

Preface

Pregnancy is an absolutely miraculous ride that forever alters a woman's life. Ask anyone who has carried a pregnancy or their partners. It is transformative and wondrous, can be easy or difficult, or can be novel or old hat, but inarguably memorable. There is nothing more powerful in the study of medicine than the natural process of the generation of life and the physical experience of pregnancy and the postpartum state. Because the life moment of pregnancy is so common, glorious, and shared, many of the hardships that accompany it get lost in the periphery. Women hear stories, witness friends and family, and relegate the words of advice surrounding it to dogma. Motherhood starts here. The expectation is that this tremendous rite of passage brings with it pain and bodily change coupled with joy.

But what is common is not necessarily healthy. The dynamic musculoskeletal changes that accompany pregnancy and the postpartum state are just beginning to be recognized and understood. For many women who develop chronic musculoskeletal pain, the mechanism of injury often starts during the gravid phase, delivery, or postdelivery. Thus, there is a great need for protecting the body during this vulnerable period, in order to spare women from a variety of pathologies that can lead to pain, functional limitations, and reduced quality of life following their reproductive years.

Our goal in writing and editing this book, filled with the expertise of specialists in the field, is to make existing evidence available to clinical practitioners and advance the knowledge of pregnancy-related musculoskeletal medicine. We highlight the work of those who have investigated its significance and provide practical advice to those who care for pregnant/postpartum women. As physicians, clinical researchers, and parents, we hope that this text stimulates discussion regarding an often overlooked clinical area: musculoskeletal health in pregnancy and postpartum. So many women who suffer with treatable pain during pregnancy are told by their clinical providers to just tolerate it until delivery, in hopes that it may spontaneously resolve. In addition, many women are not provided with

advice during pregnancy or delivery that could potentially reduce their risk for development of chronic disabling conditions. Our personal goal is not only to share the current evidence but also to shape the science upon which better care can be provided to mothers.

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