

Ask the physiotherapist

LOWER BACK SPASMS

Q I'm 26 weeks pregnant and my lower back has recently started to spasm. Why is this and is there something I can do to prevent it? It's extremely painful.

A Lower back pain is quite common and there are many causes including:

- Decreased support from the stretching of your abdominal muscles, your 'natural corset'
- Postural changes due to forward tilting of your pelvis

to accommodate your growing bump

- Forward bending with a large bump
 - Ligament laxity in the third trimester leading to a feeling of lumbar (lower back) weakness
 - Sciatica
 - Pelvic dysfunction from increased mobility and lack of stability
- Prompt assessment is very important so that the reason for your painful spasms can be identified and safely

treated. Your chartered physiotherapist can show you safe exercises to perform to resolve your pain and prevent a recurrence when your bump is larger, later in your pregnancy.

which can aggravate neck pain. These changes put pressure on the bones and muscles of the neck and spine and should be treated as soon as possible.

Ice or heat can be used to soothe neck pain. Using ice packs on the neck will prevent swelling and reduce pain when you suffer a sudden, sharp bout of neck pain. For more gradual onset aching neck pain, applying heat can help soothe and relax the neck muscles. Neck movements to maintain the range of motion are important for easing pain and preventing recurrence later in your pregnancy. Your chartered physiotherapist can advise on safe neck exercises to do while pregnant.

Headaches can be related to dysfunction in the joints of the neck or tightness in the upper trapezius muscles. Indeed, tension headaches are relatively common in pregnancy and can be safely and easily treated. However, in a small percentage of women, a headache can warn of the onset of pre-eclampsia. You should contact your GP or obstetrician without delay if you suffer a severe headache for the first time and you are in your second or third trimester of your pregnancy. ♥

NECK PAIN AND HEADACHES

Q I'm in my third trimester and have started to experience neck pain and headaches. Could this be pregnancy-related and what can I do to alleviate it?

A First of all, don't ignore your neck pain. Neck pain is very common during pregnancy but it can be safely and easily treated. Contact your chartered physiotherapist to find out what is causing your pain so you can prevent it getting worse as the pregnancy progresses. Make sure you are not using too many pillows in bed in an effort to find that perfect sleeping position.

During pregnancy, your posture will gradually change due to the increasing size of your breasts, which can cause the shoulders to round and the neck to poke forwards. This change in postural position can cause neck pain and stiffness.

As the uterus grows and your pelvis tilts more anteriorly, this can lead to spinal postural changes,

PREGNANCY PELVIC CHANGES

Q I've heard that your pelvis can move out of place during pregnancy. Is this true and what can I do stop this from happening to me?

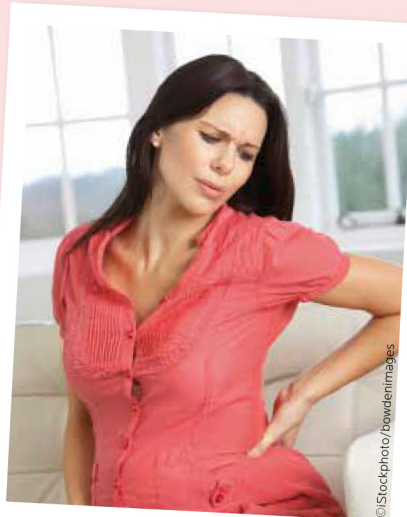
A It is not true that your pelvis moves out of place during pregnancy; rather, changes occur in the joints of the pelvic girdle, namely the pubic symphysis at the front of the pelvis and the sacro-iliac joints at the back.

During the third trimester, hormones are released that soften the ligaments in the body, especially around the pelvis to facilitate passage of the baby through the birth canal. This can lead to instability around the lower back and pelvis.

If you notice any of the following symptoms, it could indicate that you have some pelvic dysfunction that must be promptly addressed:

- Difficulty turning in bed, moving from sitting to standing, using the stairs, or initiating walking after a period of sitting
- Pain on any activity that involves lifting one leg at a time or parting the legs, such as getting into the car or putting on socks

Your chartered physiotherapist is best placed to determine if your symptoms are related to pelvic girdle pain, which can be safely treated during pregnancy.



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