

Fourth Trimester Podcast

Episode 87: Five Perinatal Conditions You Don't Have To Accept - Melissa Hurt

Sarah Trott: [00:00:05] My name is Sarah Trott. I'm a new mama to a baby girl and this podcast is all about postpartum care for the few months following birth, the time period also known as the Fourth Trimester. My postpartum doula, Esther Gallagher, is my co-host. She's a mother, grandmother, perinatal educator, birth and postpartum care provider. I've benefited hugely from her support. All parents can benefit from the wisdom and support that a postpartum Doula provides. Fourth trimester care is about the practical, emotional and social support parents and baby require, and importantly, helps set the tone for the lifelong journey of parenting.

When I first became pregnant, I had never heard of postpartum Doulas, let alone knew what they did. So much of the training and preparation that expecting parents do is focused on the birth and newborn care. Once a baby is born, often the first interaction parents have with medical or child professionals, other than the first pediatrician visits, is the six-week checkup with the OB/GYN. *What about caring for mama and family between the birth and the six week doctor visit? What are the strategies for taking care of the partner and the rest of the family while looking after your newborn?*

Our podcasts contain expert interviews with specialists from many fields to cover topics including postpartum doula practices, prenatal care, prenatal and postnatal yoga, parenting, breastfeeding, physical recovery from birth, nutrition, newborn care, midwifery, negotiating family visitation, and many more.

First-hand experience is shared through lots of stories from both new and seasoned parents. Hear what other parents are asking and what they have done in their own lives.

We reference other podcasts, internet resources and real-life experts who can help you on your own parenting journey. Visit us at <http://fourthtrimesterpodcast.com>

Sarah Trott: [00:00:01] Hi, this is Sarah Trott. Welcome back to the Fourth Trimester Podcast. I'm here today with a special guest, Melissa Hurt, and I will introduce her in a moment. And before I do, I want to remind everyone that we have a website which is fourthtrimesterpodcast.com. Go check it out. Please listen to our podcast on iTunes. Subscribe to that so you can hear more every time we release a new episode. So Melissa, welcome back to the show. How are you doing?

Melissa Hurt: [00:00:28] Hey, I'm doing great. Thanks for having me back.

Sarah Trott: [00:00:31] I am so thrilled to have you back. Now, you were with us on an episode where we talked about something called The Y-Buzz and finding Your voice as a parent. So I would love for anyone who hasn't listened to that episode to go back and check it out because it was really cool. And we'll just give a quick preview of what the Y-Buzz was as well.

[00:00:52] I want to introduce Melissa before we do that. She has got over 700 hours as a certified yoga teacher. She is a certified voice and speech trainer and a personal development coach. She's the author of *The Postpartum Path of Yoga, A Program for Restoration of the Body, Mind, Voice and Spirit*, as well as a book called *I Am the Jungle a Yoga Adventure*. And this is a yoga picture book for adults as well as for young people. That's really cool.

[00:01:26] She's also the owner of Integrative Studio, where she guides others on how to be clear, productive and influential by optimizing how they take action in their lives. And she has helped hundreds of people go from feeling stuck and unsure on their path to feeling focused and thriving. She dedicates herself to meditation practices and self study to get real with herself. The insights she gains from this time inspired daily action to create her best life, and she teaches clients how to do the same. Melissa is based in upstate New York and she focuses her business on virtual offerings as well. So I want to welcome you to the show again, Melissa. Thank you so much for being here.

Melissa Hurt: [00:02:09] I'm so glad to be here. And hi to everyone listening.

Sarah Trott: [00:02:15] You and I have talked before and when we were chatting a couple of weeks ago about what we wanted to really focus on for this conversation, we talked a lot about things that women go through typically. And what what you've shared with me as an insight is there are a set of conditions that women tend to have. And they just accept it. It's something that is accepted as this is normal, this is okay. And what you've uncovered is actually that's not okay. Women can absolutely take control and don't have to accept certain things. And so we thought it would be really cool to kind of dive in and unpack that a little bit and talk about it and share some practical things women can do even starting today.

Melissa Hurt: [00:03:03] Yes. Yes, absolutely. Yeah. And my experience when I was pregnant with my daughter. Is I had a fantastic midwife team in Washington, DC that I genuinely loved these women. I circulated through about five different midwives in this practice and then I had to have a C-section. So then I switched to a very competent, lovely OB who did my surgery, and I had a great team during my pregnancy. And then you have your two follow up visits after you have the child, but then you're done.

