



GUIDELINES ON PHYSICAL ACTIVITY & EXERCISE IN PREGNANCY



Perinatal Society of Singapore

with the support of
Integrated Platform for Research in
Advancing Metabolic Health
Outcomes of
Women and Children (IPRAMHO)



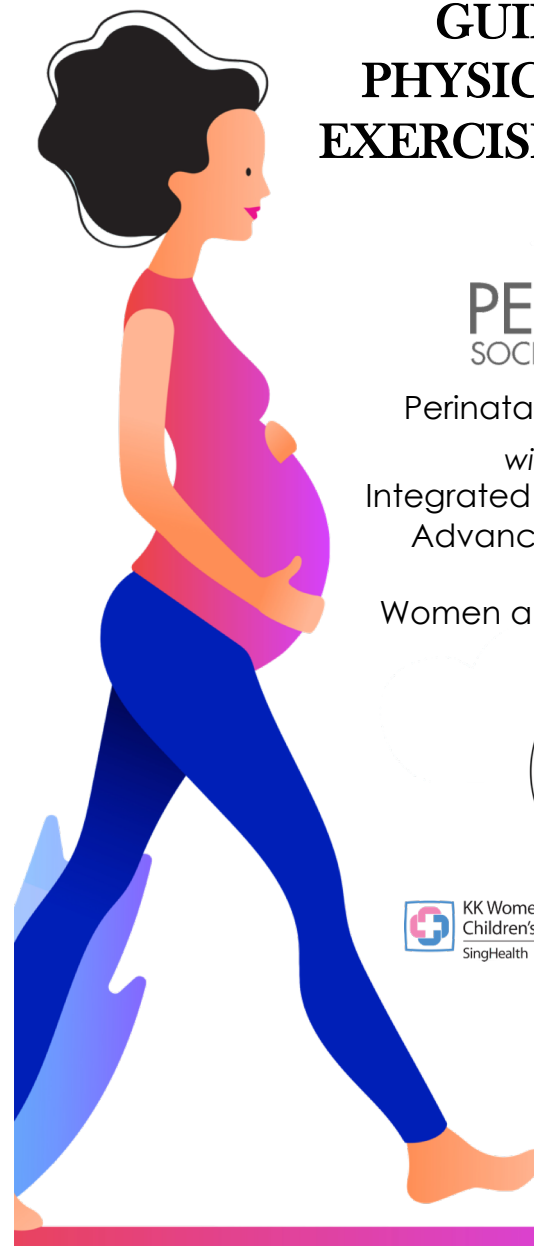
KK Women's and
Children's Hospital
SingHealth



Polyclinics
SingHealth



National Healthcare Group
POLYCLINICS



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This guideline summary, produced by the Perinatal Society of Singapore and endorsed by the Obstetrical & Gynaecological Society of Singapore and Exercise is Medicine Singapore, acts as an educational aid and reference for healthcare professionals practicing in Singapore. The guideline summary does not define a standard of care, nor is it intended to dictate an exclusive course of management. It presents recognized clinical methods and techniques for consideration by practitioners for incorporation into their practice. It is acknowledged that management may vary and must always be responsive to the need of individual patients, resources, and limitations unique to the institution or type of practice.

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PHYSICAL ACTIVITY & EXERCISE RECOMMENDATIONS

- Physical activity has minimal risks for most and should be encouraged in pregnancy
- Physical activity has shown to be beneficial in women with uncomplicated pregnancies
- Physical activity is safe for pregnant women and their fetuses in the absence of any obstetric contraindications and medical complications
- It is essential for women to maintain exercise in the post-partum period
- Healthy women with uncomplicated pregnancies should aim to accumulate at least 150 minutes of moderate-intensity physical activity each week
- Pregnant women with certain medical conditions should not exercise and should consult their health care provider early
- Pregnant women should take precautions while exercising to minimise injury
- Pregnant women should take into account safety considerations with regard to exercise
- The intensity of exercise can be safely monitored in pregnancy
- Pregnant women with warning signs should stop exercising and seek immediate medical attention

MATERNAL AGE (yrs)	FITNESS LEVEL/BMI	HEART RATE RANGE beats/min *	FREQUENCY	TYPE OF EXERCISES
< 20	-	140 - 155	Begin 3 times per week and progress to 4 times a week or accumulate at least 150 minutes of moderate intensity physical per week	Warm-up and cool-down exercise in any physical activity regimen Recommended activities Walking, swimming, stationary cycling, low-impact aerobics, modified Yoga, Pilates modified, aqua-fitness. Activities to be avoided: Contact sports, activities with a high risk of falling, scuba diving, sky diving, hot yoga or hot Pilates
20 - 29	Low Active BMI > 25 kg/m ²	129 - 144 135 - 150 102 - 124		
30 - 39	Low Active BMI > 25 kg/m ²	128 - 144 130 - 145 101 - 120		
<ul style="list-style-type: none"> Rating of Perceived exertion (RPE) of 12-14 (somewhat hard is appropriate for most pregnant women) Additional "Talk test" that allow one to keep up a conversation for final check to avoid overexertion. <p><i>Adapted from PARmed-X for Pregnancy 2015</i></p>				

SAFETY PRECAUTIONS OF PRENATAL PHYSICAL ACTIVITY

- Avoid physical activity in excessive heat.
- Avoid activities which involve physical contact or danger of falling.
- Avoid scuba diving.
- Maintain adequate nutrition and hydration—drink water before, during and after physical activity.
- Those considering athletic competition or exercising significantly above the recommended guidelines should seek supervision from an obstetric care provider with knowledge of the impact of high-intensity physical activity on maternal and fetal outcomes.

REASONS TO STOP PHYSICAL ACTIVITY AND CONSULT A HEALTHCARE PROVIDER

- Persistent excessive shortness of breath that does not resolve on rest
- Severe chest pain
- Regular and painful uterine contractions
- Vaginal bleeding
- Persistent loss of fluid from the vagina indicating rupture of the membranes
- Persistent dizziness or faintness that does not resolve on rest