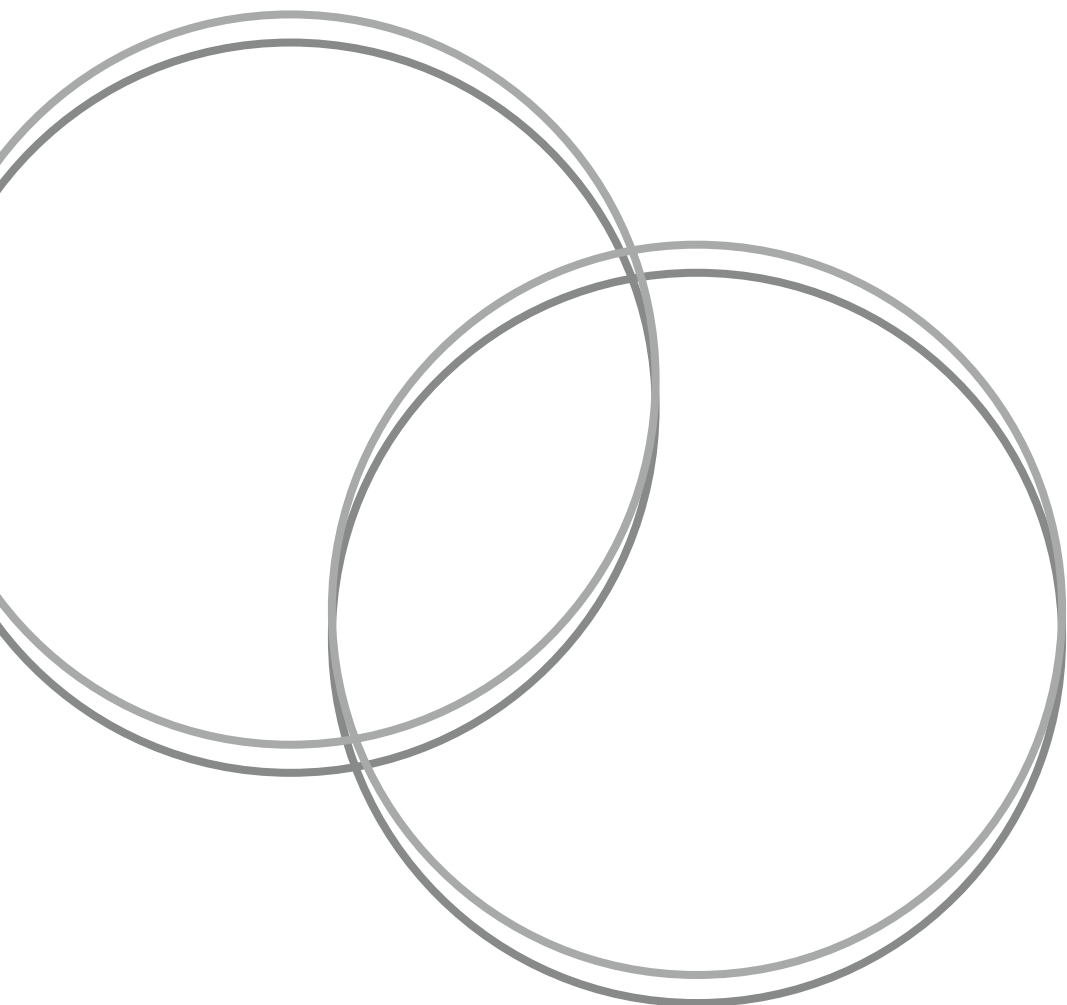




Oxford University Hospitals  
NHS Foundation Trust

# Returning to exercise and sport after childbirth

Information for patients



**The purpose of this leaflet is to provide guidance for a safe return to exercise following pregnancy and/or birth.** This may include those who have engaged in physical activity prior to/during pregnancy, or those who wish to introduce physical activity postnatally.

We understand that it can be difficult to find trustworthy information about when you are able to safely return to exercise postnatally. In this leaflet, we hope to provide you with some guidance on returning to exercise and suggestions on how to ensure that you do so safely.

This is only a guide. Your return to exercise will be an individual journey depending on factors such as: your level of activity prior to pregnancy, your pregnancy and any associated complications, your mode of birth, and your postnatal recovery. Your return to exercise should therefore be guided by these factors and by how you feel on a day-to-day basis.

