

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists Excellence in Women's Health

Exercise during pregnancy

There are many benefits to be gained from regular exercise during pregnancy. These include physical benefits (lower blood pressure, reduced risk of gestational diabetes) and the prevention of excessive weight gain, blood pressure complications and improved psychological wellbeing. There is also evidence that regular, low impact exercise reduces the risk of preeclampsia.

In addition to pregnancy-specific benefits, there are significant lifelong benefits of regular exercise for all adults including reduced risk of cardiovascular disease, type 2 diabetes and some cancers.

Before you start an exercise program in pregnancy, speak with your doctor or midwife to make sure that you do not have any health issues that may prevent you from participating in regular exercise during your pregnancy.

If there are no health or pregnancy reasons why you should not exercise, you should be encouraged during your pregnancy to participate in regular aerobic and strengthening exercises. Importantly, there is no evidence to suggest that regular exercise during a healthy pregnancy is harmful to you or your baby.



How often should I exercise?

Aim to be physically active on most, preferably all days of the week. If you are currently inactive or overweight, start with 3 to 4 days per week, every other day (for example: Monday, Wednesday, Friday and Sunday).

How hard should I exercise if I am fit?

Most women should aim for a moderate level of exercise. This means you should feel like you are working 'somewhat hard' (see table).

For women with a high level of fitness who are accustomed to regular vigorous exercise, there is no evidence to suggest that vigorous exercise during pregnancy is harmful, provided that you listen to your body and adjust your routine over time. A exertion level of 'hard' (see table) may be appropriate. However, athletes should be wary of pushing too hard. Pregnancy is not a time for serious competition or aiming to reach peak lifetime fitness.

How long should I exercise for?

Aim to do 2.5 to 5 hours of moderate intensity physical activity each week. Ideally, this should be achieved by being active on most days of the week for at least 30 minutes at a time.

If you are currently inactive or overweight, start with 15 to 20 minutes and slowly build up to 30 minutes per session. While no evidence exists for an upper limit to exercise duration during pregnancy, it is not advisable to extend exercise duration beyond 60 minutes per session, unless the intensity is relatively light.

How you might describe your exertion	Examples
None	Reading a book, watching television
Very, very light	Tying shoes
Very light	Chores like folding clothes that seem to take little effort
Fairly light	Walking through the grocery store or other activities that require some effort but not enough to speed up your breathing
Somewhat hard	Brisk walking or other activities that require moderate effort and speed your heart rate and breathing but don't make you out of breath
Hard	Bicycling, swimming, or other activities that take vigorous effort and get the heart pounding and make breathing very fast
Very hard	The highest level of activity you can sustain
Very, very hard	A finishing sprint in a race or other burst of activity that you can't maintain for long



What type of exercise should I do?

You should be encouraged to participate in both aerobic and strengthening exercises.

Aerobic exercises

Aerobic exercises involve continuous activities that use large muscle groups and elevate the heart and breathing rates to cause some 'huff and puff'.

Common examples include:

- walking (aim for a brisk pace)
- stationary cycling
- swimming and other water-based activities (avoid heated spas and hydrotherapy pools)
- if you are already running regularly prior to your pregnancy, there is
 no scientific evidence to say whether you should continue or not. This
 should be decided on an individual basis and in consultation with
 your doctor or midwife. Listen closely to your body and monitor the
 intensity appropriately

Strengthening exercises

Strengthening exercises should be performed twice per week, on alternate days, covering the main muscle groups of the body. Resistance can be provided by light weights, body weight or elasticised resistance-bands.

Aim to perform 1 to 2 sets of 12 to 15 repetitions for each exercise. These strengthening exercises should be performed at a moderate intensity (see 'somewhat hard' examples in the table on page 1), with slow and steady movements and proper breathing technique (i.e. exhale on exertion).

Avoid heavy weight-lifting and activities that involve straining or holding the breath. Exercises should not be performed lying flat on the back after the first trimester, and walking lunges are best avoided to prevent injury to the pelvic connective tissue.

General considerations for exercise during pregnancy:

- include a gradual warm-up, and a slow and sustained cool-down with each session
- avoid exercising in high temperatures and humidity; ensure adequate hydration and wear loose-fitting clothing
- avoid activities with the possibility of falling (i.e. horse-riding, skiing) or impact trauma to the abdomen (i.e. certain team sport games)
- perform regular exercises to strengthen the pelvic floor muscles. Avoid activities that add extra load to the pelvic floor (i.e. jumping or bouncing)
- take care with weight-bearing exercise and activities involving frequent changes in direction (i.e. court sports) due to increased risk of injury and changes in balance
- reduce inactive behaviour: minimise the amount of time spent in prolonged sitting; break up long periods of sitting as often as possible

Warning signs to stop exercise and seek medical attention:

- chest pain
- unexplained shortness of breath
- dizziness, feeling faint or headache
- muscle weakness
- calf pain, swelling or redness
- sudden swelling of the ankles, hands or face
- vaginal bleeding or amniotic fluid loss
- decreased fetal movement
- uterine contractions or pain in the lower back, pelvic area or abdomen (potentially indicating preterm labour)



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