Pregnancy in Dance

Recommendations regarding exercise and pregnancy are largely anecdotal. However, there is a general understanding of physiological requirements during both dance and exercise where one can agree on certain guidelines.

During pregnancy, well known changes occur in the body. These include increased flexibility in order to prepare the birth canal for expansion. For this reason, a pregnant dancer should avoid excessive stress to the ligaments and tendons. One may consider avoiding large jumps, over stretching, especially stretching the adductors, e.g. straddle as this may cause excessive pulling on the pubic symphysis which may separate during pregnancy. Walking/ prolonged standing without proper arch support may allow the ligaments in the foot and ankle to overstretch with increased body weight. In addition, one’s center of gravity is altered with an enlarged uterus, increased lumbar curve or lordosis, and anterior pelvic tilt, all contributing to challenging balance and increased risk of falling during dance. Dance styles that involve an increased risk of falling or direct impact to the abdominal region should be avoided.

During pregnancy there is a significant increase in blood volume. However even with this increased volume, blood is diverted from your organs in order to supply your exercising muscles that are demanding oxygen. This causes a concern regarding a potential decrease in blood supply to the uterus. For this reason, extreme exercise should perhaps be reduced to moderate or the equivalent of brisk walking. However, women who were regular exercisers before pregnancy should be able to engage in high intensity exercise programs with no adverse effects. Monitoring by the doctor or midwife should be included in this scenario. The Centers for Disease Control and Prevention recommend that pregnant women get at least 150 minutes of moderate-intensity aerobic activity every week.

In addition, the expanding uterus size can limit diaphragm expansion, thereby reducing breathing capacity. Shortness of breath is not an uncommon complaint during pregnancy. There are also changes to your blood return or venous return as an enlarged uterus causes some compression to your veins that carry blood towards the heart. For this reason, prolonged standing and lying supine past the first trimester are discouraged. While sleeping, side sleeping or supine sleeping on an incline with a pillow wedged under either hip is recommended.

One should also consider changes in caloric requirements. During the first trimester, caloric intake should increase by 150 cal a day and by the third trimester, it is estimated that your body needs an extra 300 cal per day. With exercise and pregnancy, energy expenditure and caloric needs should be considered. Your doctor or midwife will also measure proper weight gain during pregnancy.
It is important to avoid extreme heat conditions. Body temperature increases with both pregnancy and exercise. It is thought that if your core body temperature is elevated, the fetus may have a difficult time transferring heat to your body and cooling itself. For the same reasons, hot yoga and hot baths that raise your body temperature higher than 102.2 degrees Fahrenheit for longer than 10 min should be avoided. Hydration is very important as dehydration may lead to increased uterine contractions.

Women with the following conditions or pregnancy complications should not exercise during pregnancy:

- Certain types of heart and lung diseases
- Cervical insufficiency or cerclage
- Being pregnant with twins or triplets (or more) with risk factors for preterm labor
- Placenta previa after 26 weeks of pregnancy
- Preterm labor or ruptured membranes (your water has broken) during this pregnancy
- Preeclampsia or pregnancy-induced high blood pressure
- Severe anemia

Stop exercising and call your obstetrician or other member of your health care team if you have any of these signs or symptoms:

- Bleeding from the vagina
- Feeling dizzy or faint
- Shortness of breath before starting exercise
- Chest pain
- Headache
- Muscle weakness
- Calf pain or swelling
- Regular, painful contractions of the uterus
- Fluid leaking from the vagina

Disclaimer: The information on pregnancy contained in this paper is intended to help guide and inform the dancer. It is not meant to take the place of the advice of a medical professional.

This information is provided by Dance/USA Task Force on Dancer Health.

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