### **0-2 weeks after birth:**

- Pelvic floor muscle exercises.
- Basic core exercises.
- Walking – increasing distance and speed incrementally as your body feels comfortable.

### **2-4 weeks after birth:**

- Progress your pelvic floor muscle exercises.
- Progress your core exercises.
- Introduce body weight exercises (such as squats, lunges, bridging etc.) or start some gentle Pilates or Yoga based exercises at home. Post-natal Pilates and Yoga classes may prefer you to be 6 weeks post-birth before starting.

### **4-6 weeks after birth:**

- Continue to progress your exercise duration / intensity from previous weeks.
- Introduce low-impact exercises, such as the static bike and / or cross trainer.

### **6-8 weeks after birth:**

- If you feel comfortable, you can begin some scar mobilisation (gentle massage) of any scars that you may have from birth – caesarean scars, episiotomy / tear scars.
- Increase the speed and intensity of walking.
- Increase the duration / intensity of your low-impact exercise.
- Graded implementation of resistance into your body weight exercises.

### **8-12 weeks after birth:**

- Safe to introduce swimming if any open wounds have healed appropriately.
- Safe to introduce more intense static cycling, such as spinning if you feel comfortable sitting on a bike saddle.

### **12+ weeks after birth:**

- Graded return to running and other impact exercise.

Our core exercise videos may be of use to you. These include gentle core exercises which are safe to begin from about 2 weeks after birth, depending on how you feel. None of these exercises should cause pain or discomfort, so please ease off or stop any exercises that do.

You can access the videos via YouTube by searching for '**OUH NHS abdominal strength exercises**'. There are two videos – level 1 and level 2. Please start with the level 1 exercises and only progress onto the level 2 exercises once you are finding these easy.

## **Returning to running or other impact exercise postnatally**

Impact exercise refers to sports or exercise that put stress through your body in a more intensive way. These include activities such as: running, jumping, hopping, skipping etc.

Running and other impact sports are great forms of cardiovascular exercise and can be excellent for aiding your physical and mental health. However, it is important to return to these activities with care after pregnancy and birth, and at the right time for your body. This will help reduce the risk of both injuries and developing pelvic floor symptoms.

We would not suggest returning to running or impact sports until at least 12 weeks postnatally. It is important to note that this is a rough guideline and not a target - some women will need to wait longer than 12 weeks before they are able to safely return to running or impact sports.

When you feel ready to consider a return to running or impact activity, we want to ensure that your body is able to cope with the demands of impact. There are a number of exercises that you can practice to test whether your body is ready. You should be able to complete each of these exercises before you consider returning to impact sports or going for your first run, without experiencing any of the symptoms listed in the second box below.

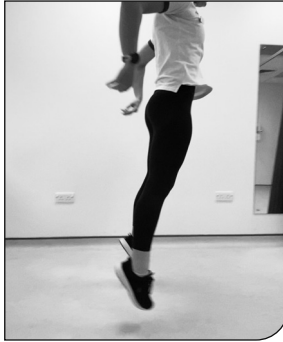
**Return to running / impact sports exercise checklist:**

- I can walk comfortably for 30 minutes.
- I can balance on one leg for >10 seconds each side.
- I can perform a single leg squat for 10 repetitions per leg.
- I can jog on the spot for 1 minute.
- I can perform a forward bound for 10 repetitions [Picture 1].
- I can perform 10 hops per leg.
- I can perform a 'running-man' for 10 repetitions on each side [Picture 2].

**You should not experience any of the following symptoms when performing any of these exercises, or any other form of exercise, such as running:**

- Urinary or faecal incontinence (loss of control or leaking with bladder or bowels).
- A heaviness or dragging sensation in the vaginal area.
- A pendular shape / doming of the abdomen.
- Pain anywhere in your body.

## Picture 1: Forward bound exercise



## Picture 2: Running-man exercise



You might find the following exercises useful in aiding your return to running and impact sports. These aim to increase the strength of the muscles in your legs which should help to avoid injury of your lower limbs. We would recommend performing these exercises regularly (3 or more times per week) for at least 2 to 3 weeks before your first run or impact sports session.

A good goal is to be able to perform 3 sets of 10 repetitions of each exercise, however you may need to gradually build up to this.

### **Single leg calf-raise.**

Standing on one leg, slowly lift your heel (rise onto your toes) and then lower back down.



