

Steven Bruce

set my phaser to stun

Zoe Mundell

I might get a little puppy coming into the camera screen at some point

Steven Bruce

we'll always be welcome Where is he?

Zoe Mundell

She's sitting on over there calling off she got a little cool jacket on so I'm not sure if you're asleep through he's got used to be teaching on Zoom during lockdown so she always sits locked down so she tends to just sit there and behave yourself nowadays.

Steven Bruce

How old is she?

Zoe Mundell

She's just turned two so not much of a puppy anymore she seems like a puppy but yeah, she's turned to now yeah wouldn't have had her before it when I was on air last time so it would have been pretty hard getting her we got her in August yeah two years ago 2000 So it was spring before there that I saw you

Steven Bruce

know we only we've only seen you during lockdown sure we have

Zoe Mundell

we kept you in different room

Steven Bruce

I could probably find out from one of our

Zoe Mundell

and I the first one was quite early on in it because that's how I found you guys

Steven Bruce

Jay I'm taking it you didn't do the Bama for the programme today so you're responsible for today's apostrophe s today's is crashed all of a sudden he always suddenly changes his mind

Zoe Mundell

okay

Steven Bruce

okay thank you I've now lost my Trello screen right I'm gonna give another guy with those shares because I don't like that reflection busy Okay give me some ideas about the light on my camera settings on my camera

Zoe Mundell

okay

Steven Bruce

thank you Super? Come to the Academy for another lunchtime learning session. I hope you're enjoying this hot weather because I don't feel somewhat overdressed myself but hopefully you're out in the sunshine perhaps with your smartphone or your tablet enjoying your lunch share While you watch this excellent bit of CPD from the wonderful Zoe Mundo now, it seems like it was only recently that Zoe was on the show to talk to us about exercises during pregnancy and related issues. Since then, she's got pregnant, she's had a baby, her son, who's now eight months old, and she's got a puppy, which is even more important from my perspective. So, welcome. You've been practising what you preach in, in during your own pregnancy?

Zoe Mundell

I have, and it's a whole new eye opener. I've been training people for years previously a personal trainer, the prenatal exercise, but the first time I've obviously actually had my own baby and realise how odd it is.

Steven Bruce

I'm tempted to offend half of our viewers were seen as the first intelligent woman I've come across, you go through all of that and says, No, I'm not doing that again. It's hard. It's really hard. Yeah, well, I can only imagine it's, it's terrible, isn't it? But yeah, so last time, we spoke quite a lot about particularly pelvic floor exercises, and we talked about your own role. You're a Pilates instructor, as well as a sports therapist, and an osteopath and experts in obstetric issues. So what are we going to cover today?

Zoe Mundell

So today, I thought about talk. A lot of people think Pilates has to be on the ground, and sometimes a pregnant I mean, that's really difficult myself during my pregnancy, I've got about seven months. And I just unfortunately kept collapsing. And anytime I lay on my back, I would just a pass out. So exercise I thought of looking at in the standing position in the kneeling position, and looking at strength and endurance for the muscles ready for birth, and also flexibility and mobility.

Steven Bruce

Okay, that's great, thank you. And we're not going to spend much time on this particular aspect of it. Because on previous occasions, we talked about the fact that what you are doing is offering advice to osteopath chiropractors that they can pass this on to their

pregnant patients. And they don't need to be a qualified Pilates instructor to do this, because we aren't just doing body work. And we're all experts in what the body does. So to worry about the insurance aspects of advising on Pilates based exercise, do that. Correct? Correct. Right. Okay, then where are we going to start.

Zoe Mundell

So let's start because I'll need to do my camera down, I've done the standing bit, let's do some standing work, I'm going to keep it really gentle. So you want to join in, please do, I'll use the chair. And we'll start with some spinal I thought we'll do spinal mobility, and then move into some flexibility in the hip and pelvis. And then we can look at some strengthening work, because they're really the big main pillars of exercise for Pilates. So we're going to start first with an easy exercise, which is the roll down, which gives your spine lots of movement. Normally, or very often, it can be done in the curl position on our hands and knees. But let's start standing. And then look, we can use our chair as a prop. So we've got our feet nicely wide apart. Obviously, with pregnant women, their base of support needs to be a little bit wider feet slightly turned out just to help with balance. And we're just going to take them lock just gently off the knees. From here, I'm going to ask you to take a nice, big deep breath in through the nose. As we exhale, we're just going to lower the chin down towards the chest. So as you do this, just slightly retract the chin in, just to gain that real length through the back of the neck. And then just roll your chin down as if you're rolling a marble down your chest with your nose as you exhale, just as far as the upper part of the neck into the upper back. And then we're going to reverse it on and then breath. Come back up to standing just a small chin tuck. First, we're going to repeat exhaling, withdraw the chin in, lengthen the neck and roll down to the chest, we might go a little bit further. Take a breath in and return to standing. I'm going to go a little bit further this time, maybe more into the upper back. So as we exhale, we draw the chin in. We roll down my hands just tracking down just to beyond my knees. Take your breath in and return back to standing if more breaths are needed. Just continue with those long deep breaths. We're going to make