[00:03:40] And I feel like the team you have during your pregnancy is a lovely, well-meaning competent team to get you through the natal part of life, the prenatal and the natal. But then when it comes to post natal, women are kind of left in the dark. At least I felt that way. And a lot of the mommy friends that I made felt the same way at the time during my pregnancy. And then after I was teaching pregnant women and then teaching mommy, baby yoga and having a lot of conversations about this, and that was the consensus.

Melissa Hurt: [00:04:19] Women felt they were well taken care of for the most part during the prenatal and the delivery of the child. But after that, they were just kind of lost on what to do and how to take care of themselves. And they had these emotional and physical and vocal conditions happening and they said, well, I guess this is just life as a mom. This is just what I have to deal with. And I thought, no, I don't think you should have to. And when I would ask questions of my doctor, they just didn't know because I feel like it's a dark area in women's health.

[00:04:53] Every woman does have a different experience in her pregnancy. Of course, every woman has a different life and a different culture and a different experience. But I feel like there should at least be some standard measure of advice and guidance and resources to help women after they've had their child so they can try to establish a healthy, vibrant, new normal for themselves. And so that's what I set out to explore and do with my book.

Sarah Trott: [00:05:23] That's really beautiful. And I appreciate you touching on your own fourth trimester experience there. Is there any more you would share about your particular story?

Melissa Hurt: [00:05:32] Yeah, well, I was fully intending on having a vaginal delivery. That's why I was working with a midwife team and I had a very strict midwife who did not allow any processed foods whatsoever. You had you only ate Whole foods, which at that time I didn't mind at all because prior to becoming pregnant, I was vegan. And, you know, just really into that. But I did everything by the book, right?

[00:06:05] And then my baby was breech. And so I had to have a C-section. And so I had a lot of emotions about that. And then I made peace with, you know what? This is how my daughter is. She wants to come into the world this way, and she's a healthy baby and it's been a healthy pregnancy. So great. Let's move forward with this. And. So my fourth trimester experience was the physical healing from a C-section, which is challenging. I mean, any delivery is challenging to heal from. It's a big experience for the body to go through.

[00:06:39] But then of course, there's the emotional experience of working with a newborn, dealing with the sleep deprivation, not having regular meals. I mean, I can remember there were times holding my baby that I couldn't reach down in the fridge for what I needed to eat because I couldn't move that well because of the C-section. So I just I don't even remember what I ate. And I told my mom that, and she was like, All right, we're reorganizing your entire fridge because you have to have snacks and food ready to grab on that top shelf.

[00:07:13] And that's just not something you think about before having a baby is like, what's your access to your food going to be, especially if you're holding your baby a lot? And so my fourth trimester experience was a lot of discovery. In many ways it was very tiring, but it was also, of course, gorgeous because that was where I was bonding with my daughter and just falling in love with her more every day.

Sarah Trott: [00:07:40] So physically you couldn't bend down? Nope.

Melissa Hurt: [00:07:44] Nope. It hurt. It hurt. It was. It was I was just exhausted. I mean, physically exhausted, body aches. My daughter had a very hard time connecting her sleep cycles. And so every 15 to 20 minutes, she woke up and would cry out and needed breast milk to, you know, the nursing to go back to sleep. And she literally did that for many, many months, well past the fourth trimester. And so the sleep deprivation was probably the biggest physical pain that I felt because it just was deleterious. It it took everything out of me.

[00:08:25] And so, yeah, it was physically very tired, not able to, like really move in the ways that I wanted to. I did take her on stroller walks every day just to get a little bit of sanity and go out in the sun. When I was able when I had the green light to do yoga again, I was doing yoga again at a very moderate, gentle level. But I wasn't really doing a whole lot more out of that. I remember I wanted to go swimming again, but the pool was open at like I think I had to go at like seven in the morning. But I was so exhausted at 7 a.m. because I hadn't slept the night before. The I remember when I tried swimming, I thought I was going to sink to the bottom, like I had no energy stores to do it. And that's when I realized every ounce of energy in your body has got to get through your survival so that you can take care of this baby at home.

Melissa Hurt: [00:09:12] Because I was just really I was that sleep deprived. So, yeah, I had a it was tough, but I don't think that I'm special. I think a lot of women go through that and we just don't talk about it. You know, it's not just the gorgeous pictures that you see on social media of these moms and babies, but there's a lot of just exhaustion and hardship that we start off with that we just don't know we're going to be up against.

