

Medical experts who took part in the National Forum on Pregnancy and Sport advised that damage to the womb of the kind that could injure an unborn child is usually associated with forces equivalent to those occurring in a car accident. All medical experts agreed that falls and direct contact of the kinds that occur during contact sports were unlikely to cause damage to the womb or the unborn child.

While there may be risk involved in physical activity for some pregnant women, most doctors and researchers believe that the benefits of being active far outweigh the risks, even for those who wish to continue to participate at a high level.

While the benefits of women staying active during pregnancy are well documented, <u>all decisions about the matter should be</u> made by the individual participant in consultation with medical advisers.

## Benefits

Pregnant women who were active before becoming pregnant may benefit in many ways from regular participation in sport. These benefits may include:

- a reduced risk of developing cardiovascular disease;
- better general health;
- a reduced risk of developing some forms of cancer;
- a reduced risk of acquiring type 2 and gestational diabetes;
- a reduced risk of developing osteoporosis;
- a reduced risk of obesity and unhealthy weight gain;
- improved self-esteem and self-image;
- a greater sense of wellbeing and quality of life;
- more social contacts; and
- improved respiratory function, cardiac output, blood volume, strength and endurance.

Theoretically, pregnant women may be more vulnerable to falls because the growing foetus causes a shift in their centre of gravity, which can affect their balance and coordination in later months. More care should therefore be given to awareness of, and maintaining of balance. This may include slowing down one's practice, easing or removing individually challenging and/or risky moves, or through using partner/s, wall, props etc. to assist balance.

Theoretically, hormonal changes in preparation for the birth may result in ligament and joint laxity, making women vulnerable to injuries or falls (they should avoid excessive stretching and ballistic movements as a result). Forms, routines and drills should be done at a reduced pace to allow more self-awareness of balance and stability.

As the foetus rises higher in the abdomen later in the pregnancy, it is more vulnerable to direct impact injuries. Obviously no sparring, partner contact exercises or overly physically demanding exercises should be done whilst pregnant.

There is an increased risk of Hyperthermia (overheating) in the foetus (especially during the first trimester of pregnancy). It is important for pregnant women to avoid prolonged overheating during exercise by taking extra rests as necessary, drinking plenty of water, training in a cool environment, and reducing exercise intensity.

Provided that pregnant women regularly consult with their medical advisers, comply with the medical advice they receive, and adopt a common-sense approach to planning their training and performance program, it is unlikely that playing sport will cause them problems.

Sports Medicine Australia advises pregnant women not to increase the intensity of your sporting program while pregnant, and those who have exercised regularly to maintain a moderate exercise level (that is, at no more than 75 per cent of maximum heart rate).

Members who are pregnant are to obtain medical advice before making the decision about continuing to train. Pregnant practitioners should be aware that there may be risks and that they should discuss these with her doctor, as well as whether it is safe for her to continue participating and, if so, for how long. The member is supported in exercising her right to make her own informed decisions about her health and her body, and her right to the benefits of an active life. The pregnant member should inform the instructor at the soonest possibility so they can best implement the appropriate risk management strategies. The pregnancy will be kept as private as practicable.

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Sports Medicine Australia recommends that pregnant women (and, indeed, all athletes) stop exercising if they experience any abnormal symptoms, such as:

- pain, particularly chest and abdominal pain;
- headache;
- an unusually high heart rate;
- decreased foetal movements;
- insufficient weight gain;
- amniotic fluid leakage;
- nausea;
- uterine contractions;
- vaginal bleeding;
- sudden swelling of ankles, hands and face;
- dizziness; or unusual shortness of breath.

For legal protection, BKF Instructors should avoid giving advice that they are not qualified to give, and encourage pregnant athletes to obtain and act on professional medical advice, particularly about the risks of continuing to play and when to stop.

It is also important that women's pre-pregnancy levels of training and fitness, and the types of sports they play, are taken into account when planning the type, intensity, duration and frequency of the exercise to be undertaken during pregnancy. Individual maternal and foetal responses to exercise, varying levels of maternal fitness, and potential coexisting medical conditions and pregnancy complications mean that counselling of pregnant sportswomen should always be done on an individual basis.

## **Post Pregnancy**

Relaxin (the hormone responsible for ligament and joint laxity) can still be present and potentially problematic in the year after giving birth, so continued care and caution should be exercised during this period.

Over exertion postpartum can have a detrimental effect on breast milk production, so should be taken into consideration as well.

As per during pregnancy, women post birth are urged to obtain medical advice before making the decision about returning to their martial arts training.

## RESOURCES

AUSTRALIAN SPORTS COMMISSION ANZSLA — the sports law association (2001) Pregnant athletes: a review of the legal issues. Paper on the Australian and New Zealand Sports Law Association website at www.anzsla.com.au/forum\_paper.html.

Australian Sports Commission (2002) *Guide to best privacy practices for sporting organisations*. Canberra: Australian Sports Commission (available online on the Australian Sports Commission website at <u>http://www.ausport.gov.au/asc/corpdocs/privacy.htm</u> or via the resource library in the Active Australia provider members' area).

New South Wales Department of Sport and Recreation (nd) *Mum's the word: exercise during pregnancy*. Sydney: New South Wales Department of Sport and Recreation.

Opie, H (2001) Medico-legal issues in sport: the view from the grandstand. Sydney Law Review 23(1), 386-92.

Sports Medicine Australia (2002) SMA statement: the benefits and risks of exercise during pregnancy. *Journal of Science and Medicine* 5(1), 11–19 (available by mail from Sports Medicine Australia or by email from smanat@sma.org.au).

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