

working with new moms

Postnatal clients can be very rewarding, but it's important to know their specific challenges and limitations. We asked experienced Pilates educators for their advice on safely and effectively working with them.

by Shari Berkowitz

Though there are few things in life as exciting as becoming a mother, it also comes with many challenges for the new mom, not the least of which is regaining their physical strength and form. Whether they are returning to Pilates or just starting out, it's a great opportunity to create a foundation for strength and balance of the body and mind. Pilates will help re-strengthen abdominal muscles, relieve back pain and strain and help correct imbalances from pregnancy, explains Julie Tupler, RN, a registered nurse and author of *Lose Your Mummy Tummy*.

As teachers, we must guide them with a program tailored specifically for them. This was made indelibly clear to me many years ago, when I was working at a studio in Los Angeles early in my career. The teacher/owner had encouraged one of her clients to come in two days after giving birth. The woman had just finished Footwork on the Reformer when she began hemorrhaging all over the carriage. Later, I learned that the client ended up being fine, but the teacher clearly ought to have kept her client away for a while longer. Ever since then, I've been a stickler for waiting for the body to heal and getting medical clearance before proceeding.

But it's not always clear when it's safe for postpartum clients to return to the studio. For advice on guiding our postnatal clients safely, we reached out to Pilates teachers with special expertise in dealing with this special population.

ALL NEW MOMS CAN BENEFIT

It doesn't matter if she's done Pilates before or is a first-timer. Pilates is great for every new mom.

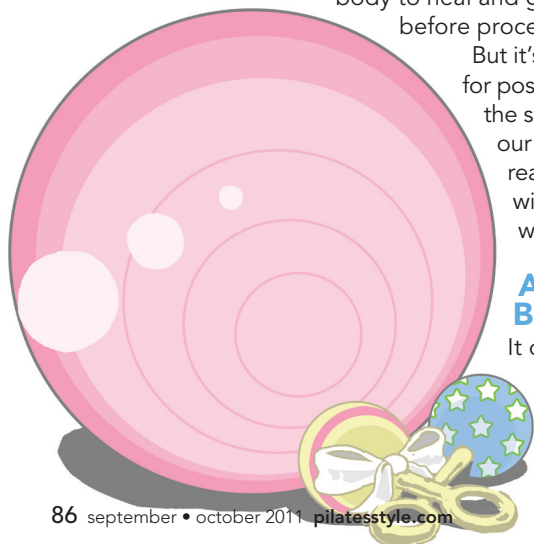
A QUESTION OF TIMING

Opinions on when a client can start or return to Pilates after giving birth vary widely. Some experts say they can start right away, other say they need to wait; however, all say they need doctor's approval and must start with a very modified routine.

The first consideration is the type of birth, as the healing times for each is different. Moms can start four to six weeks after vaginal child birth and eight to twelve weeks after C-section, says Nora Gomez-Dears, teacher trainer and owner of Atelier Pilates in Somerville, MA. "The wait period will vary based on the level of fitness prior to giving birth and the healing of tissue, both internal and external." In either case, she adds, all moms must get medical clearance before returning to Pilates.

"Generally doctors give the okay for a woman to work out after her six-week checkup," says Alana Reed, a longtime Pilates teacher in NYC. "The doctor is typically checking that the uterus has had a significant amount of time to return to its normal size."

Other experts believe new moms can begin doing very basic exercises almost immediately after delivery. "Directly after birth, she can start with pelvic floor tighteners, leg slides and other leg fundamentals and deep three-dimensional breathing," says Connie Borho, a senior level teacher trainer for Peak Pilates and owner





All new mommies can benefit from Pilates, but when they should begin practicing—and to what extent—depends on the individual.

of Balance Pilates & Yoga Centers in the Tampa Bay area. “These exercises are perfect to begin the healing process.” But she points out, “most doctors suggest that a postnatal mother wait until after the first postnatal, aftercare appointment to take part in more vigorous workouts.”

