

Exercise Guidelines for Pregnancy and the Postpartum Period

There are no data in humans to indicate that pregnant women should limit exercise intensity and lower target heart rates because of potential adverse effects. For women who do not have any additional risk factors for adverse maternal or perinatal outcomes, the following recommendations may be made:

1. During pregnancy, women can continue to exercise and derive health benefits even from mild to moderate exercise routines. Regular exercise (at least 3 times per week) is preferable to intermittent activity.
2. Women should avoid exercise in the supine position after the first trimester. Such a position is associated with decreased cardiac output in most pregnant women; because the remaining cardiac output is preferentially distributed away from splanchnic beds (including the uterus) during vigorous exercise, such regimens are best avoided during pregnancy. Prolonged periods of motionless standing should also be avoided.
3. Women should be aware of the decreased oxygen available for aerobic exercise during pregnancy. They should be encouraged to modify the intensity of their exercise according to maternal symptoms. Pregnant women should stop exercising when fatigued and not exercise to exhaustion. Weight-bearing exercises may under some circumstances be continued at intensities similar to those before pregnancy throughout pregnancy. Non-weight-bearing exercises, such as cycling or swimming, minimize the risk of injury and facilitate the continuation of exercise during pregnancy.
4. Morphologic changes in pregnancy should serve as a relative contraindication to types of exercise in which loss of balance could be detrimental to maternal or fetal well-being, especially in the third trimester. Further, any type of exercise involving the potential for even mild abdominal trauma should be avoided.
5. Pregnancy requires an additional 300 kcal/day to maintain metabolic homeostasis. Thus, women who exercise during pregnancy should be particularly careful to ensure an adequate diet.
6. Pregnant women who exercise in the first trimester should augment heat dissipation by ensuring adequate hydration, appropriate clothing, and optimal environmental surroundings during exercise. Avoid body temperatures above 100.4 degrees Fahrenheit (hot tubs, saunas, prolonged exercise in heat and humidity).
7. Many of the physiologic and morphologic changes of pregnancy persist 4 to 6 weeks postpartum. Thus, pre-pregnancy exercise routines should be resumed gradually based on a woman's physical capability. Acceptable guidelines are to resume activity 1 week after vaginal delivery and 6 to 10 weeks following a cesarean-section.
8. Strenuous exercise should not exceed 15 minutes and may require adjusting as the pregnancy advances.

The following conditions should be considered contraindications to exercise during pregnancy:

- Pregnancy-induced hypertension
- Pre-term rupture of membranes
- Pre-term labor during the prior or current pregnancy or both
- Incompetent cervix/cerclage
- Persistent second or third trimester bleeding
- Intrauterine growth retardation

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