

# **Pregnancy, Childcare, & Parenting**



## **The Rehabilitation Journey After Lower Limb Amputation**



# Pregnancy

## Planning for Pregnancy

Consider your amputation-specific needs if you or your partner are pregnant or planning pregnancy, and make sure to talk with your health care team about your family life and unique situation. Bring up specific goals with your health care team and questions regarding management of new family-oriented tasks.

## Safety Concerns

Pregnancy will affect your body's center of mass, or balance point, so it is important to watch your posture when carrying out household chores like lifting or carrying objects to avoid low back injuries or other overuse injuries.

*Forczek W, Staszkiwicz R. Changes of kinematic gait parameters due to pregnancy. Acta Bioeng Biomech. 2012;14(4):113-119*

With pregnancy there is an elevated risk for gestational diabetes due to decreased activity level and weight gain.

*Moon JH, Jang HC. Gestational Diabetes Mellitus: Diagnostic Approaches and Maternal-Offspring Complications. Diabetes Metab J. 2022;46(1):3-14. doi:10.4093/dmj.2021.0335*

Your OB/GYN will manage potential concerns associated with gestational diabetes, but whenever possible, stay active and eat healthy to decrease your risk.

If you are a wheelchair user, you may need to make adjustments to your seating system or limit the time you spend in your wheelchair to decrease risk for pressure injuries due to weight gain and/or increased edema during or after your pregnancy.

*Mitra, M., Long-Bellil, L. M., Iezzoni, L. I., Smeltzer, S. C., & Smith, L. D. (2016)*

There are also changes with the gait pattern in pregnant women to accommodate for the body's changes, this may require alterations to your prosthetic limb to allow you to maintain safety with ambulation.

*Forczek W;Staszkiwicz R. Changes of kinematic gait parameters due to pregnancy. Acta of bioengineering and biomechanics 14(4)*

## Care of the Residual Limb

During pregnancy your blood volume will increase significantly, and 80% of women experience gestation-dependent edema. The increase in edema during pregnancy followed by a decrease after birth will rapidly change the fit of your prosthesis. Monitor the fit of your prosthesis and the condition of your residual limb skin during pregnancy and after delivery.

*Sanghavi M, Rutherford JD. Cardiovascular physiology of pregnancy. Circulation. 2014;130(12):1003-1008. doi:10.1161/CIRCULATIONAHA.114.009029*

Consider frequent visits with your prosthetist during this time to quickly address any fit issues, limiting complications.





## Managing Pain

Inform your doctors if you plan to become pregnant or are breastfeeding to ensure your medications are safe. Many medications for phantom limb pain or other amputation-related pain might not be safe during pregnancy or breastfeeding. If you are currently using pain relief devices, like TENS units, E-stim, or ultrasound, you may need to stop or adjust your use during pregnancy. Discuss any new or changing pain, numbness, or tingling with your medical team.

## Physical Rehabilitation

If you are participating in physical rehabilitation before becoming pregnant or while pregnant, in most cases it is safe to continue. Keep your rehabilitation team informed of your change in condition and talk with your OB/GYN, physician, or physical therapist for any restrictions or increased monitoring that should take place. This may include monitoring blood pressure changes, watching for symptoms of blood clots, or activity modification. There may be additional physical rehabilitation needs after giving birth depending on many factors such as your pre-pregnancy level of fitness, physical activity during pregnancy, delivery type, and/or any complications along the way. Pelvic health physical therapy can be indicated to limit bladder incontinence, pelvic pain, and assist with pelvic floor control to prepare for childbirth.



## Childbirth

If you have a lower limb amputation, you may wish to consider different birthing positions and whether or not to wear your prosthesis to make this important life event easier for you. You will want to talk through this with your care providers before you go into labor; a birth plan can be an empowering tool to ensure the labor and delivery care team is aware of what you want, what your needs are, and your unique medical situation.