Steven Bruce

up question of me to ask how we're doing that is affected by having a dirty great big bunk in front of you

Zoe Mundell

actually providing you have a nice big, broad base of support. You can go quite far quite comfortably and it's really nice to loosen off the lower back. You've also chair here should you need it for balance, but it's definitely as you get more pregnant. It's harder but it's nice to do. Due to release the bat, and that's why we can bring it down onto the floor in a moment, which gives you more space because you can have your knees wide apart. So I'm gonna do two deep ones. And then we'll do a holding on to the chair all the way down to the bottom as you exhale, bending the knees if you need to take that slack off the hamstring. But as we're in a deep lordosis to most of the pregnancy, getting that flexion in the back can be really, really nice. And then rolling all the way back up to the top. So there's your basic roll down, which is usually done as a nice warm up in Pilates. Let's just do one more than transfer into the chair. Exhale, draw the chin down. Again, you'll get so far, but as the hips go back, you're making space for the baby bump. Take a nice breath in. Exhale to come back up. Now let's just turn the chair around and use the chair for support. So maybe you need a bit of extra support as you're doing this. First of all, taking my hips, feet back further than my hips. So to have a plumb line down my body, you can see my feet are sitting further back than my hips, we can just take this back further into kind of like a down dog. If you've done yoga or a nice deep hamstring stretch dropping back, you can soften your knees, and then

gently coming up using your chair for support and gently arching into your upper back. repeating again dropping back to get that length, finding the space here between your thighs and legs to the Baby Bum. Again, I've got a broad base of support and covering back up right. Now let's just take that into that cat curl movement again. So I'm going to bend my knees. And then again, round up, draw the baby bumping towards you to round your back. And release. Lengthen as you take a nice deep breath. Repeat again. So this exercise we've done previously on the hands and knees. But now just for anyone that can't go that low on the floor, maybe someone that's elderly that can't get on the floor, maybe something's got a knee injury that can't get on the floor, it just gives you that variation. Now let's start doing some spinal side bending from here. So gently, you can just swing your hips or look at your tail on the sides, swinging your hips with your tail, gently side to side, allowing a little bit of lateral movements. And then we can take it up into rotation. So just looking up at this hand reaching up to the ceiling, allow the hips to shift that spine and then sweeping underneath reaching out across the body. big deep breath in as we worry and reach under the body. One more time lift. And release. Let's change hands lifting up to the sky. And rotating again, this can be done on your hands and knees. But for anyone that doesn't have that option. It's just a variation. Of course you can do the seated in a chair as another option. So there's the first part of some spinal mobility. Now let's take it into the hips and pelvis, maybe something slightly different.

Steven Bruce

Just before we move on, sorry, can I ask a question? Again, I don't I don't think very many pregnant women. How nervous are pregnant women generally about doing exercises like that we talked a little bit in the last show about that exaggerated lordosis that you were getting in your cat position there, which would make me feel a little a little bit vulnerable myself if I if I can imagine being pregnant.

Zoe Mundell

In my experience, they're not they want to move they want to be active. They want it just feels nice to get their body moving to get them out of sort of a certain you know slumped position, especially if they're seated in an office all day. Definitely, shortly after the baby's been born. It's really nice because you end up sitting in an egg shape the whole time you didn't eating or bottle feeling. So I don't find they really are nervous and there's no risks to be being in those positions at all. You're supported either by the floor of your on your hands and knees or by the chair. Or you could just do the same movement seated. So not that they're for mobility, not nervous at all.

Steven Bruce

But what are the what are the NHS resources for pregnant women? Are there is there advice around exercise provided by their midwives or their their nurses?

