

## MATERNITY SUPPORT BELTS

If your pelvis feels very loose, you may find that a belt will help to support your joints as you begin to recover. You can purchase a belt from the Department of Physiotherapy following assessment by a Physiotherapist.

We are unable to provide belts for women that have not completed an assessment.

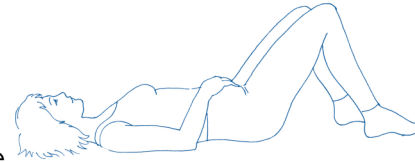
## EVERYDAY TIPS

1. Avoid standing on one leg if possible (e.g. get dressed sitting down)
2. When moving, try to keep your knees together to avoid over straining your muscles
3. Take the stairs one at a time and lead with your less painful leg
4. Avoid carrying on one side, keep loads in the middle and avoid heavy lifting

## BASIC STRETCHES AND EXERCISES

### 1. Pelvic Tilting

Lie on your back with knees bent  
Push your spine into the bed and curl your tailbone under you



Hold for 5—10 seconds  
Repeat 5-10 times

### 2. CLAM

Lie on your side with your hips stacked



Bend your knees and keep feet together  
Lift the top knee and lower  
Repeat 5-10 times each leg

### 3. Hip Openings

Lie on your back with knees bent



Gently relax one knee out  
Slowly bring the knee back in  
Repeat 5—10 times each leg

### 4. Think about your posture



Stand upright with equal weight through both feet

Try to keep your shoulders, hips and knees in alignment

Allow your neck to lengthen and don't forget to breathe!

If these exercises are too difficult, contact the Department of Physiotherapy



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# Information for Women that have been assisted at delivery with the M<sup>c</sup>Robert's Manouvre for Shoulder Dystocia

Tel: 02920 745134/745884

[www.cardiffandvaleuhb.wales.nhs.uk/whphysio](http://www.cardiffandvaleuhb.wales.nhs.uk/whphysio)

## WHAT IS THE McROBERT'S MANOEUVRE?

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This manoeuvre is used when your baby's shoulder has become stuck behind your pubic bone during delivery (Shoulder Dystocia).

It is used in approximately 0.7% of vaginal births and is often linked to previous shoulder dystocia, long labours, induced labours, assisted vaginal deliveries (forceps / ventouse), maternal high BMI (>30) and diabetes.

It is classed as an emergency and you would have been asked to separate your knees and pull them up to your chest. A midwife or doctor would then press on your abdomen, just above your pubic bone in order to loosen the baby's shoulder. The Royal College of Obstetricians and Gynaecologists have produced an informative leaflet that you can find if you follow this link: <https://www.rcog.org.uk/en/patients/patient-leaflets/shoulder-dystocia/>

## HOW COULD THIS MANOEUVRE AFFECT ME?

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Following the McRobert's manoeuvre, your pelvis and hips may be sore and uncomfortable.

You may experience the following signs and symptoms:

1. Difficulty walking and standing on one leg (e.g. when putting your socks on)
2. Difficulty separating your legs (e.g. when getting out of a car)
3. Clicking or grinding in the pelvic area
4. Difficulty going up or down stairs

If you are experiencing any of these symptoms, it is important that you contact a physiotherapist who can speak to you regarding your symptoms and advise the best possible course of action.



## DO I NEED TO DO ANYTHING?

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First of all, it is important to speak to your midwife, especially if your pelvic joints are very painful and you are struggling to move around on the ward. Your midwife will speak to the ward physiotherapist and ask her to see you. (Ward physiotherapy services are available Mon—Fri 8:30am—10:30am).

If the ward physiotherapist is not available, you can contact the physiotherapy department on 02920 745134/745884. Leave a short message requesting a call back and we will aim to return your call as soon as possible. Please note that there is no physiotherapy service availability on Saturdays or Sundays.

You will receive advice over the telephone initially and may be asked to attend either an individual assessment or a group Pilates class. In the majority of cases, gentle exercises and stretches will restore the muscle balance and support through the pelvis and therefore reduce any symptoms you may be experiencing.

In rare cases, you may require an ultrasound scan or X-ray of your pubic bone. These tests are used if the exercises are unsuccessful in reducing your symptoms.