[00:09:40] And not to say that any woman should be like terrified of that. If you have a listener who's pregnant and preparing for having a baby, I promise you every time you see your baby and hold your baby, it's going to be so worth everything. I would repeat it knowing the daughter that I have today. She is my soul. I tell her every day. But that still doesn't erase the hardship and the stress of the moment. And it's okay. It's okay to live through that moment because that's your life right now, and there's no point in stuffing it down or denying it because that's how you get stuck. And so you just have to surrender to it and say, okay, I'm going through a hardship right now and I'm exhausted. And if it means I'm going to be eating delivery tacos again, so be it. That's what I have to do. You just do what you do.

Sarah Trott: [00:10:38] I'd love to know if you have tips for women who know that they're in a similar situation and will be having a C-section beforehand, are there certain tips you have specific to that?

Melissa Hurt: [00:10:52] Yeah. So they're planning for a vaginal birth and then need to have a C-section. Well, I was lucky in the way that I was prepared for it. A lot of women are going through a vaginal delivery and then it's not working and then they have to rush to the OR. And I definitely have heard trauma stories about that. It's very hard for women. So I, I only have compassion for women who have been through that because I don't have that experience.

[00:11:19] My baby was breech quite early in my pregnancy. I literally did everything in Eastern and Western medicine to get that baby to flip. Literally, I did the acupuncture. I was doing handstands in the pool. I was doing the inversions off my sofa. I had dad talking to her through a toilet paper roll at my pubic bone to get him to get her to go to his voice. I mean, like everything you could possibly Google to get a baby to flip. I did. And it just wasn't working. And I remember I had a midwife, one of my midwives on my team said the way a baby comes into the world is the way she is in the world. This is just who she is. And I said, okay, I've got a headstrong little girl. That's just what's going to be. And so my advice for women who are going through that is remember, remember what's at the end of this is a beautiful, healthy baby.

Melissa Hurt: [00:12:24] You know, I mean, that really is the point. I did mourn the vaginal birth I had never had, and that was something I had to let go of. And that was not easy. But every time I felt sad about that, I let myself feel the feelings of feeling sad about that. But I also have experiences of what it was like to have that C-section that another woman wouldn't have and that had its own. There's a lot of stories about what happened in that OR (operating room).

[00:12:57] And so just be present in the moment. Be thankful for the moment because everything is a gift. It truly is. And I'll never forget ever. When the doctor took my daughter out of me and the first thing she said was, Oh, she's beautiful, you guys. And it was just like and all these nurses and whatnot were saying, Oh, look, that's a C-section, baby. Her head is perfectly shaped, you know? And I was like, okay, I guess so. But yeah, it was everything. You will have your you will have your beautiful stories regardless. And so just be present with it and really hold on to what my midwife said to me is, the way your baby comes into the world is the way they are in the world.

Melissa Hurt: [00:13:42] And my daughter is the sweetest person you'll ever meet. But if she doesn't want to do something, she will not do it, period. And that's how that's exactly how she started her journey. And just a side note, it's probably TMI, but because she was breech and she sat so perfectly snug on the left side of my pelvis pretty much the whole time. When she was in the second grade, she drew a picture of her favorite stuffed animal. That I think is the most adorable thing. And I got that picture tattooed on the exact spot where she sat breech on my low belly. So it's like I always have my baby with me, you know? And it's just also a way to commemorate like it was through the pain of having her sit in the left side of my pelvis all that time and the emotional pain and the physical pain of the C-section. But now I look at that spot and I've kind of flipped the script on it. And now it's like, I love looking at that part of my body because I see her and I see this little girl and she is an artist and I it's just the most precious thing for me. So it really does come around full circle.

Sarah Trott: [00:14:47] What a beautiful story. Thank you for sharing. No such thing as TMI on the Fourth Trimester Podcast. I guess that's true.

Melissa Hurt: [00:14:54] I guess. I guess you've heard a lot more than that.

Sarah Trott: [00:14:59] Yes, we have. And that was so touching and so beautiful. Thank you so much. I was wondering if we could talk about the five things that most commonly come up for women that they really don't have to accept. They don't have to put up with.

Melissa Hurt: [00:15:15] They don't have to accept it. And by don't have to accept it, I mean, you don't have to sit in the dark about it. You can you can be an advocate for yourself and for your journey and find the resources you need to recover. You don't have to just rely on what a doctor says to you. I honestly do believe doctors are well-meaning people. So are midwives. I genuinely believe that, but they can't possibly know everything about everyone.