Zoe Mundell

I think it can be depend on where about which which area you're based in mine would not bring useful. General guidelines is to make sure you hydrate wear thin layers. Don't let your heart All right, go over 140 Don't lift anything heavy over your head. Yeah, don't do any really high level intervals. It's quite generic really do mental things like Pilates, I think because they know it is gentle. It can be adaptive if you're, you know, got a good teacher, adaptive, pregnant women.

Steven Bruce

Okay, sorry, I interrupted you.

Zoe Mundell

So we'll go into some mobility. Now this is great. Again, for someone that's pregnant or not pregnant, it can be done kneeling, but I'm just gonna give you the option of a chair. And then I can probably show you it kneeling as well. Really good for any patients, we're going to look at some three dimensional movements of the hip now. So I'm going to have a wide base of support. So when I put my foot upon the chair, I'm not on a tight rope. Okay, so make sure you've got a really nice wide base of support, as if you've got tram lines, and each leg has its own tram line. So I'm going to take the foot up, and that gives me some space for the bumpers. Well, same goes with wider. And we're going to come forward until we feeling a little bit of a stretch in that rear leg, toes are facing forward. And first of all, we're just going to go into extension. So just lengthening up, we can use one arm or two I'm using Hold on, and then just moving gently backwards. So we're getting a bit of hip flexion. Reaching up, there's plenty of room here for the baby bump washers on this one, I was pregnant. I'm back. And I aim for about 10 to 15 repetitions with long breaths in each of these ranges, so we're just moving forward and backwards in the sagittal plane. Using our breath, next, I'm going to come into the hip stretch. And this time, we're going to add rotation, so we can open out, I'm getting deeper into my stretch. So really opening up into the external rotators and then come back and gently across the body. Reach again, you get a lovely calf stretch as well open. And release. If you want to make it more dynamic, you can come forward as you open. An ease off. And again, the same thing, nice deep breaths or working through the hip in three dimensions. This can be really nice. If someone has pelvic pain, it also could be very aggravating. So you really have to do it on an individual basis. If they have pubic symphysis dysfunction, then the last one is lateral stretching. So we're going to shift the hips basically, from side to side. Okay, so you get some work through the doctor as well and through so us so my foot is going to be upon the chair. Again, I'm already in my hip stretch. And I'm going to reach over pushing my hips towards camera, easing away. Really great if you find somebody has hip problems, but you can't quite get a good stretch in one range of movement, change your direction, and you might find there the tighter fibres. So three dimensions of hip stretching there. I'm just going to repeat exactly the same thing before we go on to the floor with adductors stretching. So foot up, toes face towards the ceiling, standing leg toes face forward and my hips off forward, don't be tempted to rotate in towards the chair, we've got the chair for balance, and we're firstly going to move forward and backwards in the sagittal plane. So just taking a little bow. And gently standing back up. If you want to use arms to make it more dynamic, you can have a little bit of flexion reaching back. Extension lifts up. Again, about 10 to 15 repetitions, we're not holding a static stretch, we're keeping it moving and changing into rotation. So I'm going to turn my upper body away from my hip now away from my extended leg, sorry, nice long breath. And release it you can really feel that going down into your adductors. So there's our rotation and then we're going to move again in the sagittal plane. So sorry, transport sector coming across coronal plane, even if you've got a brain reaching over, this one's quite strong, and you feel this right down into Facilis all the way down. At least I do towards the knee. So three dimensions adductors work three dimensions of so ass work and some spinal mobility. Let's just bring it now into some strengthening exercises. A lot of people think Pilates has to be done lying on the floor and therefore they're like how do we strengthen the glutes and lower back when we're not on the floor? So I'm going to use a band for this. You don't have to, you could do it without a band. But let's look at some back strengthening exercises first. And this kind of crosses over into general rehab. But we can use it in Pilates, and you'll see it more when I come to kneeling. So previously, we went back into our kind of a deadlift, stretch hamstring stretch, we're going to replicate this, but without the chair. So drawing the shoulders back, take the lock, just gently off your knees, and we're going to slide the hips back and slide your hands

