Original Article



Knowledge and Attitudes of Obstetricians and Gynecologists toward Integrating Physical Therapy in Prenatal and Postnatal Care

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Abstract

Background: Prenatal and postnatal care are critical for maternal and infant health, yet many Obstetricians and Gynecologists may have limited knowledge of the benefits of physical therapy in managing pregnancy-related conditions. Integrating physical therapy into maternal care can enhance outcomes, but Obstetricians and Gynecologists's knowledge and attitudes significantly influence this collaboration. Understanding these perspectives is vital for promoting interdisciplinary care and improving maternal health services.

Objective: To determine the knowledge and attitude of Obstetrics and Gynecologists regarding the integration of Physical Therapy during prenatal and postnatal care.

Methods: A descriptive, cross-sectional study was carried out six months after approval of the topic. Using a non-probability convenience sampling technique, data were collected from 100 senior and consultant OB-GYNs working in various hospitals and clinics. The sample size was calculated using the census method. Participants completed a structured, self-administered questionnaire comprising 26 items divided into four sections: knowledge, attitude, utilization, and influencing factors. Data were analyzed using SPSS version 26, with descriptive statistics computed for all variables.

Results: The mean age of the participants was 32.70 ± 5.56 years. In the domain of knowledge (Section A), 67% of respondents demonstrated a good level of knowledge about physical therapy for maternal care. In section B, it was indicated that all respondents had a positive perception of adopting physical therapy during prenatal and postnatal care. On the practical application (Section C), 60% of them were applying PT at high levels in practice. Section D showed that 84% OB-GYNs reported moderate influence, suggesting positive factors, 14% low-impact factors, and 2% high-impact factors influenced them into urging patients to refer to PT.

Conclusion: The knowledge and attitudes of the Obstetricians and Gynecologists in this study were high regarding the application of physical therapy in maternal practice. The existing gaps, such as poor institutional support and, lack of a structured referral procedure, however, raise the need to improve cooperation between various fields and the systematic changes in the sector.

Keywords: Attitude, Gynecologist, Obstetrics, Physical Therapy, Postnatal, Prenatal

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Introduction

Pregnancy and the postpartum period are marked by profound physiological, biomechanical, and hormonal changes that can significantly impact a woman's physical function and quality of life. Common musculoskeletal complaints during these phases include low back pain, pelvic girdle pain, urinary incontinence, and reduced mobility, all of which can be effectively addressed through physical therapy interventions. Women's health Physical Therapy is a specialized area of physical therapy that focuses on issues related to the female reproductive system,

childbirth, and post-partum. It helps the women adapt favorably to physical and emotional changes that result during pregnancy and postpartum, and facilitates parturition, through the kind approach of specialized physiotherapists in the sector.² Their duties do not end during the antenatal, natal, postnatal, and perioperative periods. The implementation of obstetric and gynecological physical therapy depends on the physician's knowledge and attitudes.³ Antenatal care or pre-birth care is a kind of prophylactic care that refers to the provision of regular tests which allow the specialists or maternity

