The Role of Physical Therapy in Perinatal Mental Health

Scope of Practice

The role of a physical therapy practitioner is

- To address pregnancy and postpartum-related musculoskeletal problems.
- Educate on anatomy and positioning options for labor and delivery.
- Educate mothers on the physical postpartum recovery process and proper body mechanics.
- Treat to alleviate conditions through conversative, low-risk treatments to improve well-being and prevent long-term health concerns.

(American Physical Therapy Association, 2018; Critchley, 2022)

Conditions for Referral

Symptomology of any of these conditions, without any improvement in the 6-8 weeks after delivery should result in referral to physical therapist (Critchley, 2022; The American College of Obstetricians and Gynecologists Committee Opinion No. 736, 2018).

- Pain (back, pelvic, hip)
- Incontinence
- Sexual dysfunction/ discomfort
- Severe fatigue
- Diastasis recti abdominis
- Difficulty with daily function

Pelvic Floor Dysfunction	Diastasis Recti Abdominis
Risk Factors:	Risk Factors:
SmokingVigorous exercise	Age (increased age, increased risk)Weight before pregnancy

 High BMI High hip circumference Pre-pregnancy pelvic floor dysfunction Forcep delivery (Durnea et al., 2017) Symptomology: Fecal or urinary incontinence Overactive bladder symptoms Pain with sexual activity Perineal pain Constipation Pelvic organ prolapse (Critchley, 2022) 	 Weight gain during pregnancy Baby weight at birth Hypermobility of joints based on Beighton's hypermobility score Abdominal circumference at 35 weeks Exercise training before, during, and after pregnancy Type of delivery (Cavalli et al., 2021). Symptomology: Weakened abdominal A visible bulge that protrudes just above or below the belly button Softness or jelly like feeling around your belly button Coning or doming when contracting your abdominal muscles Difficulty lifting objects, walking or performing everyday tasks Pain during sex Pelvic, lower back or hip pain Poor posture Incontinence of urine Constipation Feeling weak in your abdominals
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Why a referral?

- Chronic conditions can arise when pelvic floor dysfunction is not addressed by a physical therapist. (Buurman & Lagro-Janssen, 2013; Domoulin et al., 2014; Gutzeit et al., 2019; MacAuthur et al., 2016; Mazur-Bialy et al., 2020; Ternent et al., 2009).
- 76% of women reported urinary incontinence at 3 months postpartum and continued to have incontinence 12 years later (MacAurthur et al., 2016).
- Pelvic floor dysfunction is also associated with pelvic girdle pain and can results in pain with sexual activity. Sexual function was reported to be affected by pain by 83% of women 2-3 months after delivery and 64% at 6 months postpartum (Gutzeit et al., 2019).
- Pelvic floor dysfunction without being addressed can lead **to negative health consequences and decreased quality of life** due to decreased participation in exercise, social activities that could lead to mental health concerns such as feelings of isolation, depression, anxiety, decreased sexual satisfaction, and poor self-rated health (Buurman & Lagro-Janssen, 2013; Domoulin et al., 2014; Mazur-Bialy et al., 2020; Ternent et al., 2009)

Prevalence

- Diastasis Recti Abdominis often occurs during pregnancy but can spontaneously heal after childbirth in most women (Cavalli et al., 2021).
- 33% of women still experience Diastasis Recti Abdominis at 12 months (Sperstad et al., 2016).

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