

# Pelvic girdle pain related to pregnancy

## What is pelvic girdle pain?

Pelvic girdle pain is a very common condition affecting 1 in 5 pregnant people. It can be very uncomfortable but fortunately will settle after pregnancy in the vast majority of cases. There are some things you can do during pregnancy which may help and these are outlined in this information leaflet.

Pelvic girdle pain (PGP) describes pain in the joints that make up your pelvic girdle. This includes the symphysis pubis joint (SPJ) at the front and or the sacroiliac joints (SIJ) at the back. Discomfort can be felt over the pubic bone at the front, in one or both groins, across one or both sides of your lower back and occasionally into the buttock area or inner thighs.

You may also have:

- problems with walking
- pain when standing on one leg e.g. on the stairs
- difficulty moving your legs apart
- painful hip movements e.g. turning over in bed
- a grinding or clicking sensation over your pubic bone
- pain when moving from sitting to standing.

These pains can last for some weeks and even months after pregnancy. However regaining your fitness and muscle strength after pregnancy will help speed up recovery.

## Management

### Day-to-day advice

- Strike a balance between being as active as you can, and not putting too much strain on your back.
- Pace your activities to avoid flaring up your symptoms.
- Try to sit down for as many jobs as possible e.g. ironing, food preparation, dressing and undressing.
- Only lift when you have to.
- When lifting is necessary, bend your knees while keeping your back straight and gently drawing your lower tummy muscles in. Always face what you are doing and try to avoid twisting. Have your feet slightly apart to have a steadier base of support.
- To stand up from the sitting position move your bottom to the edge of the bed/chair first and have your feet slightly apart and further back.
- Keep your knees together when getting in or out of the car. Sitting on a plastic bag will enable you to swivel your legs around together more easily.
- Try different ways of turning in bed such as on all fours, by keeping your bent up knees together and squeezing your buttocks, or sitting on the edge of the bed and then lying down again by placing your pillows where your feet were.
- Roll in/out of bed: keeping your bent up knees together, roll on your side, then let your legs drop down to the floor over the side of the bed as you push your top half up with the heel of your hand in front of you. Reverse this to roll into bed.

## Postural advice

- Always sit in a well-supported chair with a cushion or rolled up hand towel in the small of your back and your feet supported on the floor. Low, soft sofas may be more uncomfortable and difficult to get out of and therefore are best avoided.
- Use extra pillows around you in the bed for comfort such as between your legs and under your bump.
- Make sure your weight is equally distributed especially in standing and when moving from sitting to standing.
- If your bump tips your pelvis forwards when standing, try clenching your buttocks and gently drawing your lower tummy muscles in while tucking your tailbone under.

## Activities to avoid that may aggravate your symptoms:

- sitting with your legs crossed or twisted to one side
- moving objects with your foot
- carrying a child on one hip
- squatting down with your legs apart
- vacuuming
- strenuous exercise.

## Pain relief

- Icepacks for up ten minutes at a time on your pubic joint, or rubbing with an ice cube for twenty to thirty seconds can help to reduce any inflammation in the joints and ease your symptoms. To make an icepack place some frozen peas or crushed ice in a plastic bag and wrap in a damp cloth. Do not eat the peas after this, but you can label the bag and reuse them once they have re-frozen.
- Heat packs over the lower back may be beneficial. It is not recommended to use heat over the pubic bones.
- Your specialist physiotherapist might recommend a support belt, crutches and/or T.N.S. (Transcutaneous Nerve Stimulation – also known as a ‘TENS’ machine) once they have examined you.
- Speak to your midwife, obstetrician or G.P about medication that is suitable in pregnancy.

## Further information

A specialist women’s health physiotherapist can offer you treatment and advise you on how to manage your symptoms. Your midwife, GP or consultant can refer you for assessment, or you can self-refer.

Further information can be found on the link below:

<https://pogp.csp.org.uk/publications/pregnancy-related-pelvic-girdle-pain-mothers-be-and-new- mothers>

[www.rcog.org.uk/globalassets/documents/patients/patient-information- leaflets/pregnancy/pi-pelvic-girdle-pain-and-pregnancy.pdf](http://www.rcog.org.uk/globalassets/documents/patients/patient-information- leaflets/pregnancy/pi-pelvic-girdle-pain-and-pregnancy.pdf)

## Contact details

Therapy Services Poole: **0300 019 2121** | Therapy Services Christchurch: **0300 019 4418**

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