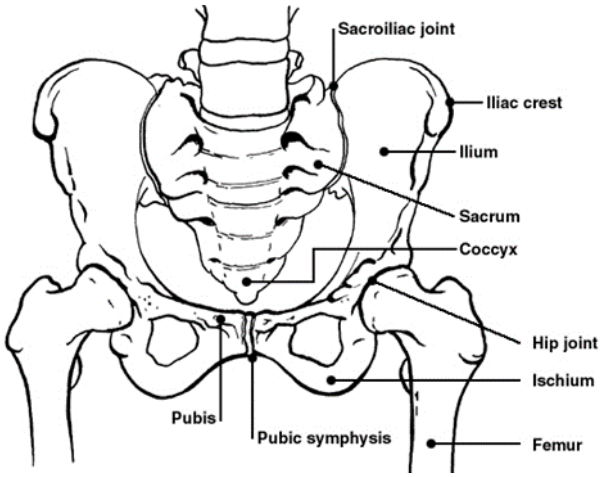
Pregnancy related pelvic girdle pain (PGP) formerly known as symphysis pubis dysfunction (SPD)

This leaflet explains what pelvic girdle pain (PGP) is and outlines exercises you can do to manage your symptoms and to reduce the problem.

Introduction

Pregnancy related pelvic girdle pain (PGP) is common. The sooner it is identified and assessed the better. Around 1 in 5 pregnant women suffer from PGP. Symptoms can be different between women and may be more severe in some women than in others. With the right treatment at an early stage during pregnancy, PGP can usually be managed well. However, in a small percentage of women, PGP not improve, and may continue after birth, particularly if left untreated.

What is PGP?



- PGP describes pain in the joints that make up your pelvic girdle; this includes the symphysis pubis joint at the front and/or the sacroiliac joint at the back.
- The discomfort is often felt over the pubic bone at the front, below your tummy, across your lower back, or in your buttock (bum cheek).
- You may also have:
  - difficulty walking;
  - pain when standing on one leg, e.g. climbing the stairs, dressing or getting in or out of the bath;
  - pain and/or difficulty moving your legs apart, e.g. getting in and out of the car;
  - clicking or grinding in the pelvic area;
  - limited or painful hip movements, e.g. turning over in bed;
  - pain during normal activities of daily living;
  - pain and difficulty during sexual intercourse.

With PGP the degree of discomfort you are feeling might vary from being intermittent and irritating to being very wearing and upsetting.

PGP management (general advice)

- Be as active as possible within your pain limits and avoid activities that make your pain worse.

- Ask for and accept help with household chores.
- Rest when you can.
- Sit down to get dressed and undressed; avoid standing on one leg.
- Wear flat, supportive shoes.
- Avoid standing to do tasks such as ironing.
- Try to keep your knees together when doing tasks such as getting in and out of the car and turning in bed, swivel round instead of parting your legs.
- Sleep in a comfortable position such as on your side with a pillow between your legs and one under your bump. If you normally prefer to lie on your back, you can prop yourself up with pillows and lie at a 45 degree angle instead.
- Try different ways of turning in bed, e.g. turning under or turning over with your knees together and squeezing your buttocks. You can also use a rolled towel around your bottom, to help bring your hips around.
- Log roll in and out of bed keeping your knees together.
- Take the stairs one at a time; try leading with your less painful leg when going up, and when going downstairs, lead with your more painful leg. OR you can go up and down the stairs sideways, again leading with your less painful leg.
- Plan your day – bring everything you need downstairs in the morning so you have everything you need.
- If you are using crutches, use a small rucksack to carry things in.
- When having sex, consider alternative positions, e.g. lying on your side or kneeling on all fours.

Do your best to avoid:

- Activities that make your pain worse
- Standing on one leg.
- Bending or twisting to lift or carry a toddler or baby.
- Crossing your legs.
- Sitting on the floor.
- Sitting twisted.
- Sitting or standing for long periods.
- Lifting heavy weights (shopping bags, wet washing, vacuum cleaners, and toddlers).
- Vacuuming.
- Carrying anything in only one hand

Labour and birth

Most women with PGP can have a normal vaginal birth. Many women worry that the pain will be worse if they have to go through labour. This is not usually the case when good care is taken to protect the pelvic joints from further strain or trauma.

Make sure you tell your midwife that you have suffered from PGP.

You can also measure how far you are able to part your legs without pain. It is important to keep within this range as much as possible, especially if you have an epidural.

If you are severely affected, you may wish to discuss the options of having a Caesarean section with your midwife or doctor.

Before the birth

Think about birthing positions that are comfortable for you. Record these in your birth plan. Consider a labour and birth in water – this allows you to move freely and change position.

During labour

Use gravity to help the baby to move downwards by staying as upright as possible such as kneeling, or on all fours. These positions can allow labour to progress and avoid further strain on your pelvis.

You should never place your feet on the midwife's or your partner's hips when pushing to deliver your baby, as it may put too much strain on your pelvic joints and may also damage your helper's back.

You may be able to lie on your side for internal examinations – ask your midwife or doctor to consider this.

After the birth

- After the birth it is important to continue to follow the advice, even if the pain has reduced, in order to avoid straining the pelvis.
- Take prescribed pain relief.
- Listen to your body and move within your pain limits.
- Accept help with caring for your baby and family.
- Gradually increase your activity as you feel able.
- Change nappies on a surface at waist height.
- Do not lift your baby too often.
- Carry your baby in front of you. You may find a sling or baby carrier helpful for this.
- Do not carry your baby on one hip.
- Kneel at the bath side rather than leaning over.
- Lower the cot-side when lifting or lowering your baby.
- Keep your baby close to you when moving them in and out of a car seat.
- If you have to carry baby in a car seat, hold it in front of you, not on your hip.
- Do your pelvic floor exercises daily.

Useful websites and contacts

Pelvic Health & Maternity Physiotherapy
Royal Berkshire Hospital
Tel: **0118 322 7811 / 7812**

- Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) https://thepogp.co.uk/patient_information/default.aspx
- Pelvic Partnership www.pelvicpartnership.org.uk Tel: 01235 820921

With help you should not become disabled during pregnancy, but if you do, the following two websites offer practical advice and support.

- Disabled parents network www.disabledparentsnetwork.org.uk
- Disability, pregnancy and parenthood international www.dppi.org.uk

Suppliers of equipment

Performance Health International Ltd: www.performancehealth.co.uk,. Tel: 03448 730 035 Pelvic Girdle Belt (deluxe maternity belt)
Boots the chemist – local
JR Butler (chemist) – 266 Oxford Rd, Reading Tel: 0118 957 2556
Redland Healthcare – 24a Portman Rd, Reading Tel: 0118 956 0800 www.redlandmobility.co.uk
Berksability – 16 Bennett Rd, Reading. Can assess for type of equipment necessary – appointment needed.
Red Cross – 90 Eastern Avenue, Reading Tel: 0118 935 8236 / 0344 871 8000 (Wheelchair, commode, bedpan etc. for hire/loan. Small items, e.g. helping hand, may be for sale).

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Pelvic Health and Maternity Physiotherapy, September 2007
Reviewed: February 2025
Next review due: February 2027