Resistance Training During Pregnancy

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RESEARCH SHOWS WOMEN WHO maintain physical activity during pregnancy have more energy and feel better throughout gestation, gain less subcutaneous fat, have fewer cases of gestational diabetes, have less incidence of postterm and cesarean delivery, deliver fewer large-for-gestational-age (LGA) infants, and experience fewer complications of delivery, including fetal distress, presence of meconium, and low APGAR scores. Resistance training is one form of exercise that should not be overlooked as an essential prenatal activity.

Resistance training during pregnancy gives expectant mothers additional advantages. First is a swifter recovery from labor and delivery. Labor is an endurance event, lasting on average about 12 hours. No athlete in the world would perform a marathon without training for it, and neither should pregnant women avoid training for their unique endurance event. Skeletal muscles throughout the body contract during labor because of the intensity of the uterine contractions. With each labor contraction lasting 30–90 seconds and being about 30–60 seconds apart over several hours, muscles become fatigued rapidly. Even women who have mastered relaxation techniques for labor or who have had very short labors report feeling muscular aches the day following delivery. Prenatal resistance training can ameliorate this muscular soreness.

Second, resistance training has been shown to increase bone mineral density. People with greater bone density have less chance of developing osteoporosis. Osteoporosis affects more than 25 million people in the United States, and 80% of those are females. Research has shown that women experience a measurable lactation-induced loss of bone density in the postpartum period. Resistance training during pregnancy helps build extra bone density to offset this loss and reduce the risk of osteoporosis.

Muscular endurance training (low resistance and high repetitions) is the most appropriate way to prepare for labor and delivery. Every muscle group needs to be targeted and a few emphasized. Adductors, hamstrings, gluteals, upper back, and posterior deltoids will most certainly be used during labor. The transverse abdominal muscle, if trained properly, can be used to help push out the baby.

Strength professionals should take the time to become familiar with the unique physiology of pregnancy (such as increased laxity in the joints due to the hormone relaxin) before prescribing a resistance exercise routine for a prenatal client. Proper form is especially important in this population. Once a specific exercise becomes uncomfortable to perform or if the abdomen prevents proper alignment, the exercise should be discontinued.

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