Bottom line: We must assess each person individually, be aware of complications and start slowly. Clients new to the method should probably wait until at least six weeks after giving birth to start a Pilates program.

And how often can a new mom come to Pilates? “Attending a well-balanced Pilates class two to three times per week will energize and inspire them to progress toward their fitness goals,” says Gomez-Dears.

SPECIAL ISSUES OF NEW MOMS

Our postnatal clients have many issues we need to be aware of when creating a workout, including:

UNREALISTIC EXPECTATIONS

“The challenge for teachers is that some moms are only interested in getting their pre-pregnant bodies back as quickly as possible,” says Jennifer Gianni, creator of the Fusion Pilates for Pre & Post Natal Method, DVDs and Teacher Training and owner/director of Fusion Pilates Asheville in North Carolina. “The fact that the media portrays celebrities as if they recover overnight doesn’t help. If mom exercises too hard right after delivery, there are many unpleasant consequences such as exhaustion, losing the ability to create milk because she lost weight too quickly or injuring herself.”

Talk to your clients and learn if they are expecting too much. Encourage them to eat well and exercise moderately.

Explain that while there is no instant change, it does come over time with persistence. As the teacher, your client looks to you for healthy advice.

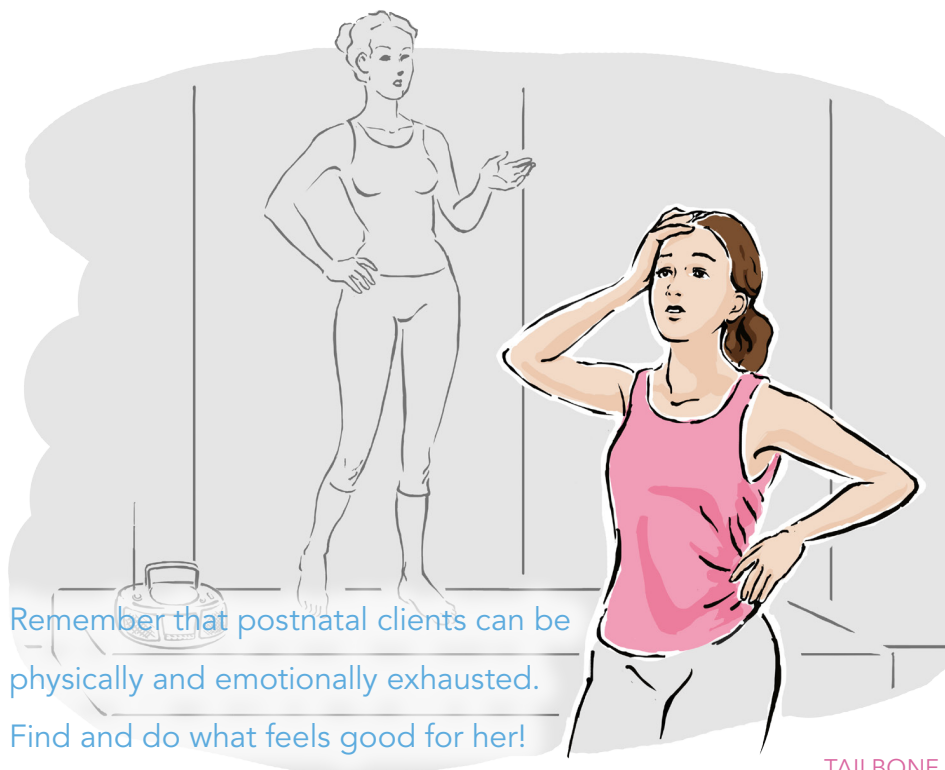
POSTPARTUM DEPRESSION

It is likely that your client will exhibit some sort of postpartum mood disorder, which can range in severity. “New moms have to be coached to be on the lookout for the symptoms of postnatal depression, a very real and very treatable condition,” Borho says.

