



Recovering from a Caesarean birth: Physio information

This leaflet gives you information, advice and exercises to help you recover well after having your baby by Caesarean birth. If you have any questions, please speak to the physiotherapist.

What is a Caesarean birth?

You have delivered your baby by a surgeon cutting open your tummy to take the baby out. You might have chosen this (elective Caesarean birth) or it might have happened because it was needed to keep both you and the baby safe (emergency Caesarean birth).

First few days after the birth

You will likely be a little sore to start with, and you may still have a catheter in (tube to drain urine [pee] from your bladder).

- When getting in and out of bed, make sure you 'log roll' (you may have done this while pregnant) to avoid putting strain on your abdominal muscles. Roll onto your side, allow both legs to drop over the side of the bed, then push yourself up into sitting using your hands.
- If you need to cough, support the area of the scar with your hands, a folded towel, or a pillow. This will help you cough more effectively and with less discomfort.
- It is important that you begin to get up and move around, as this is better for your blood pressure, circulation and bowels.
- Once your catheter has been taken out and you have been for a pee (passed urine), you should start doing pelvic floor exercises (also known as 'Kegels').

Why do I need to do exercises?

Your 'core' muscles, which surround your tummy like a corset and also include your pelvic floor muscles underneath, will have been weakened by pregnancy. Your Caesarean will have weakened your tummy muscles even further because they have been cut through and then stitched back together. It is important to get your core muscles strong again over time, to help prevent back pain and also pelvic floor muscle dysfunction, which includes symptoms of urinary incontinence (leaking pee) and prolapse (pelvic organs 'dropping' into your vagina).

Pelvic floor exercises

These muscles must be strengthened and kept strong to give you more support, reduce any symptoms you have, and help prevent symptoms from appearing if you do not have any. The exercises should be done **3 times per day**, **every day** – for the rest of your life. It should become a habit, like cleaning your teeth. Start small with the exercises – beginning with 3 second holds and gradually building up to 10 seconds.

How to do pelvic floor muscle exercises ('Kegels')

(Never do these exercises while on the toilet! Research has shown that this confuses the bladder and can lead to incontinence.)

Slow exercises

- Sit comfortably with your knees slightly apart (or lie down with your knees bent).
- Squeeze your vaginal muscles as if you are trying to hold in a tampon, suck something up inside, or stop wind and urine from coming out. Do not use your legs or your buttocks (bum cheeks) when you are doing this exercise. Your buttocks and legs should not move at all.
- Once you are able do this, squeeze the muscles as tight as you can, and hold for as long as
 you can up to 10 seconds. You should continue to breathe normally while doing this. You
 may not be able to hold it for more than two or three seconds at first. If you find the technique
 difficult, try lying down and putting a cushion or pillow under your bottom; you might find it
 easier to locate the right muscles.
- You should be aware of the skin around the back passage also tightening and being pulled up and away from the chair.
- Repeat this 8-10 times, but have a rest for 4-5 seconds in between each one.

Fast exercises

- It is also important to work the pelvic floor muscles to react quickly to stop you leaking when you cough, sneeze, or move quickly. Therefore, practice tightening your pelvic floor quickly and then relax.
- Fast exercises are done in the same way as slow exercises but when you squeeze the
 muscles, let go immediately so that you only feel a very quick lift in your pelvic floor.
- You should repeat these exercises between 10-20 times.

The fast and slow exercises together make up one exercise session. If you do less than 3 sessions per day, you risk not building enough strength to reduce symptoms. Your muscles will improve and strengthen with time and exercise.

Both the slow and fast pelvic floor exercises can be done at any time, provided there is at least a gap of 1 hour between sessions. It helps to associate these exercises with activities you do regularly every day. You can download and use the NHS Squeezy App to help you remember and count the exercises, if you think this would be useful to you. The NHS Squeezy app currently costs £2.99 on both iPhone and Android devices.

If you develop symptoms of pelvic floor dysfunction, you can ask your health visitor or GP to refer you to maternity physiotherapy.

Other core exercises

Initially, it is safe for you to do:

Transabdominal activation

Pull the bottom of your tummy in towards your spine (as if trying to zip up a tight pair of jeans). Hold for 10 seconds. Repeat 10 times, gradually building it up until you can hold it in while still breathing and holding a conversation.

Pelvic tilts

Also known as 'cat and cow' in yoga; this can be done on all fours, or lying down with knees bent and feet flat on the bed. Tilt your pelvis backwards and forwards, arching and hollowing your back. You can do this as many times as you feel the benefit – it is often helpful for easing an aching back.

Scar tissue massage

It can be helpful to massage the scar once it has healed, to encourage the scar tissue to soften and behave more like normal tissue.

You can begin scar tissue massage after 12 weeks, provided your scar is completely healed and there is no infection, scabs, or weeping from the wound. Use an unscented massage oil or lotion, or an oil such as coconut oil or olive oil to do the massage. Use circular motions, up and down motions, and side to side motions along the length of the scar.

General tips

- Avoid lifting anything heavier than the baby or a kettle of water for the first six weeks, to avoid straining your abdominal muscles.
- You should not drive for six weeks following your Caesarean. After six weeks, check your
 insurance requirements and ensure that you can perform an emergency stop without pain.
- You may begin more progressive core exercises after six weeks, provided there is no 'bulging' in the centre of your tummy when trying to do a sit-up. If there is bulging, continue with just the initial exercises above until this resolves.
- You should not begin any impact exercise or weight training until minimum 12 weeks after the birth. If you wish to go back to intensive impact exercise such as running, please ask the physiotherapist for further advice.

Where can I find more information?

Pelvic Obstetric and Gynaecological Physiotherapy (POGP) https://thepogp.co.uk/patient information/default.aspx

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

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

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