down your body to the floor, as far as you can comfortably go. Again, by pushing the hips back, you are making space for the baby bump. Back up, so you're wanting to maintain your lordosis. But with the baby coming towards you. And I've got a wide base, you can see here, my feet are nice and why sliding down, maintaining that lordosis. Back up, if we want to challenge it further, a general stretchy band copied under your feet and do the same thing. So I'm pulling back my shoulders, I'm working hard to keep them retracted, gently down, my arms just hanging still, they're not doing anything at all, but keeping hold of the band. And I drew my hips forward, squeezing through the buttocks. Remember, for a strong back, it all comes from your glutes, you need powerful glutes, so this is a great glute hamstring, and lower back strength. And if you want to include rows, you can stay down here and work a little bit harder. So there's one about back strengthening exercises that you can add in for pregnant women. Next, squats, we all know squats are going to be great for pairing up the glutes, you want a wide base of support, again, a band either tied around the legs, or I've got a mini band here. So I can just scoot my feet in this. If I'm cueing a pregnant woman or anyone for squats, I will always place my hands quite firmly on the outside of their knees or thighs and ask them to push and apply pressure throughout the whole of their squat. Because a lot of people go a bit limp in the knees when they squat. Or even if they say neutral, they're not really active. So when I'm cueing it, I'll put my hands there. So that replicates what I'm now getting the band to do wide base of support, you might find them more comfortable. Knees and toes turned outwards. Or it might be more comfortable in neutral. That depends on the individual, but you want to apply the abduction to work through glute medius. If they need to hold on for support, that's fine. And again, we're sitting back pressing outwards, driving up quite a simple one that you'll probably done with most of your other patients. But let's bring it on to the kneeling position in a moment and see how you can use this in other ranges. Also, if you're doing something else, maybe you're giving them arm exercises or spinal exercises, you can still have this abduction going on. So that you're working through glute medius in particular throughout that which will help stabilise their pelvis, which will help towards SI problems and potentially any pelvic symphysis dysfunction as well during pregnancy. So there are standing ones, we're gonna come on to the floor and look how we can use it in a kneeling position. But just before we do just to recap very quickly seated. Just very briefly, all of those exercises you can do in the seated position. So you've got spinal curls, coming up and down. You've got obviously your rotations you can twist and reach just to have that movement through the spine, their side bends obviously quite simple. You can even add to it and had a bit of rotation and beside them together give them a big challenge. And your hip stretches mainly to be done on the floor but you can do your adductor one I would come to the corner of the chair and stick your leg out. And again you can do the forward movement and back you may want another chair in front for support. But that could be done in this position. What I wanted to add before I came off the chair which is really good if people are quite stiff in one SI joint or the lumbers and that is to actually come to the tip end of the chair, make sure it's stable and to what lift your buttock and rotating backwards and then pull it back down again, and then the other one walk backwards. So I'm just on my tippy toes, and I'm lifting my buttock up on Walking back into seats, and then rotating or walking forwards. This is great to do. Generally people with back pain, they can do it in an office desk, they could do it on an aeroplane sort of their backs getting stiff. You just need the movement in the chair and sort of nice and tall.

Steven Bruce

rotate to the comments in from somewhere. Olivia, who says that? I think these exercises benefit not only pregnant patients, but also anyone working in sedentary occupations, which of course is true. I mean, exercises exercise, isn't it? What we're doing here is finding ways

that pregnant women can do these exercises without feeling they're gonna fall over or hurt themselves or whatever else.

Zoe Mundell

Absolutely, absolutely. We delivered during lockdown absolutely loads of classes like this for people sitting at their desk. And it was really nice because it was possible for people to do that perhaps a wheelchair bound people who were just at their desk who were pregnant, or who couldn't get on to the floor. So there's absolutely loads of things that you can still do seated, which will be really beneficial. So that's a really nice one to get the mobility in the hips. And you can also if you've got a broad enough chair or bed, you can actually get people to go side to side. And you get to note some really funky things with people, especially if they're coming in with back pain, but actually it's a hip issues function the hips, so that's quite a good one to do laterally. As well as more than that.

Steven Bruce

Jules has asked what doesn't doesn't work for pelvic girdle pain or Symphysis symphysis, pubis disorder, any recommendations?

Zoe Mundell

Well, usually it's aggravated either or from forward moving scissoring movements or lateral movements, some people can be fine with one and not good with the other. So it's really working on stability of the pelvis. So again, going back to pelvic floor exercises, some of the glute exercises that I'm going to add in a moment, but you also need to be quite narrow, usually in your stance for it. And and I think I said previously, I usually find one SI joint is not moving as well as the other. Sometimes I can only pick up that subtlety when I look at it from a cranial and BLT point of view, but there's usually one that's really mobile, I find one, it's just not moving quite as well. So I tend to loosen that off manually and then or with some MDT stretches, and then work to stabilise it, which would be the stability exercise that we'll look into coming into in a second.