[00:15:43] And so these conditions that I researched and then developed a program around come out of a lot of research looking at, gosh, books written by doctors, tons of documents from my physical therapist on the on a woman's body during pregnancy after pregnancy, pelvic conditions, how the core is made. I mean, so much so I say all of that to say that everything I'm about to share with you is heavily researched.

[00:16:14] But I am not a medical doctor. I'm not making any medical claims about your condition. If any of these resonate with you, I invite you to please just reach out to your medical team for advice and guidance on what resources are available for you because you don't have to go through any of these alone. We do need community.

[00:16:33] So the five conditions, I will just run through them quickly and then I'll go a little bit more deeply into each. Is that okay? Perfect. Okay.

[00:16:43] So the first one is postnatal depletion that leads to postpartum depression and anxiety. And it could be anything within that spectrum that a woman is experiencing.

Melissa Hurt: [00:16:55] The second one is pelvic floor imbalance. The third one is Diastasis Recti. The fourth one is a weak core and the fifth one is vocal fry.

[00:17:08] Now I have as a yoga teacher working with women who have had their babies. And I did Mommy baby yoga from right When the woman is released from that six week mark to eight week mark all the way through working with women and their preschoolers. These conditions can still exist even through the preschool years. And so that's why I feel like education is so important because you don't have to accept that for your life. So the postnatal depletion that could lead to postpartum depression and anxiety, that's feeling rundown, feeling the blues.

[00:17:47] Now it's funny because depression and anxiety, we call them mental conditions, but they absolutely have a physical effect. Everything is biochemical. We are just beautiful systems of hormones really, and fluids and electricity really from our heartbeat. And so if we're feeling depression or anxiety, you will feel the heaviness, the lethargy, the or the pins and needles, whatever it is, you will feel that in your body. So you're not going crazy. But those conditions are ones that you can work through. Now, postnatal depletion, there's a book by Dr. Oscar Sarah that's fabulous. It's titled Postnatal Depletion or the Postnatal Depletion Cure. I highly recommend that book. But in that I learned that you could have postnatal depletion for the first seven years, postpartum seven years, and that's because of the huge biochemical shift that happens in a woman's body and mind when the placenta leaves.

Melissa Hurt: [00:18:59] And so if you're feeling really tired and rundown and lethargic and maybe you're still maybe you're getting sleep at night, but you still feel that way, it could be postnatal depletion. If you're feeling depression, the baby blues. Any kind of mental behavioral expression of just deep sadness and feeling disconnection from other people, including your baby, that could be postpartum depression or anxiety. And so what I offer for women who are going through that is please look for community. Now, something that I did some research on, the neuroscience of loneliness, because I remember feeling lonely in my fourth trimester and beyond because I was a stay at home mom. I was desperately craving adult interaction as much as obviously I love my daughter more than the world, but we need a tribe. We need like solid people around us just so that we know we are in this world moving through something.

[00:20:08] And so, if you find a community, even if it's one other mom who's going through any kind of similar experience and it could just be that your babies are around the same age, having that human connection can help. I read that babies don't know they exist until they have that contact with their caretaker. You are not you don't identify as an I until you have that interaction from another human being. And so as you go through this new chapter of life as a mom and it's an entirely new page in the book, unlike anything you've done before, it's so important to find characters going through the same experience, so to speak, to stick with my book analogy.

Melissa Hurt: [00:20:55] So we need community. Community does help and it will help. And my book I offer prompts to how to find community because it's not as easy as saying just call a friend. Because in my experience, a lot of my friends fell off the map when I had my baby. They just didn't know how to relate to me. And so they stopped calling, stopped showing up, stopped responding to texts and whatnot. And that was very hurtful. But I did make other friends who had babies the same age, and they became my new besties. Right. And so that's a more natural way of working through that condition.

[00:21:33] Obviously, if you need medical medicinal support, seek that out, because that could absolutely be a helpful option for you. But on a side note to all of that, believe it or not, like drinking lots of water can help. Sometimes we feel really run down and depressed or anxious because our again, biochemically, we're so just dehydrated and off kilter. So do your best to take care of yourself like drinking water, having those healthy snacks on the grab and go in your fridge. Little things like that can actually help quite a bit, but really, community is a huge, huge help if you're going through any of those mental behavioral shifts.

Sarah Trott: [00:22:20] What's an example of a prompt that you have for. Well, you know, you can't just call a friend like, what is it?

