



HOPE HEALS
ASSOCIATION FOR
PELVIC ORGAN PROLAPSE SUPPORT

HOME ABOUT POP INFO FORUM SHERRIE PALM BLOG VIDEO
SUPPORT APOPS LIBRARY PRACTITIONER LOCATOR CONTACT

REDUCE THE RISK OF DEVELOPING PELVIC ORGAN PROLAPSE: BIRTHING TECHNIQUES FOR LESS STRAIN ON PELVIC FLOOR MUSCLES

By Marianne Ryan PT, OCS

Did you know that certain childbirth techniques could reduce the risk of developing pelvic organ prolapse (POP)? The more strain placed on the pelvic floor during childbirth, the more a woman is at risk of developing POP. Choosing better positions, breathing techniques, and timing can benefit both mom and baby.

Dr. Gloria Esegbona, Obstetric Gynaecologist says that good practice in labor can prevent injuries. "Purple pushing and lack of delayed pushing, can be the major culprits in developing pelvic organ prolapse". Purple pushing is when mothers are asked to hold their breath and bear down, which can seriously cut down oxygen supplies and was found to be an inefficient way to give birth.

As far as timing goes, Dr. Estgbona explains waiting for the cervix to fully dilate cuts down on developing pelvic organ prolapse. "The problem is that at most women are usually given at best just one hour to deliver their babies. This is an arbitrary amount of time and there is no scientific evidence for this. When these women push early the baby's head is still at quite a high level and often not having rotated. Meaning they are pushing a wider diameter of the babies head through a vagina which has not been given time to stretch causing shearing injuries of tissue which predispose to prolapse and tears".

Birth positions can also have an influence on developing pelvic organ prolapse. The most common position is to have a woman lie on her back with her feet up in stirrups.

Guess what?

This position closes down the size of the bony pelvic outlet which means the diameter of the birth canal is decreased. When this happens the baby's head will place even more pressure on the pelvic organs, vaginal walls and pelvic floor muscles during the delivery. Positions that allow the thighs to internally rotate, with the knees slightly rotated towards each other, increase the size of the pelvic outlet and produce less strain on the pelvis and organs. Some examples of better birthing positions include side lying, some squatting positions, standing and having the woman on hands and knees.

Sandy Jones, co-author with Marcie Jones of "Great Expectations: Pregnancy & Childbirth", goes on to explain: "We have this Western idea that mothers "GIVE birth," which suggests that women are supposed to DO stuff to get the baby out of their bodies, but physiological studies indicate that in fact, the uterus EJECTS the baby, and it knows what it's doing -- the right timing, the right pressure, the right coming and going of urges, that rightfully shouldn't be overridden by anxious and time-pressured attendants".

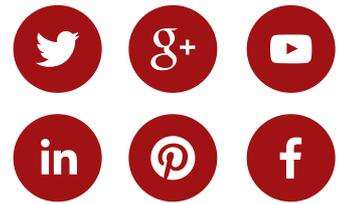
"Current, evidence based clinical guidelines, says Jones, are that women should have pushing delayed until they feel the urge to do so, as much as 2 hours for 1st time moms under regional anesthesia; that women be encouraged to take whatever position feels best; that there be no closed-glottis pushing encouraged, as in: "Take a deep breath, hold it, and push down while we count to 10" (known as "purple pushing)". Here is a link to an article published in The Joint Commission Journal on Quality and Patient Safety:<http://www.feinberg.northwestern.edu/chs/pdfs/LD.pdf>

Increased awareness among health care providers and the general public is key in reducing the risk of developing pelvic organ prolapse. More studies are needed to ensure that these simple changes in clinical guidelines are used to reduce the incidents of pelvic organ prolapse as a result of childbirth.

**Marianne Ryan PT, OCS
Clinical Director MRPT Physical Therapy**

<http://www.MRPTny.com>

**CONNECT TO APOPS SOCIAL MEDIA
LINKS FOR
POP TIPS, RESEARCH UPDATES, AND
GUIDANCE.**



CONTACT APOPS

**APOPS
Association for Pelvic
Organ Prolapse Support
8225 State Rd 83
Mukwonago, WI 53149
USA**

262-642-4338



DISCLAIMER

The contents of pelvicorganprolapsesupport.org is intended to provide beneficial health and support information for women who suspect they have or have been diagnosed with pelvic organ prolapse. All materials including text, graphics, images, and audio provided in this site are for informational purposes only and are not a substitute for guidance by a healthcare practitioner.

All visitors to this site should seek advice from a healthcare practitioner for their individual health concerns. Neither pelvicorganprolapsesupport.org nor APOPS recommends any particular test or procedure. APOPS encourages women to take all educational information about POP to their personal physicians for further evaluation.