Steven Bruce

Okay, but thank you, sorry, sorry. apologise for interrupting you.

Zoe Mundell

As we take some because in the short term, if you have stabilised it, I sometimes use a bit of sports tape just to help again give that feeling of stability to continue on. Whilst they do their strengthening work, just to give you that temporary help, I'll go on to nearly exercises, again, with the chat the way I might just take the camera down a tiny bit, because you won't see them out otherwise. So I'll add in some of some of the stability exercise, but I think I had them in the other video. So we've already just said about the spinal mobility, we've said before, just very briefly, the cap held in this position, side bending either walking round to the side, or you can rock your feet, these are all in the previous videos, and the rotation ones. So they're really simple ones to do. So hip mobility, again, addition under the knee, wide base, and you can use your extension, if you don't need to hold on, you can use two hands, if you want to hold on, you can use one. So you've got your flexion extension, we've got rotation. And we've got the side bend where we shift laterally in and out. So there's your hip mobility, and again, your adapter exercises can be done with foot outside. So that's just changing your angle. Let's look at some strengthening, again for lower back and glutes which are your powerhouse to protect your whole area. So, we can do our deadlift or standing deadlift from the kneeling position. Again, a nice wide base of support and cushion under your knees if you need it. And we're just going to sort of sit backwards and reach

down towards the floor. Now thinking about it the most mums, although you have these fantastic changing tables, which I've got never ever use it. You always ended up changing your baby pretty much on the floor. So you're going to be kneeling over them in this position changing their nappies. So make your exercises nice and functional. You're going to be over the bath doing the same sort of thing. So this is really great. Coming down towards the floor, make it more challenging, reach the lever outwards. Come back and extend your squeezing through the glutes. You're maintaining your two core control through your stomach muscles as you go and you're taking nice long breaths as you do the exercise.

Steven Bruce

Interesting. You mentioned the core, there's only because Carrie says when patient when you're doing the stretch for adductors, or any stretches, should patients be trained to engage their core muscles,

Zoe Mundell

I wouldn't really engage their core for a stretch, I would make sure that they are breathing. And generally when you're exhaling, you're recruiting more through those muscles anyway. But I wouldn't be consciously directing them to pull in their core muscles during a stretch unless it's more about balance, and you're using your core muscles because you're off balance.

Steven Bruce

And would you ever do any of these are exercises with say dumbbells?

Zoe Mundell

Yes, again, you can make this harder. So if I wanted to make the The wonderful thing about Pilates is you can reverse it or any exercise really, you can make it as simple as you want, or as harder as you want by basically extending the lever and extending the load or extending the duration that you're there for. So if I want one of the big exercises do you do rehabbing below a bat is lying on your stomach doing back extensions, this is basically the same thing. So I can come down, lengthen my lever, I'm in extension, and if I want to work harder, I can reach my hands back into what's called swimmer. But my aim is to remain stable. So I'm not jiggling around all over the place. If I wanted to hold something in my hand, I could do so also to make that harder, holding a small dumbbell holding a bar holding a pole, you could do any of those exercises. Similar kneeling position again, your knees are fine. Having your hands up gently in front of you is the camel was squeezing through our glutes it works like a squat. You also get a good stretch in the front of your tummy hinging back as far as you can manage avoiding popping the ribcage. So you're drawing the baby in towards you squeeze your glutes and your yourself for this one's quite challenging, especially if you have tight quads, you can make this harder you could reach one arm up in this position, back down with a long breath, you can reach the other hand up and stay here. Return back, I can make it harder again, come back, take both hands into the air. I'm not even adding weights. Yeah, I could return back. I could do the exercise with my hands in the air. So I don't have that forward support. Much harder, return back and that's even without adding any load. But that you're working glutes you're working hamstrings you're working for because anything where your legs and arms are moving, it's always isn't a call. Next, let's look at strengthening through the glutes. Again, we've got our hip bridges. Now there's only certain time in pregnancy that you'll want to be lying on your back. And one of the exercises to avoid or advice for avoiding pregnancy is inversion. So anything where your hips are higher than your head. I would say for some people who've been practising a long while you have no medical complications, they may feel quite comfortable with that exercise. But as the pregnancy goes

on, they it's advised less only to lift the hips high in the heart. So in the early stages of pregnancy, you do a lovely Glute Bridge. Very simple, again, slightly wider base of support, pressing down through the hole of the foots, squeezing the buttocks, drawing the abdominal muscles inwards, and as you exhale, you're going to lift gently up squeezing through the glutes, again, avoiding popping the ribs and then gently back down. So this could be classed as a inversion because your hips are going slightly higher than your heart, but it's not a huge distance. And you might find quite a few women are very comfortable with this. But if you wanted to change that so that they're not lifting as high but you still wanted to work the glutes. Come back onto the hands. Make sure you've got lots of lift through the chest and do the same thing here. Push through the glutes, squeeze the bum. Look for that. Lengthen the hips and then gently lower down where Pete squeezed through the bum push through the feet lengthened through the hips and gently

