3rd International Conference on

NURSING & MIDWIFERY

May 23-24, 2018 | New York, USA



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Prevention of pelvic floor prolapses with abdominal pushing in labor

earning how to push in labor is one of the most important skills a pregnant woman can learn during her pregnancy. Yet, it is not routinely taught by medical professionals or childbirth educators. It is a skill that needs to be practiced during pregnancy, so it can become second nature when pushing in the second stage of labor. You cannot teach someone a new skill when they are in pain in labor. It takes at least 21 days to learn and practice a new skill. The best-case scenario for learning how to push in labor is with the Tupler Technique[®], is in the second trimester. The art of pushing is all about developing transverse muscle strength and awareness so in labor a pregnant woman can push with her strengthened transverse muscle while relaxing her pelvic floor muscles. Tightening the pelvic floor muscles while pushing without using the transverse muscle can put a lot of force on the pelvic floor putting a woman at risk for prolapses, urinary incontinence and hemorrhoids. The transverse muscle is the inner most abdominal muscle and the one that is used in pushing. Pregnancy creates a condition called diastasis recti which is a separation of the outermost abdominal recti muscles. If a woman has a diastasis before she gets pregnant, diastasis recti will get even larger during pregnancy from expanding uterus. A large diastasis will not only put a pregnant woman at risk for a C-section but it will make pushing much more difficult. The muscles need to be close together to move in the right direction to push effectively. This direction is front to back. When they are separated they move in a sideways direction. Thus, it is important to make a pregnant woman's diastasis smaller during pregnancy with the Tupler Technique® Program. The Tupler Technique® makes a diastasis smaller by healing connective tissue by approximating both the abdominal muscles and the connective tissue, protecting the connective tissue from getting stretched and strengthening both the abdominal muscles and connective tissue with the Tupler Technique® exercises. The 4 step Tupler Technique Program is: (1) Exercises: Elevator, contracting and head lifts; (2) Wearing the diastasis rehab splint and holding a splint starting in week 4 of the program; (3) Transverse awareness: Using the transverse muscle with activities of daily living; (4) Getting up and down from seated to back lying and back lying to seated and seated to standing. When doing the seated exercises, it is important to work the abdominal exercises "separately" from the pelvic floor muscles. So, in labor a pregnant woman can then push with her strengthened abdominal muscles and relax her pelvic floor muscles. Practicing the skill of pushing while having a bowel movement is important so it is second nature for her to work her abdominal muscles separately from her pelvic floor muscles when pushing in labor to be able to get the baby out faster while protecting her pelvic floor! Holding or wearing a splint in labor helps keep the muscles close together. Learning how to push before labor can make a pregnant woman's pregnancy, labor and recovery a more rewarding experience.

Biography

Julie Tupler is a Registered Nurse, Certified Childbirth Educator and Certified Personal Trainer. She has developed the Maternal Fitness® Program in 1990 and for over 25 years has been teaching and developing the Tupler Technique® Program for treatment of diastasis recti for women, men and children and also preparing clients for abdominal surgery and pregnant women for labor. She is an expert on treating diastasis recti. New York Magazine calls her the guru for pregnant women. She has been featured on many national television programs such as the Today Show, Regis & Kelly as well as in fitness, medical, and women's health magazines.

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