

Just the Facts...

Pregnancy/Postpartum Physical Training Program

What is the purpose of PPPT?

The purpose of the Pregnancy/Postpartum Physical Training (PPPT) Program is to provide the unit commander with a standardized and safe program for pregnant and postpartum soldiers and to certify unit physical training personnel in pregnancy and postpartum fitness.



Why does the Army need PPPT?

- ❖ Approximately nine percent of female soldiers are pregnant at any one time. (Defense Medical Epidemiological Database, 2000) Most women may exercise safely throughout pregnancy and postpartum within the American College of Obstetrics and Gynecology (ACOG) guidelines and under the advice of their obstetrician.
- ❖ An Army study showed significant Army Physical Fitness Test (APFT) failures, height/weight failures, and increased injury and illness rates when soldiers returned to unit PT after 9 months of pregnancy and 6 months of postpartum recovery.
- ❖ There is no standardized Army-wide program for pregnancy/postpartum PT. Many unit-training personnel are not familiar with leading exercises for pregnant/postpartum soldiers, nor are they familiar with the ACOG guidelines. Because of this, numerous soldiers are left to train on their own or do not train at all. This can be a readiness and morale issue for the soldier and the unit.

What are the benefits of participating in PPPT?

Current scientific literature supports many physical and psychological benefits of remaining physically active during and after pregnancy. Some of these are:

- ❖ Exercise during pregnancy and postpartum promotes a more rapid recovery from the birth process and a faster return to physical readiness levels.
- ❖ Appropriate exercise during pregnancy can maintain aerobic fitness and result in significant improvement postpartum.
- ❖ Pregnant women that exercise experience fewer physical complaints during pregnancy.
- ❖ Postpartum women who are active before and after pregnancy retain less pregnancy weight, preventing unwanted body fat gain.
- ❖ Women that continue to exercise during pregnancy and postpartum remain more socially active and are more able to adapt to the challenges of motherhood.
- ❖ Exercising has also been shown to have positive effects on labor and delivery through fewer medical interventions, reduced operative deliveries, shorter active labor and less likelihood to deliver prematurely, resulting in reduced hospital stays.
- ❖ Psychological benefits include relief from tension and improved self-image.

What is the proposed implementation model for PPPT?

- ❖ PPPT will be a mandatory program belonging to the commander.
- ❖ Consolidation into one installation program will be determined locally.
- ❖ An Instructor Trainer will operate the PPPT Program, and teach Exercise Leaders to lead pregnancy/postpartum PT sessions.
- ❖ The Medical Treatment Facility will provide a Medical Expert to serve as the medical advisor and coordinate weekly educational classes related to pregnancy/postpartum.



- ❖ Instructor Trainers and Medical Experts will be certified in pregnancy fitness.
- ❖ PT will be conducted at least three times per week during unit PT time.
- ❖ An At-Home Postpartum PT program will be available for participant use during the six-week convalescent leave.
- ❖ A soldier will participate in postpartum PT after the six-week convalescent leave for up to six months following delivery.

Where can I learn more about exercise and pregnancy?

- ❖ Clapp J.F. “The Course of Labor After Endurance Exercise During Pregnancy.” Am J Obstet Gynecol 1990; 163: 1799-805.
- ❖ Clapp J.F. “The Effect of Continuing Regular Endurance Exercise on the Physiologic Adaptations to Pregnancy and Pregnancy Outcome.” (Third IOC World Congress on Sports Sciences) Am J Sport Medicine 1996; 24: S28 – 30.
- ❖ Clapp J.F., Capeless E.L. “The VO_{2max} of Recreational Athletes Before and After Pregnancy.” Medicine Science Sports Exercise 1991; 23:1128-33.
- ❖ Hall D.C., Kaufmann D.A. “Effects of Aerobic and Strength Conditioning on Pregnancy Outcomes.” Am J Obstetrics Gynecology 1987; 157:1199-1203.
- ❖ Committee Opinion Number 267, January 2002, American College of Obstetrics & Gynecologists (ACOG), “Exercise During Pregnancy and the Postpartum Period”

What Army regulations impact this program?

- ❖ AR 40-3 - Medical, Dental, and Veterinary Care, 28 January 2002
- ❖ AR 40-501- Standards of Medical Fitness, 28 March 2002
- ❖ AR 600-9 - Army Weight Control Program, 10 June 1987
- ❖ AR 600-8-10 - Leaves & Passes, 1 July 1994
- ❖ AR 600-8-24 - Officer Transfers and Discharges, 29 June 2002
- ❖ AR 614-30 - Overseas Service, 30 August 2002
- ❖ AR 635-200 - Enlisted Personnel, 1 November 2000
- ❖ AR 670-1 - Wear and Appearance of Army Uniforms and Insignia, 1 July 2002

What is the current status of this program?

- ❖ The USACHPPM is developing the certification program, which includes instructional videos and manuals for the Medical Expert, Instructor Trainer, Exercise Leader, and Soldier. After appointment and training, the DA program proponent will implement and sustain the certification program.
- ❖ The PPPT Implementation Guide is being written to give guidance on establishing and operating a PPPT unit/installation program.
- ❖ The metrics employed to judge the success of the program are the APFT pass rate, AR 600-9 pass rate, appropriate medical outcomes, injury profiles, and personal satisfaction.



For additional information on the PPPT Program, contact:

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