Melissa Hurt: [00:22:25] Oh, go to the go look at your local library and they will have a storytime for kids. Almost every community library will offer that. Go to it, even if it's during baby's nap time. You think, Oh, my God, I can't disrupt baby's nap time. Please

just go. The baby will sleep in the stroller or sleep on your shoulder, but you will be out in the world. Just to be in a different environment is really, really helpful. You'll be stimulated by different colors like the books, the rugs, like I love the children's section of a library because it's so colorful and bright and cute. So you'll look at that. You can touch the plants like it's a sensorial experience because it's not your house, right? But chit chat. Do the chit chat with the other moms. I ended up doing that and even though sometimes it never resulted in a friendship just to have that adult interaction, even if we were just talking about what kind of cloth diaper we're using or what's a good balm to use for breastfeeding or I mean anything, anything. Just to have that chit chat was so helpful and it just helped me feel like a real person, you know, And not just, you know, this mommy machine who's around the clock taking care of this little one.

Sarah Trott: [00:23:45] Yeah. Thank you. Sure.

Melissa Hurt: [00:23:48] Okay, so the second condition you do not have to accept is pelvic floor imbalance. Now, the pelvic floor is this very sophisticated system of muscles that line the bottom of your pelvis, and they pretty much hold your organs inside your body. If we didn't have the pelvic floor, we'd be dripping our organs out down below, which is a lovely image, but the pelvic floor is amazing and it's actually a muscle that moves with our breathing diaphragm. It helps to regulate our systems as we breathe. And I'll talk more about this when we talk about the core. But as we breathe and that thoracic diaphragm at the bottom of your ribcage descends downward, so too does your pelvic floor. And then as you exhale and those diaphragms move back up, what that's doing is it's massaging your internal organs, and so it's helping you again, biochemically be a healthy person.

[00:24:44] But pelvic floor imbalance, it can either be too tight or too loose. It could be too tight on just one part of the pelvic floor and not the other. A lot of women think that they must be too loose in their pelvic floor because the load of a baby in the belly, the pelvic floor is like a hammock that's kind of supporting the load and the weight and the water and all of that through the pregnancy. And so a lot of women suspect that, especially if they had a vaginal birth, the pelvic floor must be too loose.

Melissa Hurt: [00:25:17] But I've worked with women where the pelvic floor was too tight after that condition because they were gripping so much to support everything that it just became really, really tense overall. Either way, what's happening is that there's these what's called what are called fascial slings. Think of it again like a hammock, like connecting from your front of your or excuse me, the back side of. Your pubic bone to the I guess you'd call it the front side of the back of your pelvis. But it's supporting your bladder. And if the pelvic floor is too tight, well, then you're going to be peeing all the time. You sneeze and you pee because it's, you know, pressing up on your bladder. If it's too loose, you might have a pelvic organ prolapse.

[00:26:02] So things are like when you can't really jog anymore because you're feeling your organs descending down. So the pelvic floor is an amazing muscular system that does need rehabilitation. And you don't have to accept that you'll never jog again or that you'll always be a little bit when you sneeze. And so there are lots of exercises you can do to explore if your pelvic floor is too tight or too loose and where. And there's all kinds of exercises you can do with breathwork and with a very mindful muscular contraction and release on a timed system that you can do to rehabilitate the muscles of your pelvic floor.

Melissa Hurt: [00:26:44] For some women, if they're doing these exercises and this breathwork and they still need extra support because of maybe a trauma to the pelvic floor, then there are physical therapists who specialize in the pelvic floor, which is a blessing that they're out there and that they exist because a lot of physical therapists don't do training in that part of the body. So please seek that out if you need it. But for most people that I've known, just doing the breathwork and the mindful movements of those muscles will be successful for them.

[00:27:18] Okay, Condition number three Diastasis recti. Now. Before I had a baby, I had no idea what that was. I was like, What? But what it is, is you have the six pack abs and the front of your belly, right? And that that's called the rectus abdominis muscles. It's the most exterior layer of abdominal muscles that we have. And as you are pregnant and the belly is getting bigger because the baby is growing and all the water and the placenta and everything is growing, those muscles need to separate. Of course they do,

because we're all we're expanding all around the trunk to hold the baby and make the baby grow. But what can happen after you've had the baby is those front layer of abdominal muscles don't quite connect again in the same way. There'll be a gap and there's a band of connective tissue that holds those two sides together.

