through appropriate exercises also promotes the concentration of vital energies in the base of the body like a good home fire in a house. When the base is sufficiently toned, the rise of this energy in the spinal cord to the brain increases in the person, vitality, concentration, memory, endurance, sexual strength, joy, health and creativity.

At first, limit yourself to a simple

contraction of the perineum for a few seconds.

In the following days you will be able to resume the exercises 1, 2 and 3 that you were already doing during the prenatal period (see the previous article on the prenatal period)

At the beginning and for a few weeks, (depending on the condition of your perineum, the time of expulsion, the cranial perimeter of your baby...) the exercises are done in positions that free the perineum from gravity and the weight of the organs.

- Dorsal layer
- Lying on the side
- On all fours
- Lying on your back with your feet against the wall
- Sitting, forearm resting on thighs
- These exercises should under no circumstances be painful or tiring.

At first, you may feel like you're not contracting anything at all, but persevere and you'll see it evolve very quickly.

The ideal (and the speed of rehabilitation will depend on it) is to repeat these exercises several times a day. A good way to think about it is to do it after each feeding.

And at all times, what is true and good before the birth, is the same after the birth:

LOCK YOUR PERINEUM BEFORE ANY EFFORT.

The abdominal rehabilitation phase begins later (when the perineum has regained its effectiveness, strength, tone); usually 6 to 8 weeks after delivery. It will follow this sequence: prolonged exhalation, accompanied by contraction of the pelvic floor, pelvic tilt and deep transverse contraction (just above the pubis). The relaxation is done on inspiration.

For prevention, classes are usually given collectively, in the presence of the babies and are an opportunity, when you feel ready, to meet other new mothers; they therefore allow you to take care of yourself both physically and morally.

And be aware that in more problematic situations (urinary incontinence, significant tearing of the pelvic floor during childbirth, rectocele, bladder descent...) there are now different specialized individual follow-up. Check the competence of the people who offer them; because a poorly guided post-natal activity can create more damage than benefit.

It is always advisable to check the mobility and integrity of your pelvis at the very beginning of perineal rehabilitation, which can fix or even aggravate pelvic disharmony.

Courage and good luck. May your daughters and granddaughters benefit from your knowledge.