Steven Bruce

lower. So you said earlier on I think possibly before we came on air that when you were pregnant when you lay down you would think if you later on if you laid on your back. Now, you also said that pregnant women are often told not to raise their hips above the level of their head not to invert. So if someone were to take a recommendation like this and try the exercise, and then find that something like that happened, let's say they fainted. Is there any comeback on the person who's advised that exercise do you think?

Zoe Mundell

I think if you're I would if I was advising any exercise the first And we want to do obviously, is start with the most simplest, the simplest of exercises that have no contraindications or the word when when we re not supposed to, or not contraindications, but side effects. Yeah, for backward. And then, as you know, your patients, you'll know what they're capable of, and what they're comfortable doing. But it's really important with any exercise you give to anyone but particularly pregnant woman, you empower them to know their body, and to know what feels comfortable, and anything that doesn't feel comfortable at all, or makes them just just just, they're not happy with it. It just didn't sit quite well with them, then take the exercise out, and I think you'll find that they're very cautious anyway, I would my the fainting that I had came on just sitting in a chair, I didn't have to be lying on my back, it would just be anything sitting. But yeah, I would make sure that they're very, very comfortable at any exercise that you give them always given that caveat, if it doesn't feel right for them. If they're not practised in Pilates, they've not been doing it for ages, then I certainly wouldn't add in a new exercise like that one, but there's only really two exercises I would think when you do lift your hips higher than your heart one is that bridge and the other would be a downward dog. So you know, you'd be up to you with you choose to give that person that exercise.

Steven Bruce

Okay, thank you. I've got a few other questions for you. Well, while we're pausing, Vlad has said is that the locomotion dance you were doing earlier on with your baton a chair flatterer you must be showing your age and taking us back to the days of disco there. Jason says isn't the point of the stabilising muscles that they work throughout the whole movement to achieve this achieve the stabilising effect.

Zoe Mundell

So you say that, again,

Steven Bruce

isn't the point of the stabilising muscles that they work throughout the whole of the movement to achieve their stabilising effect.

Zoe Mundell

Yes, when did they not?

Steven Bruce

I'm not quite sure why Jason thinks that's not what you were. You're suggesting. Jason, come back to us from and just clarify what it is that you think we've missed out on. But yeah, stabilisers stabilisers, don't they?

Zoe Mundell

Yeah, I'm not sure I can't I don't, I've just done some acts as a camping what which one, I agreed in principle and hunting, which one I'm thinking of specifically. Which exercises Yeah.

Steven Bruce

So let's move on. Just over 10 minutes left,

Zoe Mundell

okay, I'm on trumpet, whatever, whatever, country. So we did.

Steven Bruce

We've just doing bridges.

Zoe Mundell

Yeah, we've just done some bridges we've done it into. So if we're into this position, this is where you wouldn't be going higher than the heart, you're going level with the hearts that will make it easier working through the glutes. We did back extensions, we could do some abdominal work, we did some abdominal work previously, which you're often thrown off my flow things then. And we did some abdominal work on your all fours, which is quite easy to do in pregnancy, if any risk problems, you could go into neutral onto your knuckles or place your hand and some dumbbells for support. But here, we want to draw the tummy in without holding the breath. And on the exhale, we could do some hobbits. So you can either have your feet flat on the floor, which makes you work much harder through your spine, or toes gently curled underneath you. And from here pushing through the hands making a nice strong upper back, you can just hover the knees off the floor, I normally get patients to count their breath cycles rather than minutes to make sure they're not holding their breath. So they might want to start off with just maybe three breath cycles, and then lower down and loosen off the risks. Obviously, the stop any Rick's aggravation. The higher the knees are off the floor, the easier this is and if the toes curled under, they can use their legs a lot. So it's really good if they don't cramp in their feet. And then they get really good core exercise there. And then another one that they can do in this position, I think we did last one of the other courses is to let the summit really below down to the letting the baby almost swing without the back dropping into an arch. And then as the exhale, draw the baby up into the spine. Again, hold for three breaths cycles, maybe up even to 10 breath cycles. Just to be clear breath cycle is one in breath and one out breath. And then just to release and again, let the baby just hang down. This gets quite challenging but really effective as obviously the pregnancy develops. Another way of working the abdominal muscles, working the obliques can be inside lining. We can come all the way down I think I'm still on camera can't see you can see me lying on your side slightly banana shaped because that will help with your balance, giving your head for support and the hips are stacked knees are stacked feet to stacked Top pan just lightly

