











- Avoid heavy pushing / pulling / lifting / carrying. Don't carry heavy toddlers if they are capable of walking.
- Avoid / minimise high-impact exercise (i.e. jogging, aerobics) or activities which increases the pressure in the abdomen (sit-ups or rowing, or heavy housework e.g. vacuuming), until you have discussed this further with your pelvic health physiotherapist. Some people return to this and some choose not to, this will depend on your individual circumstances.
- Try to avoid long periods of standing without a break. Try to sit for activities where it is not essential to stand (e.g. when preparing food or ironing).
- Avoid straining to empty your bowels, eat a balanced diet (including 5 portions of fruit and vegetables per day) and ensure adequate fluid intake (at least 3-4 pints or 1.5L per day) to prevent constipation. There is more information on this later in this leaflet.
- Avoid smoking and chest infections; if you get a bad chest infection seek prompt treatment to minimise coughing.
- Losing weight may help decrease your symptoms.
- If you are caring for a relative and need help with moving them around, seek help - aids may be available to reduce the load.
- Sexual intercourse will not make your prolapse worse but may be uncomfortable. Try using a vaginal lubricant or

You may also want to support the perineum (area between back passage and vagina) when emptying your bowels. Applying some pressure vaginally on the bulging wall towards the back passage may help to empty the bowels more fully and effectively. You can use your fingers or a Femeeze (buy online- <https://www.desmitmedical.com/shop/femmeze-pelvic-organ-prolapse-trainer-for-rectocele>) to apply support at the back of the vagina or between the anus and vagina, this can help to empty your bowels.

Observe your stool type- see chart below. You should aim for type 3 -4 between 3 times a day to 3 times a week, you should not strain to empty your bowels.





