



# INTERNATIONAL HEALTH AND FITNESS ASSOCIATION (IHFA)

(Registered by Ministry of Corporate Affairs , Government of India)

<https://www.ihfafitness.com> | [info@ihfafitness.com](mailto:info@ihfafitness.com)

## Welcome to IHFA - a worldwide group of qualified trainers & therapists

International Health and Fitness Association incorporated by the Ministry of Corporate Affairs, Government of India under section 8 as a non-profit company. IHFA - International Health and Fitness Association is the worldwide organization engage to encourage health and fitness for all - through its affiliated Contributors & Stakeholders

**Continuing Education & Training Programs for Professionals**

**Conference**

**Seminars**

**Hands-on Workshops**

**Journals**

**Sports & Games**

*To prevent Non-Communicable Disease (NCD) with National and International collaborations.*

*To encourage, support the International exchange program on health, fitness and sports sciences*

*To support and encourage all international and national stakeholders in term of Education, Training, and Research.*

*To promote fitness through sports and games.*



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***This Certificate is aimed at physiotherapists (women's health expert) working in the specialty of Women's Health in a variety of health care settings. It offers physiotherapists / women's health expert a range of opportunities to develop an evidence based approach to clinical reasoning through the ability to identify, analyze and interpret the current best available evidence and apply this to the rehabilitation and promotion of Women's Health using appropriate assessment and therapeutic intervention skills.***



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*Physiotherapy is an important part of obstetric case but is greatly neglected by health providers. Infact there are many myths that exercises should be avoided in pregnancy to avoid any mishaps. Although strenuous exercises, weightlifting and heavy work should be avoided in pregnancy, light exercises and antenatal and postnatal exercises are a must if the woman wishes to stay slim and fit after delivery. According to the Chartered Society of Physiotherapists of United Kingdom, the role of the Obstetric Physiotherapist is to help the women adjust to the physical changes throughout the pregnancy and puerperium to minimize the stress.*



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Physiotherapy can be started very early in pregnancy and helps the women cope up better with the physiological and psychological changes occurring in pregnancy. The woman can be made aware of the various physical and mental changes occurring in pregnancy to cope her better with the ongoing pregnancy. Postural and weight changes, sitting and working positions, bending, lifting and house hold chores should all be considered. The physiotherapy can assess and treat any back problem and give advice about various relaxation exercises which are useful to ease out the pain. The obstetrician should be aware of these problems and should not hesitate to take help from a colleague in physiotherapy to guide and advise the patient better. It will also ease him or her as obstetrics practice is often very busy and it is best to leave the antenatal exercises and their correct explanation to the physiotherapist who is dedicated to the service of women. Preferably all the leading hospitals should have a dedicated and interested physiotherapist catering to the needs of pregnant and puerperal women for better result.



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The correct advice on the right posture while standing, sitting, bending and lifting can help in preventing backache and pelvic girdle pain in pregnancy. The various disorders associated with pregnancy can be treated in consultation with physiotherapist and if needed with orthopaedician like sacroiliac dysfunction, sciatica, and coccydynia, carpal tunnel syndrome, patellar chondromalacia, varicose veins in the legs and stress incontinence etc. The relaxation exercises can be taught to the women to fight stress and anxiety related to pregnancy and childbirth especially in a primigravida women, Pelvic floor exercises are useful in urinary incontinence which is common in pregnancy and puerperium, Abdominal muscle and pelvic floor exercises are helpful in maintenance of abdominal muscle strength correcting posture easing backache and treating stress urinary incontinence. Similarly foot and leg exercises can be taught to improve blood circulation in leg which will keep legs cramps at bay. Antenatal advice on breast care is very important which includes wearing a good supporting brassiere, nipple care and includes correct method and position of breast feeding which will go a long way in successful breast feeding after the childbirth . Relaxation during labour helps the mother to prevent her from becoming unduly tried. Managing the back and perineum is useful in alleviating pain to some extent and for successful vaginal delivery and reduces the rates of perineal trauma during labour. Physiotherapy is even more important during puerperium of both normal delivery and caesarean section and helps in prevention of deep vein thrombosis and chest problems. Deep breathing exercises, leg and foot exercises and pelvic floor exercises are valuable in prevention of many complications and in helping women to cope up with the demanding role of a new mother. The various post-natal problems like painful perineum, back pain, symphysis pubis pain, leg edema, urinary incontinence, deep vein thrombosis and varicose veins can be safely treated by various physiotherapy modalities like interferential therapy, ultrasonic therapy, transcutaneous electrical nerve stimulation (TENS) and infrared radiation along with physical exercises after careful assessment.