on the floor in front of you. And then as you exhale, you can just lift up. So I'm squeezing through the side of my waist, and slide back down. Again, if they need the support, they can use this top hand, just as a little bit of a push, but you're really drawing in pulling in from this underside arm and working through your obliques. If you want to work harder, you could lift the top leg at the same time. And lengthen if you wanted to work really hard, you could lift both legs. And you could just do it just with the legs, lifting the leg up and down, or lifting both legs up and down. So got much longer lever working from the legs. So that's a lie strengthening exercises through the stomach through the back. Glutes we've just looked at from squatting from bridging. You can obviously also do abduction work in the kneeling position. Obviously, most people will know your clams, you can make it work harder by lifting the feet and then working your clam movement. And of course, you've got the option of using bands around the thighs just to make it harder. And again, another wise one with a bands like glute work in prone. So skimming through loads of exercises, just to give you some ideas. And I haven't talked to loads and loads about the breath work because again, we've done that in the previous ones. But this is all done following a foundation and really using your exhalation to give people that time to really work through these exercises. But I've just hooked the bands around my feet. And from here, I can kick back and down really working through the glutes into this position and kicker is bands really tight actually. But really hard once I

Steven Bruce

put some effort into it,

Zoe Mundell

I want to insert that position. But I've actually picked up a really hard band that makes it really tough

Steven Bruce

abducting your hip while you were doing that it was that straight back.

Zoe Mundell

That was straight back. But you can again, a really nice one from production when you've got the bands around your thighs. So if I had this up around my thighs, if you push away, outwards, so not that kind of hinge back, if I show you square on, you deceive, I do it incorrectly, I'll skin my hips, but instead just draw the knee out into draw money out in production, you get a really nice external rotation work, which of course can be done also sitting in the chair as well.

Steven Bruce

But that's taken us what the better part of 14 minutes to run through that. So realistically, I imagine without the chatter and the questions it would take 30 minutes to for a patient is that is that reasonable for a pregnant woman?

Zoe Mundell

I mean, yeah, I wouldn't it depends on what they're coming in for the talking about a Pilates exercise class, or whether you're giving them rehab, or exercises to do in a clinic setting. I would choose what what are they coming? What are they coming to you for? are they wanting a little bit more mobility in their spine or in their hips? And are you looking for some strengthening again of the hip and pelvis. So it only ever give somebody I think to begin with three mobility exercises and three strengthening exercises at a max to realistically do it. And I would probably introduce those over two sessions. If once they'd got used to those

exercises. They wanted more variety or they needed more challenges, or perhaps adding another one or adding another two once they've been practising it for a couple of weeks.

Steven Bruce

Jason's can, we'll follow up on his question. He said that when you said earlier on, you shouldn't focus on transversus abdominus. But pieces people with poor proprioception will probably need to focus on TA in order to ensure that they're firing.

Zoe Mundell

Yes, but I mean, I've said before, I haven't gone through loads about the setup of Pilates of doing the breath work of doing finding their centre and things like that. But yeah, it was he told what I was saying about in stretching. I wouldn't be too concerned about it, I think during a stretch, but yeah, I'm absolutely what if I started Pilates with someone right from scratch, I would start the first session is on the breath work on using exhale to help work on the pelvic floor and engaging that TA and that's one of the first principles that you start start with you even come on to the movement as well.

