

Sports no Handicap to *Motherhood*

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We find in older writings the view that sports tend to masculinize the woman's organism and that a long sporting career is very likely to have an unfavourable effect on maternity. Practical experience has not confirmed this contention. After a while, authors began discussing the harmful effects of sports on expectant mothers, childbirth, and the incompatibility between motherhood and top athletic achievements. Both science and practice have steadily refuted these conceptions as well.

Sportswomen not only make healthy and strong mothers, but it is a fact that they can regain peak form not long after childbirth. Many sportswomen have given their best results after they had raised a family. Many of them hold not only national, but also European, Olympic and world records, (the discuss throw, 80 m. hurdles, 100 m. dash, rowing and skating, or the gymnastic, fencing and table tennis gold medallists, and others). At the XVIth Olympics at Melbourne 10 of the 26 Soviet sportswomen who placed, have children.

While in former days in Bulgaria, women who continued their sporting careers after childbirth were a rarity, after the People's Government came to power the number of mothers, who indulge in sports, has been steadily growing. There are scores of such outstanding women in the different sports and events. In the last few years the line-ups of our women's national volleyball, basketball, gymnastic and artistic gymnastic squads have been mostly mothers. They have done credit to our country's sports and have scored victories at home and abroad. Some of them have two children, and yet they still hold the lead in their favourite sport. The Government has deservedly given them honorary distinctions.

The growing physical and functional powers of the organism after the birth of a

child have been fully explained. During the period of expectancy, the organism adapts itself the higher strain involved, which means a reconditioning of all organs and systems in the human body. Childbirth itself is an act demanding far greater psychic and physical exertions. The body's increasing potentials do not disappear after childbirth, but tend to make the female organism more sturdy.

We have carried observations on 73 sportswomen, of whom 35 masters of sport, 20 on our various national squads, and the rest on the first teams of their respective clubs (basketball, volleyball, gymnastics, athletics, rowing, swimming, skiing). It was shown that, in the majority of cases (74.4 per cent.), the pregnancy was light and caused no unpleasant disturbances. 16.4 per cent. of the cases had complaints in certain months of their pregnancy, and in only 9.6 per cent. there were more serious complaints and of longer duration.

The proper conditioning of the body and good health in 77.8 per cent. of the cases did not necessitate an interruption of their sporting activities for several months. Many won important competitions. During her 3rd month of pregnancy, Y.M. took part in the Republican Rowing Championships and won. V.M. had her best record of the season in the discus throw during an international track and field meet.

Z.A. was a most interesting case. When she was in her sixth month with child she took part and won the city diving championship.

Naturally, one should not recommend competitions during the period of pregnancy, because it is impossible to predict what the reactions of the organism will be, and athletic overstrain may cause a change in the position of the fetus. The above examples are only given to show that the organism of

many sportsmen adapts itself readily to higher physical loads and that expectant mothers can well withstand the strain.

The condition of the perineum of sportswomen at childbirth is a problem of particular interest. Observations have shown it to have been affected in a considerable number of cases. Thus, 47.9 per cent. of the cases showed no rupture; 9.6 per cent.—light ruptures which one or two clamps sufficed to restore; 32.9 per cent.—ruptures restored by suturation; 9.6 per cent. necessitated a surgical intervention (episiotomy or perineotomy).

There is a predominating view that the perineum is thus affected because of the rigid musculature resulting from prolonged athletic training. We consider that, in a considerable number of sportswomen, this happens during the expulsive stage, whenever the delivery has not been accurately judged and directly by the attending staff, so that it takes place before the rotation of the fœtus reaches the diameter of the shoulder girdle.

Our observations have shown that the stomach muscles of many sportswomen tend to flab after childbirth. This was so in 54.2 per cent. of the 72 top class women athletes. We attribute this to the lack of subcutaneous fat, so that the skin stretches without the necessary fat lining.

The post-natal period was perfectly normal in 75 per cent. of the cases. The rest (24.7 per cent.) were accompanied by febrile conditions, infections, and 13.7 per cent. of them—by mastitis.

Lactation was good and was not affected upon the resumption of training, or work, in 36.7 per cent. of the cases. In fact, 8.41 per cent. of the cases it increased. Work or training reduced lactation in 19.7 per cent. of them, while in 16.9 of the cases the reduction was due to other factors. Only 23.9 per

cent. of the sportswomen interrupted training while nursing their children.

Accordingly, childbirth has not proved a handicap to the athletic careers of leading sportswomen. In 80 per cent. of the cases the sportswomen have reached or improved their top form. 65.9 per cent. of them achieved this between the first and second year after childbirth; before the first year 6.8 per cent., and after the 2nd year—8.2 per cent.; failing to come up to form for various reasons—10.9 per cent.: abandoning active participation in sports—8.2 per cent.

It has been established that basket and volleyballers begin regular training soon after childbirth. By the 6th month after giving birth some 50 per cent. of the mothers went back to the game, while this was true of only 32 per cent. of the athletes and gymnasts. It is evident that team play makes it possible for a sportswoman to return earlier to the game, as absolutely peak form and fitness is not necessarily a decisive element in the general success of the team as a whole. But this is naturally not so in the individual sports (athletics, gymnastics, rowing, swimming, fencing, skiing), where the resumption of sporting activities takes place much later—towards the 11th or 12th month after childbirth.

Systematic and correct physical exercise and training has no unfavourable influence on pregnancy and delivery. Motherhood has not proved a handicap in the way of higher results. If certain mothers give up athletics this is not due to the fact that their physical conditions has been weakened, but because they have to look after their child and have no time for training.

With a rational approach to athletic training, the functional capacities of sportswomen after childbirth are not only restored, but normally tend to show an improvement.