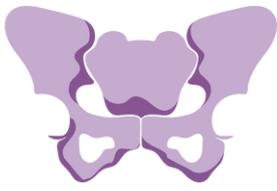


Postpartum Guide: The First 6 Weeks



WELCOME TO
**Kayla Figueiredo
Physiotherapy**



W E L C O M E T O
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Physiotherapy**



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About the Practice

Empowering Women Through Every Season of Life

We are a team of passionate pelvic health physiotherapists dedicated to walking alongside women through some of the most transformative seasons of their lives – from pregnancy and postpartum to perimenopause and beyond. Whether you're preparing to meet your baby or reclaiming your strength years after birth, our goal is to help you thrive with confidence and comfort in your body.

Meet Gemma Young - Physiotherapist with a Special Interest in Pelvic Health

Gemma is passionate about all things involving movement & wellness. As being fully trained in pelvic health physio & pilates matwork, she is passionate about helping women reconnect with their body, reduce pain, and feel strong again – there is nothing more rewarding.

Gemma graduated in 2023 at the University of Witswatersrand and joined the practice in 2025.



Meet Kayla - Founder & Lead Physiotherapist

With over a decade of experience as a physiotherapist, Kayla founded the practice in 2021 to create a space where women feel truly seen, supported, and empowered. Her journey into pelvic health began after the birth of her daughter, Lucille – an experience that sparked a deep passion for helping other women navigate motherhood with strength and grace.

Kayla graduated from the University of Witwatersrand in 2014 and has since focused on restoring quality of life for women in the antenatal, postnatal, and pre-menopausal stages. Her mission is simple: to equip women with the tools, care, and knowledge they need to live fully and freely, no matter their stage of life.





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Congratulations on your delivery and new addition to your family. The first 6 weeks are an important time of being supported while you support your new baby as they adapt to being earth-side. This guide is to help you recover well in these first 6 weeks of your postpartum recovery.

Regardless of which delivery you have had, pelvic physiotherapy helps with:

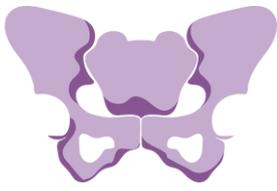
- Bladder and Bowel Function
- Wound Management
- Mobility and Exercise

What are we trying to prevent?

- 33% of women still leak 3 months after delivery (Thom & Rortviet, 2010)
- Younger women who deliver vaginally have twice the risk of developing either stress incontinence (leaking when coughing or jumping) or urgency incontinence (Gartland et al, 2015; Tahtinen et al, 2016).
- Constipation can be as common as up to 61.6% of women experience it postpartum (Turawa, 2020).
- At 6 months postpartum, 9% of women experience leaking faeces and 21% experience faecal urgency (Richter et al, 2015).
- Constipation is a risk factor for pelvic organ prolapse which is a great motivation to prevent it!

What Can You Do?

- Correct sitting posture (knees higher than your hips by using a footstool).
- Peppermint oil in toilet bowl if struggling to initiate urination (Phillips, 1998).
- Adequate hydration (a glass of water with every feed or pump).
- Asking your gynae or midwife for a stool softener.
- Abdominal massage.
- Early mobility.



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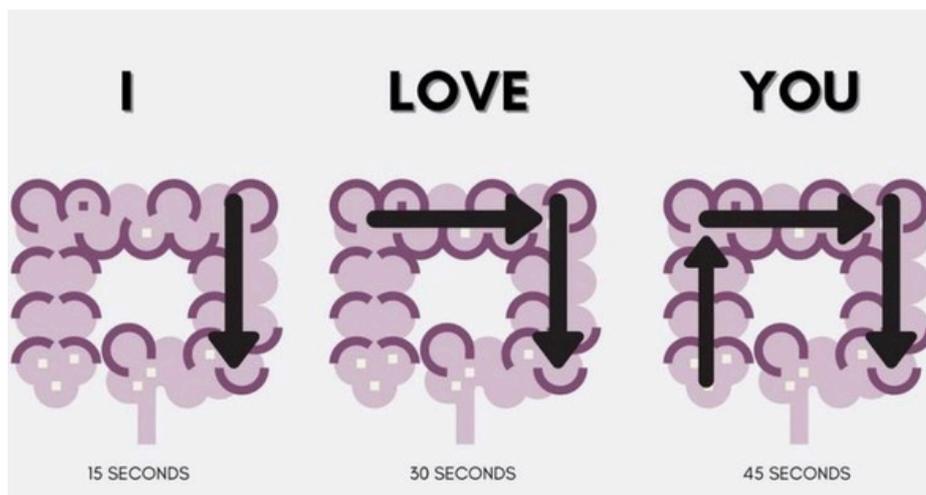


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Abdominal Massage for Constipation

It reduces symptoms of constipation, decreased time between defecations and increased quality of life. It needs to be performed consistently in the I LOVE YOU technique. Ideally everyday for 4 weeks to consistently see a difference in bowel habits.