Postpartum blues are very normal (60 to 80 percent of new mothers experience this) and last anywhere from a couple of days to a few weeks. According to the Mayo Clinic website, symptoms include mood swings, anxiety, sadness, irritability, crying, decreased concentration and trouble sleeping. Still, women with the blues can participate in regular day-to-day activities, accomplish the tasks of motherhood and even exercise.

Postpartum depression, which affects 15 to 20 percent of all new moms, is considerably more severe. The Mayo Clinic cites symptoms such as loss of appetite, insomnia, intense irritability and anger, overwhelming fatigue, lack of joy in life, difficulty bonding with the baby, withdrawal and thoughts of harming herself or the baby. Although you should encourage any client with postpartum depression to see her doctor for help, moderate exercise is part of the recommended recovery.

During sessions with moms with postpartum mood disorders, focus on continuous movement (meaning you move your client without stopping), only taking short pauses for water. Cue breath in every single exercise: That is the theme of the workout. Work a deep



Remember that postnatal clients can be physically and emotionally exhausted.

Find and do what feels good for her!

exhalation from her deepest abdominals that allows an effortless and complete inhale.

At all times, be compassionate, patient and encouraging. You're not her doctor or therapist. Instead, encourage your client to see her health care professional. But should she exhibit any signs of being a danger to herself or others, call her emergency contact and have that person come pick her up. If danger is imminent, call 911. Do not hesitate.

EXHAUSTION

Expect that your client is going to be utterly fatigued! She's not sleeping, her body is recovering, she may be feeding the baby every two hours...she's tired! "Feelings of exhaustion are at times overwhelming," says Gomez-Dears. "The teacher must create a lesson that gives them strength, stamina, gentle stretch, coordination and confidence." Be thematic in the sessions, focusing on creating an abdominal connection and breath. Start with modified basic exercises in the earlier sessions. For most women, exercises like the Half Roll-Down and rolling back feel great. Some just love to do Footwork on the Reformer. Find what feels good and do that every session.

DIASTISIS

It takes time for the abdominal wall to recover. If your client had a large diastisis (a separation of the rectus abdominus muscle that can occur during pregnancy), it will take even more time. Avoid having her roll up from the mat/floor (i.e. eliminate any crunch-like activity). Instead, have her do a Half Roll-Down with the image and effort of "knitting" the rectus abdominus back to the linea alba. You can even use Julie Tupler's "splint" technique of wrapping a scarf around the true waist and actively reeducating the abdominals during Half Roll-Down. Remember to use the small Barrel to prop

a client up and keep working to knit the muscles during exercises like the Hundred and the Abdominal Series of Five. Use your eyes! You can see if the rectus abdominus is bunching and pressing outward.

BREAST SENSITIVITY

"If a client is breast feeding, initially her breasts may be too tender to lie on her stomach," Reed says.

"Encourage clients to breast feed prior to the lesson," Gomez-Dears advises.

Until this sensitivity wanes, avoid putting pressure on her chest: Do the Swan with the small Barrel under her hips or work on all fours.

TAILBONE SORENESS

During pregnancy or labor, some women's tailbones shift or even break. This leaves bones, ligaments and muscles tender. If your client's tailbone is sore, but not broken, avoid any exercise where she curls her pelvis under her like the Roll-Up, Half Roll-Down, Teaser, Round on the Short Box, as well as any one-legged exercises (Single-Leg Circles, Single-Leg Stretch, Single Straight-Leg Stretch/Scissors) since they can pull on the tailbone unevenly. It's also wise to lighten springs on the Reformer and slow down. Once your client is pain free for two weeks, then reintroduce some of these rounding-under exercises with extra padding under her hips. If sitting on top of her sitz bones is painful, there are wedge-shaped pads, created just for broken tailbones, that may be helpful for exercises like Spine-Stretch Forward and Saw or to sit on during the day.

