

Can't Walk Because of Pelvic Pain During Pregnancy?

A practical guide for women struggling with pelvic pain, pubic bone pain and painful movement during pregnancy



BY

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Can't Walk Because of Pelvic Pain During Pregnancy?

If walking, turning in bed or climbing stairs has become painful, this guide is for you.

DOES THIS SOUND FAMILIAR?

- Turning in bed hurts
- Walking hurts
- Getting out of the car hurts
- Putting trousers on hurts
- Climbing stairs hurts
- Standing on one leg hurts
- The pain gets worse each week
- Pain turning over in bed
- Pain getting dressed

If you ticked several boxes, you may be experiencing **Pelvic Girdle Pain (PGP)**.

You are not alone. Pelvic Girdle Pain affects many women during pregnancy and can make everyday activities surprisingly difficult.



WHAT IS PELVIC GIRDLE PAIN?

PGP is pain arising from the joints (Pubic symphysis and Sacroiliac joint) , muscles and ligaments around the pelvis during pregnancy.



Symptoms may be felt at the front of the pelvis, around the pubic bone, in the buttocks, hips or lower back.

WHAT MANY WOMEN ARE TOLD

- Rest more
- Avoid stairs
- Use a belt
- Walk slowly
- Avoid lifting

These strategies may help reduce irritation and make daily life easier. However, they do not always address the factors contributing to pain around the pelvis, hips and lower back.

WHY EARLY SUPPORT MATTERS

Week 1-2

Often easier to settle

Week 4-8

The body starts compensating

Week 8+

Pain patterns become more established

In clinical practice, women who seek help earlier often improve more quickly and may require fewer treatment sessions.

WHAT YOU CAN TRY TODAY

- ✓ Keep knees together when turning in bed
- ✓ Use a pillow between your knees
- ✓ Sit down to get dressed
- ✓ Avoid standing on one leg
- ✓ Take smaller steps
- ✓ Avoid wide-leg movements
- ✓ Avoid pushing heavy shopping trolleys
- ✓ Try gentle pelvic tilts if comfortable

These tips may help reduce aggravation, but if symptoms continue, assessment may be helpful.



WHAT TREATMENT MAY INVOLVE



Treatment may include:

- ✓ Detailed assessment
- ✓ Gentle hands-on treatment
- ✓ Advice on movement and daily activities
- ✓ Guidance on sleeping positions
- ✓ Exercise advice when appropriate
- ✓ Support with returning to normal activities

**Every pregnancy is different.
Treatment is always adapted to the individual**

WHAT OTHER MOTHERS SAY ABOUT THEIR EXPERIENCE

★ 5.0 Google Rating
Based on 90+ Google Reviews



*“I have seen Anna twice now to help with **pelvic pain during pregnancy** and she has helped me so much. She is so lovely and each time I see her **I walk away feeling 10000% better.**”*

- Alexandra H



*“Excellent results from just one treatment, thoroughly recommend for anyone **suffering pregnancy pain.**”*

- Roxane B



*“Anna has been a great help during my third trimester of pregnancy. **My pain was almost nonexistent after two sessions.** Highly rcommende! “*

- Eliane M.

WHEN SHOULD I CONTACT MY MIDWIFE OR DOCTOR URGENTLY?

- vaginal bleeding
- severe sudden pain
- fever
- reduced baby movements
- swelling, redness or pain in the calf
- numbness or weakness in the legs
- loss of bladder or bowel control
- feeling generally very unwell

This guide does not replace medical advice from your midwife, GP or obstetric team.







HI, I'M ANNA

I'm an Osteopath and Physiotherapist with a specialist interest in pregnancy pelvic pain and baby osteopathy.

Over the years I have helped many women experiencing pelvic girdle pain, pubic bone pain and pregnancy-related musculoskeletal discomfort.

Many women report significant improvement after treatment, particularly when symptoms are addressed early.

-  15-minute free phone consultation
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