Steven Bruce

Okay. I think you're also one of my questions as well because I was thinking is this is this a routine that you would give just as a general routine to all pregnant women coming through your clinic as guidance to keep them healthy throughout their pregnancy? But you are adapting this to suit whatever might be going on with them. Of course, as any practitioner would be

Zoe Mundell

Oh, absolutely, I think to be honest, anyone that comes in with back pain, I nearly always give them I don't have to malar dice on it does, we have my patient, I use that a lot. And I always have a little programme that I've pre set up that I can give out to new patients, just it makes them feel like they're getting more for their money, that stuff that they can use, it's really a great resource to be able to use, but I always give my patients cat curls, rotations, maybe a glute stretch, you know, I've got a little routine that I tend to get people to do, and just to get mobility into their backs if they're really stiff to begin with. So there's always things that I will always leave to pregnant women. And they will always include Ed standing mobility exercises first, if they're not hyper mobile or suffering with anything really specific, but I will always give him those exercises first, and I will always give them pelvic floor exercises on day one.

Steven Bruce

Right. Okay. And we had a question, I think in one of the last broadcasts about whether strengthening the pelvic floor actually might make the delivery of the baby more difficult and challenging.

Zoe Mundell

No, no, if it's tight, that you didn't have a very tight pelvic floor and overactive pelvic floor that can cause problems. And this can be also relevant after pregnancy that can also be down to anxiety and stress as well as lots of other underlying conditions. That goes a bit more into women's health. But what you want to do is if you can strengthen something part of the breath work is also to help you relax it. So between contractions, you're working to use your breath to lengthen and contract. If you don't train, it could just stay in that sort of spasm st, as it were. So it's something I'd recommend hugely important. The post pregnancy is holding all of your organs in place to avoid any risk of prolapse after labour.

Steven Bruce

Yes. Last question for you this one from Jules. Jules says, what number of repetitions are you recommending for strengthening? And of course, I'm thinking about the shows we've done with Claire Mitchell, who's who says, you know, five reps to failure is what you need to increase strength efficiently. But that might not be feasible when you're pregnant.

Zoe Mundell

Exactly. It's the guidelines around that when it comes to pregnancy on it's clear, I would say agree with Claire when it's coming for strength training for my pregnant clients that aren't pregnant. In pregnancy, because we're working a little bit more towards insurance, I would push that more, especially if you think about a labour can go on for hours, hours. You know, the inactive part of labour can be two hours long, if not the whole contraction parts in women can be really weird position or they can be squatting, they can be kneeling, you need to build up endurance in those muscles more than anything else, so I wouldn't be looking for more repetitions I'd be going higher to was 15 repetition off.

Steven Bruce

Okay, Super, thank you. Carmel is not the only one to have said this. But she's actually sent in a comment to this effect. She's saying she's obviously many pregnant patients. But this is brilliant. As you said, you're a great presenter Zoey. And I would second that this has been wonderful and lovely backdrop. Of course, even the squirrely went across the fence while you were talking earlier on. Your puppy is behaving herself himself.

Zoe Mundell

Yeah, she's asleep over there.

Steven Bruce

So it's been brilliant. Thank you very much for your third session from you're giving up your time. i That's a nice, nice to know that you now have the opportunity to prove that what you say does work having gone through it yourself. Yeah. Your son is doing well.

Zoe Mundell

I hope. Yeah, he's good. He's asleep up there. But yeah, all

Steven Bruce

brilliant. We've got 281 people watching this lunchtime, which is I mean, that's pretty good for for a hot lunchtime like this. So hopefully, there'll be lots of pregnant patients who are benefiting from your advice there. And of course, I hope we can get you on the show again, at some point in the future. Thank you. Super. That's it for this lunchtime. I have been asked by salami Olivia, about the chick who was in my email last night. Sadly, the poor little thing was doing quite well yesterday afternoon but didn't survive the night and my boy died this morning. I don't think it was due to my inattention to her care. We get our best for her, but she was in a very sad way. So sorry to break that news to you. Looking ahead, though, and sort of segwaying neatly on from Zoe's presentation today. I have got Nicky Scott and Claire Forrester coming in on Tuesday into the audience to talk about hyper pressive be breathing, which is a fantastic technique for what they term as their leaky ladies. Now, I wouldn't put you on the spot and saying and ask you if you are a leaky lady, but have you come across my progressive breathing before?

Zoe Mundell

Yes, I just think anything that works towards the breath work and to help the pelvic floor is much much much much needed for so many people. Not just pregnant young people that have had babies years ago or people that are older. Got any problem from the Yeah, brilliant. Brilliant.

Steven Bruce

Yeah. And so often people are just not given any advice for for years and years over how they can deal with these problems. They just tend to live with it because that's why happens when they give birth to anyway, Nikki's got Claire forester coming in to talk about high progressive breathing.

DRAFT TRANSCRIPT