



Rib pain in pregnancy

This leaflet gives you information, advice and exercises if you are experiencing rib pain during your pregnancy. If you have any questions, please speak to your physiotherapist.

What is rib pain?

Rib pain is usually felt on one side, just under the breast or on the side of your chest. The pain can sometimes radiate to your back. It usually starts towards the end of the second trimester (around 27 weeks) and into the third trimester (28-40 weeks).

What causes rib pain in pregnancy?

Rib pain in pregnancy is very common, and there are lots of possible causes for it.

- **Baby growing bigger.** As the baby grows and your uterus (womb) gets bigger, it puts pressure on your internal organs and ribs.
- **Hormonal changes.** The hormones relaxin and progesterone cause your muscles and ligaments to become softer and more stretchy during pregnancy. This means that the bones in your rib cage may move about a bit more than they normally do, and this can cause pain.
- **Baby changing position, or kicking their feet around in your rib area.** This puts added pressure on the ribs and internal organs, which may cause pain in the rib area.
- **Increase in breast size.** If your breasts are growing, the extra weight can put stress onto the ribs, causing pain.
- **Heartburn.** The hormones also relax the muscles of the oesophagus (food pipe), and this can cause heartburn and indigestion, which is sometimes felt as rib pain.
- **Inflammation of the rib cartilage (costochondritis).** As the rib cage expands to accommodate your growing baby, sometimes the cartilage at the end of each rib can become inflamed.

Things to look out for

Although rib pain is common in pregnancy and not usually serious, there are some things you should look out for. **See your doctor if you experience any of the following:**

- Pain that comes on after eating food, especially fatty food, which radiates between your shoulder blades, and where you also have a fever and vomiting along with the pain. Pregnancy puts women at a higher risk of gallbladder disease.
- Pain on the right side of your rib area that is sudden and acute, accompanied with dizziness, "floaters" or spots in your vision, headaches, and nausea/vomiting. Pregnancy puts women at risk of a serious condition known as HELLP.
- Pain that is sudden and acute, and which appeared after a long bout of coughing. It is possible you may have an antenatal cough-induced rib fracture.

Remember that the above conditions are rare, and most pregnancy related rib pain is common and not serious.

What can I do about rib pain?

- Eat little and often if you suffer with heartburn.
- Use a well-fitting, supportive bra.
- Try heat pads or ice, for about 10 minutes at a time over the sore area. Remember to have at least one layer of cloth between the heat or ice and your skin.
- Adjust your posture so that you are not slumped in the chair, and consider using a lumbar support such as a rolled up towel to help you stay sitting upright.



Bad sitting posture - the shoulders are rounded and the chest is slumped forward.

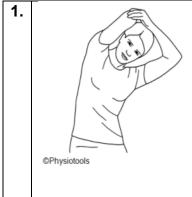
This position constricts the movement of the rib cage and decreases the lung capacity - which could increase both rib pain and heartburn symptoms.



Good sitting posture - aim to sit with your back and pelvis in a neutral position (weight on your sitting bones) or if possible slightly tilt your pelvis forward (weight in front of sitting bones).

Shoulders should be straight and back, expanding room for the rib cage and for the lungs to fill to capacity. This position may help relieve rib pain, as the rib cage has room to expand.

You can also try these stretches/exercises:



Lateral Trunk and Shoulder Stretch

Sit up straight and take one hand behind your head with your elbow pointing upwards.

Using your other hand, gently press the elbow further back and bend your upper body to the side until you feel a stretch along your side.

Hold <u>30</u> seconds. Repeat 3 times.

2.	©Physiotools	Sit and lift one arm. Bend to the side with your arm reaching over your head. Breathe in, then breathe out and return to the starting position. Repeat 3
3.	AR	Thoracic Spine Rotation
		On all fours, hands under your shoulders and knees under your hips. Spine in neutral position.
	ALLA	Reach one arm under the other armpit and then bring the arm back and reach towards the ceiling.
	©Physiotools	Repeat 5 times.
4.		Lie on your side.
		Twist your upper body and head backward on the side you want to stretch, with your arm out and at the same time breathe in deep. Twist back to the starting position and breathe out.
		Repeat <u>5</u> times
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5.	AAP	Active Trunk Flexion/Extension
		On your hands and knees, hands under your shoulders and knees under your hips.
		Round and arch your back by tilting your pelvis backwards and forwards.
	©Physiotools	Repeat <u>10</u> times.
6.		Diagramatic Breathing in sitting.
	Physiotools	Relax your neck and shoulders. Place a hand on your abdomen. As you breathe in, feel your rib cage expand sideways and forwards, and your abdomen should push your hand outwards. Do not force the action, simply breathe fully and naturally. The action of diaphragmatic breathing helps expand the rib cage and may help relieve rib pain.
	©Physiotools	pain.

Contact us

Pelvic Health and Maternity Physiotherapy RBFT Physiotherapy Department 0118 322 7811 or 7812

Further information

You can find more information on the following website

 Pelvic Obstetric & Gynaecological Physiotherapy (POGP) <u>https://thepogp.co.uk/patient_information/womens_health/other_musculoskeletal_symptoms.aspx</u>

To find out more about our Trust visit <u>www.royalberkshire.nhs.uk</u>

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

J Churches, Specialist physiotherapist, January 2022 Reviewed: July 2024 Next review due: July 2026

Our Maternity Strategy and Vision

'Working together with women, birthing people and families to offer compassionate, supportive care and informed choice; striving for equity and excellence in our maternity service.' You can read our maternity strategy here