Melissa Hurt: [00:28:14] The right and the left side together called the Linea Alba, and that will stay separated. Okay. Now, for some women, if they and I have a YouTube video that I demonstrate how to check this for yourself. So but you could have a one finger, a two finger, a three finger, a four finger, even an entire hand's width separation between the two sides of your rectus abdominus muscle layer.

[00:28:43] But what does that mean? Well. It means that you more than likely will have low back pain because the natural pressure that is inside of your abdominal sac and the trunk is completely off kilter. It's not held in by the front of your body. So pressure will be resorting to the back of the body, the low back pain. It means that if you're on hands and knees or if you're trying to do like a plank or a push up, you're going to see like a cone coming out of your belly. That's literally it's like your organs are kind of just like sagging out. So don't do that. Um, they call it coning. And so you want to be careful. I don't, I don't recommend planks. And I also don't recommend sit ups for women who have had babies. And in my book, I'm very conservative about when they're able to do a full plank. I personally think and there are some women who want to jump right back into it to get their abs back.

Melissa Hurt: [00:29:45] And I respect that. I completely understand it, But it's just not safe for the longer haul and the bigger picture because you do want to heal appropriately from the load of carrying a baby. And so again, there's tons of breathwork and there's other ways of finding the proper alignment of your ribs to your pelvis, because think of what the muscles are that are connecting your rib cage to your pelvis. So all those belly muscles. So if you can keep those in a proper alignment with each other and breathe well, that will help to knit those muscles back together safely.

[00:30:22] And so again, a lot of the yoga, pretty much every yoga pose and my book is working to remedy all five of these conditions, just so you know. So there is help for that.

Now, just a side note, a caution, there are some doctors who offer to sew up the rectus abdominal muscles, and I'm sure that's a successful procedure for some women. I had a friend who did that and the pressure resorted from her low back down through her pelvic floor. So then she developed pelvic organ prolapse. So just I say that as a cautionary tale that no procedure is 100%. I highly recommend doing every best measure naturally that you possibly can and just do your research on all the different ways that you can get a fuller picture of your recovery.

Melissa Hurt: [00:31:22] Number four. A weak core. So a lot of people talk about the core and they think it just, again, means the front of the belly. But the core actually has six sides to it. And sides is really a misnomer because it's more like a cylinder. So you have your thoracic diaphragm muscle, your breathing muscle at the top, your pelvic floor at the bottom. You have your transverse abdominis and the front, that's the most recessive abdominal muscle that you have. It's beneath the rectus abdominus. You have the multifidus and the back lining your spine. And then you have your oblique muscles on either side.

[00:32:03] So this one's tricky because when you're carrying a baby all day long as I was, more than likely you're cocking your hip to one side and you're a little crooked or you're hoisting a diaper bag on the other shoulder. Like it's just very difficult to do life as a mom with that proper alignment of shoulders, ribs, pelvis. Et cetera.

[00:32:27] However, it's important to do your best to try to shift the dynamics of how you're carrying loads so that you're offering opportunities for your core to strengthen through your natural mechanics of your life. And so if you always, like I always held my daughter with my left arm because I'm right handed and I had to consciously work to hold her with my right arm and get things with my left hand so that my hips had a different experience.

Melissa Hurt: [00:32:54] And then my oblique muscles had a different experience. Because again, if you think about holding a baby on the side, whatever side you're shortening by cocking your hip up, you're basically creating a saddle for your baby,

right? Especially as a baby grows and gets bigger and heavier. But if you don't change sides of the body, you will more than likely feel an imbalance from one side to the other.

[00:33:19] So what I personally felt early in my in my postnatal life was just a lot of back pain and just weird aches and like my shoulder because I was overcompensating how I was walking around my house or carrying things because my core was so weak all around. So again, there's lots of ways that you can safely strengthen your core front sides back top and bottom again through mindful breathwork, through proper alignment and really working to be mindful of what your ribs are doing as you do yoga poses. What are your sides doing? Think about your waist.

[00:33:58] Like think about the bigger picture. And I offer a lot of visual cueing so that you can almost like crawl inside yourself and feel What am I experiencing right now as I move from one position into the other? And I can ensure that my core is staying stable and steady through this movement as much as possible. And then and one more thing about a weak core.

Melissa Hurt: [00:34:21] It is important to safely strengthen your core because as your baby grows and always wants to be held, baby doesn't realize how big baby is. My daughter wanted to be picked up until like the first day of kindergarten and so I had to get stronger to still be her mom and perform in the way as her mom. That was important for me. And so and I wanted to be able to have the strength to pick her up off the playground if she got hurt.