*Berta M, Lindgren H, Christensson K, Mekonnen S, Adefris M. Effect of maternal birth positions on duration of second stage of labor: systematic review and meta-analysis. BMC Pregnancy Childbirth. 2019;19(1):466. Published 2019 Dec 4. doi:10.1186/s12884-019-2620-0*

*Dommergues M, Candilis D, Becerra L, Thoueille E, Cohen D, Viaux-Savelon S. Childbirth and motherhood in women with motor disability due to a rare condition: an exploratory study. Orphanet J Rare Dis. 2021;16(1):176. Published 2021 Apr 13. doi:10.1186/s13023-021-01810-8*

<https://primecareprosthetics.com/blog/amputee-pregnant-guide>





# The Rehabilitation Journey After Lower Limb Amputation

## Childcare & Parenting

### Adjusting to Parenting with Amputation

Parenting tasks and childcare may need to be adapted to your amputation-specific needs and level of mobility. If you are already a parent at the time of limb loss, seek support to troubleshoot returning to previous family activities at home and in the community. You may want assistance with explaining your amputation to children, some children may need time and gentle introduction to the appearance of your amputation, new prostheses, and associated equipment.

### Safety Concerns

If your baby was delivered via cesarian section (c-section), the mother may have lifting restrictions that limit childcare tasks and/or prosthetic use. Modifications or adaptations to the prosthesis, or temporary use of a new or different adaptive device, may be necessary to ensure the safety of yourself and your child depending on the parenting task level of amputation. Some tasks may be easier to do without your prosthesis or can be easier to accomplish from the floor or while sitting down, like bathing or changing your child.

New parents and individuals with lower limb amputations have greater potential for repetitive injuries or overuse injuries, especially in the shoulders and low back. It

is important to watch your posture when lifting, carrying, changing, and washing your child. If you have other injuries related to your amputation, you need to be aware of additional safety concerns such as impaired sensation, balance, strength, or awareness of where your prosthetic is in space. Many amputees will have an increased risk of falling in addition to the new demands of being a parent.

If you are a wheelchair user, you may need to make adjustments to your seating system or limit the time you spend in your wheelchair to decrease risk for pressure injuries due to fluctuations in weight and edema during and after pregnancy.



*Mitra M, Long-Bellil LM, Iezzoni LI, Smeltzer SC, Smith LD. Pregnancy among women with physical disabilities: Unmet needs and recommendations on navigating pregnancy. Disabil Health J. 2016;9(3):457-463. doi:10.1016/j.dhjo.2015.12.007*

### Functional Rehabilitation

Family life is dynamic, and the rehabilitation goals for you and your child or children will evolve over time. For individuals with lower limb amputation, there may be new challenges after becoming a parent, such as needing to get onto or off the floor more frequently or improving your gait to chase after a toddler. Consulting your care team through life changes can support your optimal function and participation. Members of this care team may include, but are not limited to, occupational therapists, physiatrists, physical therapists, and prosthetists.



## Occupational Therapy

An occupational therapist can address modifications to childcare activities and/or parenting tasks from a wheelchair or while using assistive devices. Occupational therapists may recommend using side-opening cribs, adjustable-height changing tables or highchairs, and car seats in adapted vehicles, strollers, and many other adaptive options. Occupational therapists are experts at improving independence with activities of daily living and creating alternative strategies for parenting and childcare tasks.

## Physiatrist

Physiatrists assist with non-surgical medical and medication strategies to help manage your care. This can include discussing pregnancy-safe medications, pain management strategies, injections, edema management, and/or other concerns related to your residual limb.



## Physical Therapy

Your physical therapist can work with you on improving your strength, balance, and functional tasks to maximize your independence and minimize fall risk. They can also help to determine the best assistive devices, prosthetics, adaptive equipment, and compensation strategies specific to your parenting needs and physical function. Specialized pelvic health physical therapists can also assist with any pelvic concerns prior to and after birth including any bladder and bowel incontinence, pelvic pain, post c-section and episiotomy care, and pain with sexual intercourse.

## Prosthetist

A prosthetist will help you manage new or changing childcare tasks that may require making changes to the type and fit of the prosthesis you wear such as refitting the socket, adjusting alignment, and altering height. Different componentry for your prosthesis may also be beneficial to support your ever-changing lifestyle as a parent.



For additional information, visit: <https://www.healthquality.va.gov/guidelines/Rehab/amp/>

Scan the QR Code with your smart device to read the Patient Summary of the 2025 VA/DoD Clinical Practice Guideline for Lower Limb Amputation Rehabilitation.

