One of the most common complaints in pregnancy is that pain is affecting the lower back or the joints of the pelvis (PGP). It affects as many as 1 in 5 pregnant women and is caused by a number of factors.

Symptoms

You may have pain in the lower back or over the pubic bone, hips or buttocks. This may be experienced in just one of these places, or in a band all the way around the pelvis. The pain can spread into the legs, and can also change sides from day to day.

Activities that cause discomfort typically include walking, lying on your back, turning over in bed, standing on one leg (e.g. dressing), or separating the legs (e.g. getting in and out of bed or a car). The pain is often worse at night, or after you have been on your feet for a while.

What can Physiotherapy do to help?

Physiotherapy will advise you how to manage the pain, helping with things like:

- Posture, positions, and moving
- Daily activities
- Exercises
- The best positions for labour
- Pain relieving methods.

It may also include tubigrip support, crutches and manual therapy if appropriate.

Making an appointment

If your midwife has given you this leaflet and you would like to see a physiotherapist, please telephone one of the following numbers (8am to 4:30pm, Monday to Friday) and ask for an appointment in the antenatal back class:

- Doncaster 01302 644207
- Bassetlaw 01909 572302
- Mexborough 01709 649190.

You will need the information in the box below: your midwife should fill this in.

NHS Number:	
Referring Midwife:	Registered GP:
Ask for an appointment in the antenatal back class at Bassetlaw, Doncaster, or Mexborough	

Your appointment

Your first appointment will be in a small group with other women who have PGP. The physiotherapist will assess you and ask you about the nature of your problem, and may assess your muscles and joints. Because this is a group setting, we are unable to accommodate children or partners.

Individual one-on-one appointments are only available in exceptional circumstances. If there is a genuine reason why you cannot be seen in a group initially, please let the booking team know when you ring for an appointment (be aware you may need to wait longer).

You may be given a one-on-one follow-up appointment if the physiotherapist feels that you need further assessment or treatment.



Please complete the questionnaire below and bring it to the class/appointment with you.

1) Pregnancy details
How many weeks pregnant are you? What is your due date? Have you had any pregnancy complications? Yes No No Details:
2) Presenting problem
Where are you experiencing pain? (Tick all that apply): Lower back Back of the pelvis Front of the pelvis Sides of the pelvis/ hips Other
3) How this problem is affecting you
On a scale of 0-10, how bad does the pain get (If 10 is the worst pain imaginable)? What makes the pain worse? What makes the pain better? What is the pain like overnight?
4) History of the problem
Did you have this problem before this pregnancy? Yes □ No □ If <u>yes</u> have you had any treatment for this problem before that has helped? Yes □ No □ Details:
5) Previous pregnancies
How many children do you have? How old are they? Have you had back pain or pelvic girdle pain in any previous pregnancies? Yes No No If yes, did you have any treatment for it that helped? Yes No Details:
6) General health
Do you have any other health problems? Yes D No Details Have you had any serious illness or major operations in the past? Yes No D Details Are you taking any medication? Yes No Details
7) Lifestyle
Do you work? Yes No Solo Job: Are you on sick-leave from work because of your symptoms? Yes No Solo No Solo No Solo I Is there anything that you are particularly struggling to do because of your pain? Yes No Solo No Solo Details:
8) Declaration
I confirm that the information I have provided above is correct to the best of my knowledge, and that I will inform the physiotherapist if any of these details change. I am aware that some or all of my treatment may be in a group setting, and that if I do not attend an appointment without letting the department know in advance I will be discharged from the physiotherapy service.
Signature Date