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*The woman should also be taught the correct way of breast feeding, nappy changing, bending, lifting, sitting and lying to avoid stress to the back muscles and to avoid pain at caesarean and episiotomy sites. She can be taught to support the stitches every time she coughs, sneezes, walks or laughs by the putting her hands on the caesarean site. Hence physiotherapy plays a great role in antenatal and postnatal care and the attending physiotherapist is a very useful member of the obstetrics team and is not an intruder or obstacle in the care. However balance and caution needs to be observed and serious diseases must not be missed as just obstetric symptoms of a hyper anxious patient. A careful vigilance has to be kept at all times by the attending obstetrician to give optimum care to the pregnant and puerperal woman including physiotherapy for the successful maternal and perinatal outcome which is every pregnant woman's dream and right.*



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## **CERTIFIED ANTENATAL POSTNATAL EXERCISE SPECIALIST**

Certification by: **International Health and Fitness Association (IHFA)**

**Module I : Pregnancy, Birth and Beyond**

**Module II : Postnatal management, fertility enhancement program,**

**Adolescent care – (PCOS, premenstrual syndrome . etc**

**Pelvic floor rehabilitation , Lactation counselor**

**Certificate Course 2 days Hands on**

### **Day 1**

**Introduction-** Introduction of course content and participants. Overview of prenatal and postpartum exercise viewpoint / Need & scope.

**Introduction:** Rationale for Prenatal, Postpartum and Post-Cesarean Exercises. Evaluation, modification and progression of exercises. The high-risk prenatal patient, pre-existing conditions.

**Contraindication &precautions of exercise**

**Antenatal Exercise prescription** (modified & progressive) respect to gestational age

Ist trimester | Second trimester | Third trimester

**Prenatal Exercise Class Setup & Management**

**( Hospitals & Clinical Practice )**

**Postnatal - Evaluation & Abdominal Rehabilitation**

**Demonstration Prenatal Exercise Classes**



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# Women's Health and Rehabilitation

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Certification by: **International Health and Fitness Association (IHFA)**

**Postnatal management, fertility enhancement program,  
Adolescent care – (PCOS, premenstrual syndrome . etc  
Pelvic floor rehabilitation , Lactation counselor**

**Brief discussion** - Anatomy, Physiology and biomechanics of the Childbearing Year: Rationale for Prenatal, Postpartum and Post-Cesarean Exercises. Evaluation, modification and progression of exercises. The high-risk prenatal patient, pre-existing conditions.

Assessment and Management of **Pain and Dysfunction in the Childbearing Year.**

**Labour-** Physiology of Normal Labor. Childbirth. Debates. **Birth**

**Videos:** *The Squatting Position Delivery*, Physiotherapy management in labor (**Lamaze breathing & birthing** )

**C-section – post op management & precaution**

**Post natal evaluation & exercise prescription – basic**

**Childbirth education classes setup**

**Abdominal Taping in pregnancy**



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- **March – Chennai**
- **March – Kaula Lumpur**
- **April 2019 - New Delhi**
- **Jan 2018 – Vishakhapatnam**
- **June 2018- New Delhi**
- **Sep 2018 -Chennai**
- **Dec 2018- Delhi**
- **March 2017 – Mumbai**
- **Feb 2017- Hyderabad**
- **Jan 2017 – Mumbai**
- **Feb 2017- Hyderabad**
- **Dec 2016- Delhi**
- **Sep 2016 – Bangalore**
- **July 2016 - Mumbai**
- **Dec 2015 - Bangalore**



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