If your client has a broken tailbone, it will take about eight weeks to heal and then there will be continuing soreness that will take time to subside. It is wise for your client to hold off from Pilates until she heals.

PUBIC BONE SENSITIVITY

During pregnancy and labor, some clients develop sensitive pubic bones, which take time (from a few weeks to months) to heal. Check in with your client on any exercise where she is pressing her pubic bone into an apparatus, such as the Swan (on any apparatus), Splits on the Reformer and Single- and Double-Leg Kicks on the mat as well as any exercise where she has to straddle an apparatus. Gentle hugging of the midline (the heel connection to the adductors of the leg) and anything that will connect her into her pelvic floor will help her heal.

INCONTINENCE

Because of the extreme stretching and repositioning during labor, not to mention healing from an episiotomy or natural tearing, the pelvic floor can be sore and

neurologically disconnected. This can lead to a temporary or lengthy period of incontinence. While many believe that doing Kegels is the key to reconnecting, the most current studies seem to show that the supportive actions of the transverse abdominus in conjunction with Kegels are most effective for restoring the health of the pelvic floor. In addition, hugging the midline of the legs strengthens the adductor group,

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which helps stabilize the pelvis and encourages the pelvic floor to function normally.

Connecting to the transverse abdominus, our deepest abdominals, can be attained in many ways. The easiest is a deep lifting exhale in every breath, which can be done anytime, in and out of the studio.

Working on exercises like Chest Expansion on the Cadillac or Spine Stretch on the Wunda Chair encourages a strong lift. The Magic Circle leg work can be wonderful, too. Whether lying down, sitting up or standing tall, hugging a Magic Circle just above the knees or ankles will also work to engage those pelvic floor muscles.

Remember to stay within your “scope of practice.” Teach what you know of Pilates and refer your clients to pelvic floor specialists as needed.

LOOSE LIGAMENTS

The hormone relaxing, which is released during pregnancy, “loosens” soft tissue to ease delivery. New moms will still have a steady

production of relaxing for 18 months after they give birth or after they stop breast feeding, says Chrissy Romani-Ruby, PT, MPT, ATC, founder of Phi Pilates. So beware of overstretching your clients’ ligaments. Remember that each Pilates exercise ought to have an equal balance of stretching and strengthening and refrain from doing additional stretching exercises.

BACK PROBLEMS

With milk-laden breasts, holding the baby and carrying heavy car seats and diaper bags, it’s not surprising the new mom’s upper and lower back hurt. To help relieve pain, use light arm springs on the Cadillac to strengthen her upper back and shoulder girdle and balance her pectorals. When she is strong enough, do Coordination and Pulling Straps on the Reformer. Seated Pulling Straps on top of the Long Box are also effective. If her wrists feel strong, she can do tricep dips with her hands on the footbar and feet on the floor (the Reformer is behind her). A great way to end the session is with a little bit of Magic Circle Standing Arms or Arm Circles on the Wall.

RECRUITING POSTNATAL CLIENTS

Educate yourself on the physical and emotional aspects of postnatal moms and then offer up your Pilates services to them. “Your local hospital or birthing center may give their new moms folders of materials specific to new parents,” says Borho. “Put together flyers and make sure that yours are included in these folders. Put up flyers in libraries, at the park and local Gymboree classes.”

“We have also networked with doctors, mid wives and doulas in our area and find new clients by word-of-mouth,” Gianni adds.

Enjoy teaching your prenatal and postnatal clients. With your education and open communication these months of postnatal Pilates may be the best! **PS**

Checklist for Postnatal Clients:

Doctor's approval to exercise

Start at modified/basic level and advance slowly

Take new mom exhaustion and emotional need into consideration

Beware of overstretching ligaments

Take care of diastasis until it has healed

Beware of sensitive breasts, pubic bone and tailbone

Strengthen abdominals, adductors of the leg, lower and upper back

When in doubt... leave it out