### **Single leg bridge.**

Lying on your back with your knees bent, lift one leg away from the ground so that there is a 90-degree angle at the hip and knee. Slowly lift your hips off the ground as far as is comfortable.



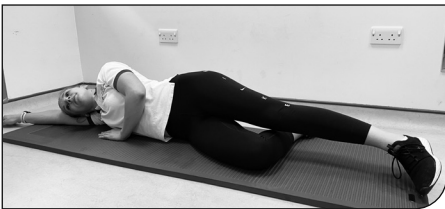
## Single leg sit-to-stand.

Sit in a chair with one leg lifted away from the ground and the other placed firmly on the ground. Lean forwards and stand up, squeezing your bottom and using just one leg to push yourself into standing.



## Side lying hip abduction.

Lie on your side, with your bottom leg bent and top leg straight; your hips should be stacked one on top of the other. Keeping your pelvis still, engage your abdominal muscles, drawing belly button to spine and lift the straight leg up to the height of your hip, and then slowly lower it back down again.





## **A graded return**

It is best to return to running or impact activity in a graded manner, increasing gradually to avoid any unwanted injuries. A great way to ensure this is by using the 'Couch to 5km' app which is NHS-approved. You can access this via mobile app stores or online using the following link: [www.nhs.uk/live-well/exercise/couch-to-5k-week-by-week/](http://www.nhs.uk/live-well/exercise/couch-to-5k-week-by-week/).

If you aren't returning to running, but are returning to other impact sports, we still advise returning with a gradual approach. This might include returning to training sessions before taking part in games or matches, and building up the length and/or intensity of these training sessions gradually. You may also find the 'Couch to 5km' program helpful if your sport includes running.

## **Other considerations**

Make sure that you consider wearing a supportive sports bra and supportive footwear when returning to exercise to reduce your risk of injury.

If you are breast-feeding or expressing, you will often find it more comfortable to exercise when your breasts aren't full. Consider planning your exercise for soon after feeding or expressing.

## Buggy running

Although buggy running is an excellent solution for exercising without a need to find child-care, it is not recommended until your baby is 6 to 9 months old. This ensures that your baby's neck and back have developed sufficiently to cope with the motion. You should only use a specific running-buggy, both for your safety as well as the safety of your child.

These buggies should have:

- A 5-point harness for baby.
- Three wheels.
- A fixed front wheel.
- Hand-operated brakes.
- A wrist strap.
- Rear-wheel suspension.
- Pneumatic tyres.

Running with a two-handed grasp on the buggy has been shown to mimic a normal running style most closely. However, running one-handed or with a 'push and chase' technique can also be effective.

## **Pelvic floor exercises**

We would highly recommend that you continue to practice your pelvic floor exercises life-long, even if you aren't experiencing any symptoms of pelvic floor dysfunction. Continue to practice both short repetitions and longer holds daily, and in varying positions to continue challenging these muscles. As one position gets easy, progress to a different position.

An example of progressively difficult positions might be: sitting -> standing -> single leg stand -> squatting -> lunging -> walking.

For more information on pelvic floor exercises, you can access our videos via YouTube by searching for '**OUH NHS pelvic floor exercises**'.

## **When to see a Pelvic Health Physiotherapist**

Should you begin to experience any of the symptoms detailed in the box on page 5 while performing any form of exercise, you should seek support from a Women's Health Physiotherapist so that we can advise you on ways to treat and manage these symptoms. We would suggest contacting your GP or midwife as a first point of call and request a referral into our service. Our service also accepts self-referrals in some cases.

**And most important of all... enjoy your return to exercise!!**

### *Reference:*

Donnelly, G., Brockwell, E. & Goom, T. (2020). *Return to running postnatal – guideline for medical, health and fitness professionals managing this population. Physiotherapy, 107(1)*, e188-189.  
<https://doi.org/10.1016/j.physio.2020.03.276>

## Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Women's and Men's Health Physiotherapy  
January 2025  
Review: January 2028  
Oxford University Hospitals NHS Foundation Trust  
[www.ouh.nhs.uk/information](http://www.ouh.nhs.uk/information)



*Making a difference across our hospitals*

[charity@ouh.nhs.uk](mailto:charity@ouh.nhs.uk) | 01865 743 444 | [hospitalcharity.co.uk](http://hospitalcharity.co.uk)

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