[00:34:49] So it is important to regain that strength and stability in your core because you want to be able to do all the things that you want to do as a mom, I think.

[00:35:01] And then lastly, the fifth condition you do not have to accept is vocal fry. And some people are really surprised that a vocal condition is in my book. But as a certified voice and speech trainer, I care passionately about the voice. That was the first thing that brought me on to your podcast was a tool to strengthen your voice, because the voice is your energetic connection between your physical self and your spiritual self. The voice is how you show up in the world in so many ways. And vocal fry is a condition

where because of tensions or exhaustions and the physical body, you're not able to breathe well. And if you can't breathe well, your breath is not supporting the sound flow right of the vocal production at the larynx.

Melissa Hurt: [00:35:53] And so then we end up getting this vocal fry down here. And a lot of celebrities do it. People talk about Kim Kardashian and whatnot. I think that's now part of her brand. Good for her. She's made it work for her. But vocal fry, when I felt it, I was like, this is not me. I do not sound like this. I am a much stronger, more empowered woman than how I am acoustically showing up in the world. It was really important to me that I had my natural voice the whole time in this new chapter of my life and also develop my voice as a mom, like my energetic spiritual voice. Like who am I Now that I'm a mom, what do I stand for? What are my values and how do I advocate for myself and my child with this physical voice that I have to use to talk to doctors, talk to, you know, other people at the supermarket, the library, whoever it is, how do I want to show up?

[00:36:53] And for me, it was not with this vocal retreat and fry and just being all crispy out because that's not me. And so the Y-Buzz is a practice that I did every day to recapture the natural strength and power of my voice. And just a little refresher to the listeners. It's where you feel the yi yi. Yi yi yi.

Melissa Hurt: [00:37:16] You just an easy exhalation and the natural lower third of your speaking voice range feeling a slight forwardness of the lips and cheek muscles, feeling a y consonant with a long vowel. All these ingredients that come together to therapeutically strengthen your voice. And it is a tool that's used in with therapeutic practices. So I was doing that, and every time I read books to my daughter, I was feeling my consonants.

[00:37:46] Like every time I spoke, I made it a point to feel my voice and guess what happened? So I said earlier that I went on stroller walks every day to get out of my house. Well, I would do all the different phonetic sounds and phonics and whatnot as I walked. I'd be like, yi yi yi, boop, boop, boop, boop, boop. Just feeling sounds to my

daughter. And she started speaking so early because of course, she's watching and she's capturing everything.

[00:38:17] And so because I was tuned in to my own voice and my being articulate, she was a very articulate speaker at a very young age because she picked it up. So there was an added bonus that I never even knew what happened.

[00:38:34] So there you have it. Those are the five perinatal conditions you don't have to accept as you are in this new chapter of your life and really developing further, creating more chapters to come. Because life does not stop and start because you've had a baby. It just continues and grows. And who do you want to be? How do you want to show up as a mom? I think that's a profound question. And we have so much agency to write the book, right? You have so much power to take care of yourself. And I promise you you can do it.

[00:39:11] And it really is with the simplest of things. All it takes is 20 to 30 focused minutes a day just to love yourself and take care of yourself. Because for every minute you put into yourself, you're exponentially getting so much more back, not only just for yourself down the road, but for your family system and your friends and everything. It just all expands from there.

Sarah Trott: [00:39:35] Practice of self love is so important and core in a lot of what we talk about ultimately in self care, the deservedness, the the quality of time that you give yourself. Just the practice of saying I love myself, if that's hard for someone to say, what does that mean? Maybe explore that.

Melissa Hurt: [00:39:54] It's true. And one practice I started doing that. It sounds so cheesy, but I'm telling you it works. I want everyone to do it. When you wake up in the morning, put your hand on your chest and say, Good morning, I love you. You know, I mean, if you'd say it to your baby or your partner, why can't you say it to yourself? And I'm telling you, like it will give you the feel goods all over. It's like, Oh, that's just really sweet. Actually, it's just start your day with that. Set your name with it. Good morning, Melissa. I love you. It's just the best.

Sarah Trott: [00:40:27] I love that. I will now turn our attention to the question of a couple of things. Because we're going to wrap up pretty quick, but really important if someone wants to learn more about this and they want to learn how they can spend those 30 minutes a day, what's the recommendation? How do they achieve that for themselves?