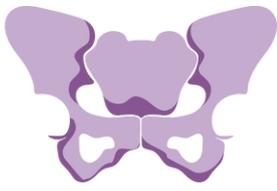
Toileting Posture

- Supported feet with your knees higher than your hips.
- Support abdominal wall.
- No straining to defecate.
- Clean with a peri-bottle or bidet.



Exercise Guidelines

- This guide is ideal if you had an uncomplicated birth and delivery.
- Please consult with your doctor or midwife before you do this program.
- If you experience any shortness of breath, dizziness or increased bleeding you have pushed too hard and need more rest.



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Mobility and Exercise

Birth Recovery Guidelines

- Avoid straining.
- Manage your pain well.
- Support your body in the first two weeks by not lifting excessively.
- Ensure that when you stand and walk, your hips are under your ribs & ribs are under your shoulders.
- Allow the post-birth bleeding to guide whether you are moving around excessively or not.
- No vaginal entry (sex or tampon) to prevent infection.

Exercise Progression

0-2 Weeks

- Walking (start with 10 minutes and increase)
- Diaphragmatic breathing (belly rises as you inhale, belly falls as you exhale).
- Pelvic floor contractions (contract your anus x 10 & contract your clitoris to hold in a wee x 10 while lying on your back).
- Abdominal contractions

1. Transverse Abdominus Activation

Lie on your back with knees bent and feet flat on the bed. As you breathe in, relax your pelvic floor. As you breathe out, contract your anus and your abdominal muscles imagining that your hip bones are drawing together).

Repeat x 10.

2. Transverse Ab Activation plus knee lift

In the above-mentioned position, as you breathe out contract your anus and abs while lifting your right leg up gently x 10. Repeat on the other side.

- Rib recoil

While lying in the previously mentioned position, breathe into your tummy.

As you exhale, draw your hips together and ribs into the bed. Repeat x 10.



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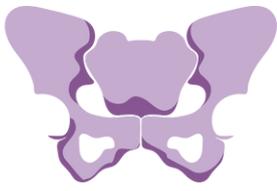
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2-4 Weeks

- Walking (increase as able)
- Diaphragmatic breathing (belly rises as you inhale, belly falls as you exhale).
- Pelvic floor contractions (contract your anus x 10 & contract your clitoris to hold in a wee x 10 while lying on your back).

Exercise	Description	Picture
Ab contraction plus heel slide.	Lie on your back with knees bent, straighten one leg while keeping hips stable as you breathe in, then breathe out and activate your abs as you draw your foot towards your body. Do 10 reps on each side.	
Stabilising: Controlled leg fallout	Lie on your back with knees bent, allow one knee to fall outward slowly, then return to center, keeping pelvis stable. Do 10 reps on each side.	
Sidelying Glute Exercises	Lying on your side, hips stacked, knees bent to 90°, head resting on bottom arm. A) Foot lift only x 10 reps. B) Foot & knee lift x 10 reps. C) Leg lift & knee extension/flexion x 10 reps.	
Bridging	Lie on your back with knees bent and feet flat on the floor. Engage your core to lower your spine into the bed and glutes to lift your hips off the ground, forming a straight line from shoulders to knees. Repeat x 15 reps.	
Squats	Stand with feet shoulder-width apart. Lower your body by bending your knees and hips, keeping your back straight and chest up, until your thighs are parallel to the floor. Then return to standing. Do 10 reps.	
Forward Lunge	Step forward with one leg, lowering your hips until both knees are bent at about 90 degrees. Ensure the front knee is directly above the ankle. Push back to the starting position. Do 10 reps on each side.	



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4-6 Weeks

- Walking (increase as able)
- Low-impact exercise (stationary bike/ elliptical).
- Diaphragmatic breathing (2 minutes)
- Pelvic floor contractions (sidelying, sitting and kneeling)

Exercise	Description	Picture
Exercises from Weeks 2-4	Do 3 sets of each exercise.	
Calf raises	Hold onto a wall with both hands and lift your heels as high as you can and lower down to the ground. Do 10 reps x 3 sets	
Glute Stretch	Sit on the floor with one leg extended and the other crossed over it. Twist your torso toward the bent knee to stretch the glute muscles. Hold for 30 seconds x 2 on each side.	
Thoracic Side Flexion	Sit on a chair, place one hand behind your head, and bend sideways to bring the elbow toward the hip, stretching the thoracic spine. Hold for 30 seconds x 2 on each side.	

A pelvic health physiotherapy assessment is important after your 6 week check with your doctor or midwife. We will assess for:

- Diastasis Recti
- Pelvic Floor Dysfunction
- Strength Testing
- Return to Impact Exercise Screening

[Click to book your 6 week appointment](#)