Melissa Hurt: [00:40:49] Yes. Yes. Well, as I've been talking about, I have a book, The Postpartum Path of Yoga. And it's a program for restoration of mind, body, voice and spirit. And it's it's written so that each practice will take 20 to 30 minutes a day. And there are community prompts and journal prompts and things like that. So that's my first recommendation is get the book. It is a sensorial experience. It's very intentionally designed with ivory pages for tired eyes and a beautiful texture to the cover for hands that are overwashed. And, you know, so I mean, it should it should feel nice. I'm really into sensorial experience for everybody, but start with that. Start get the book and just get into it.

[00:41:42] Start with the first practice, which is a breathing practice. Now, one thing to know for sure is that if you do nothing for yourself and if you feel lost or stuck in how to take care of yourself, your breath is the entryway to your best life. If you can breathe, if you can just feel a breath moving in and then sigh it out. You are recalibrating your nervous system right then and there, and that is taking power back that you feel like you may have lost. You're taking it back and taking care of yourself. So breathing practices are very important to me and I offer quite a few in this book. But even if you do nothing, even if it's three in the morning and you don't want to read, you don't want to go online, you don't want to do anything, just breathe. Take a breath, feel your breath, and even better, feel the expansion of your body as you bring in that breath.

Melissa Hurt: [00:42:42] Notice how your body holds on to it. Naturally, you don't have to do that. Your body is doing that and then side out. And then notice how there's always this moment of almost emptiness in your lungs. And that is the proof in the pudding that your body takes exactly what it needs, no more, no less.

[00:43:03] And so it's such a beautiful expression of a yogic lifestyle to know that I actually have what I need. I just need to open myself to it. Now, there are people who are like, excuse me, I'm sure there are people who are like, Oh yeah, well, I need a lot more than that. I get it. I have 100% been there. And then what I learned is like, I needed friends. So what did I do? I took the effort to find a Facebook group that met in person, you know, every two weeks. It had to take a little bit of work on my end. But once I found those friends, they became my friends for life. And I'm still friends with them and my daughter is still friends with their kids.

[00:43:42] So the magic answer is not going to come knocking on your door. You do have to seek it and like take action to do it. But I promise you the insight and the clarity for what that is, if you open yourself to the signals, it's all anchored in with your breath. So just start breathing, start paying attention to your breath. Start paying attention to what your heart is saying to you. Tap into your highest good and your intuition will sharpen so much that you'll be able to know what is out there for you, for you to claim for yourself.

Sarah Trott: [00:44:18] Thank you. And before we say our goodbyes, I want to also mention that you have a free e-book. So it's really cool. So listeners, go check that out. Melissa can share more about that, but we'll also post all this information on the website as well.

Melissa Hurt: [00:44:35] But yeah, it's melissahurt.com/trimester. You have to put in that trimester because it's a special gift just for the fourth trimester listeners. So melissahurt.com/trimester and you'll find it.

Sarah Trott: [00:44:51] Thank you. Thanks again for being on the program. Thank you for outlining these five things. Don't wait if you think you have any of these things. Obviously, there's the book and there's community. Talk to your doctor. Talk to your friends. Find out more. And just be curious about what you're feeling and how your body is feeling and what your thoughts are doing. And we just really encourage so much on this program around getting support and support that women need. Yes. And sometimes. Oh, go ahead.

Melissa Hurt: [00:45:22] I was just going to say, and sometimes support could be whoever your spiritual advisor is if you're not comfortable talking to your doctor because there's some cultures and communities that are just really embarrassed talking about their bodies. But you have a very open relationship with the spiritual counselor. Talk to that person, you know, but like talk to somebody. Talk to somebody because you really don't have to keep this all in. You know, someone will be able to point the way for a resource that could be really helpful for you.

Sarah Trott: [00:45:50] Yeah, great point. Thank you. Well, Melissa, we're going to sign off now. I appreciate your time. I appreciate you so much in the work that you're doing. Thank you.

Melissa Hurt: [00:45:59] Thank you so much.

Sarah Trott: You can find out more about Esther Gallagher on <http://www.esthergallagher.com/>. You can also subscribe to this podcast in order to hear more from us. [Click here for iTunes](#) and [click here for Google Podcasts](#). Thank you for listening everyone and I hope you'll join us next time on the Fourth Trimester. The theme music on this podcast was created by Sean Trott. Hear more at <https://soundcloud.com/seantrott>. Special thanks to my true loves: my husband Ben, daughter Penelope, and baby girl Evelyn. Don't forget to share the Fourth Trimester Podcast with any new and expecting parents. I'm Sarah Trott. Goodbye for now.