specialists to identify and prevent possible health issues during the pregnancy, as well as to introduce healthy life-styles which will benefit both the mother and the child.4 The postnatal period takes place after a child is born and comes in after about six weeks. According to the World Health Organization (WHO), the post-natal period is the most crucial and yet the most unattended stage in the life of the mother and child, and most of the deaths occur during this stage of the life of the mother and child.5 Physical therapists have a great role in these stages where they not only manage the pain and functional loss but also ensure safe recovery to normal life practices, ergonomics in breastfeeding, and the health of the pelvic floor. They have services in the postpartum period, which are particularly effective in treating low back pain, post-partum fatigue, the urge to urine or fecal incontinence, trauma to the perineum, and postural problems.6 Obstetricians and gynecologists (OB-GYNs) are considered the first lines of primary care in multi-disciplinary maternal-focused care among pregnant and postnatal women. Their knowledge and attitude towards physical therapy are critical determinants of whether patients are appropriately referred for physiotherapeutic support.⁷ The level to which physical therapy professional skills can be used is deter-mined by cooperation among health team members and the extent to which they value the knowledge of other team members in providing services to the patient, who is the team's primary emphasis. Several studies have been conducted to measure people's awareness, understanding, attitudes, and use of physical therapy treatments in various medical institutions.8 Several postpartum health difficulties can be addressed by physical therapist interventions, and symptoms can be improved with examination and therapy throughout.9 Although physical therapy is acknowledged as useful in diagnosing, assessing, and treating musculoskeletal disorders, conventional postpartum care does not regularly include it for many healthcare profess-ionals. Despite growing evidence supporting physical therapy in obstetric and gynecological care, it is often excluded from conventional postpartum care practices. This exclusion may stem from a lack of training among OB-GYNs regarding physiotherapy's benefits, limited access to qualified therapists, or underdeveloped referral systems in clinical institutions.¹⁰ The inclusion of physical therapy services in gynecology is critical to providing the best possible health care. The views of gynecologists and obstetricians on the use of physical therapy in the treatment of patients with gynecologic conditions, as well as the factors influencing their use of these services, are, however, poorly understood in Pakistan.¹¹ Interdisciplinary collaboration between OB-GYNs and physiotherapists is essential for maximizing the effectiveness of maternal health services. However, this collaboration is often limited due to an inconsistent understanding of physical therapy's role and scope within the maternal care team. Enhancing education and awareness about the benefits of physiotherapy in antenatal care can help bridge this gap and improve outcomes for pregnant women.¹² Research evidence has shown that exercise programs designed and administered by physical therapists can effectively alleviate lower back pain, pelvic discomfort, and urinary incontinence in pregnant women.¹³. Although research has proven the importance of physical therapy in the management of obstetric patients, no such study was discovered in our setting, where doctors' awareness was assessed. Consequently, this research is aimed at evaluating the knowledge of obstetricians/gynecologists on the role of physical therapy in the therapeutic process of the obstetric patients.14 This study could guide the development of methods for filling knowledge gaps, enhancing interaction between gynecologists and physical therapists, and laying the foundation for evidence-based interventions that improve prenatal and postnatal care outcomes. Understanding gynecologists' perspectives on the inclusion of physical therapy activities in prenatal and postnatal care is crucial for improving maternal healthcare practices and laying the foundation for evidence-based interventions.

Methods

After the approval of the research topic, a descriptive cross-sectional study was done over six months, in the duration June 2023 to December 2023. The institute-level ethical requirements were followed, institutional Ethical Review Board of Lahore College of Physical Therapy, Lahore Medical and Dental College, granted ethical approval (Reference No: DPT/ERB/15). The study targeted consultant and senior registrar obstetricians and gynecologists practicing in prominent tertiary care hospitals in Lahore, including Ghurki Trust Teaching Hospital, Combined Military Hospital (CMH), Shalimar

Hospital, and Fatima Memorial Hospital. These institutions were chosen to ensure a diverse and representative sample from both private and public sector healthcare settings. Eligible participants were obstetricians and gynecologists actively engaged in clinical practice who provided informed consent after being briefed about the study objectives, procedures, and confidentiality safeguards. Participants were assured that their responses would remain anonymous and would be used solely for academic and research purposes. Those excluded from the study included retired or non-practicing OB-GYNs, as well as those above 60 years of age, to minimize recall bias and ensure relevance to current clinical practice. The census method was employed to determine the sample size; that is, all qualified and acessible obstetricians and gynecologists practicing in the selected healthcare institutions that participated in the research throughout the data collection period (June-December 2023) were included. The number of publicly available people who agreed and who were included was 100.15 The instrument of data collection was a self-administered questionnaire of 26 items based on a standardized tool used before, which was translated to suit the aim of the current one. In order to set the standard of content validity, the questionnaire was vetted by a panel comprising five experts in physical therapy and obstetrics and gynecology. Their responses were employed in improving the clarity of items, how interesting they were, and in comprehending them. The clarity and feasibility of the items were also examined using a pilot test done on a subgroup of 10 non-representative obstetricians and gynecologists selected to ensure that the items are understood and manageable. Cronbach's alpha was computed to determine the reliability of the internal consistency, and this constituent showed reliability since it was equal to 0.87. The device was partitioned into four broad parts, which include Knowledge (Section A), Attitudes (Section B), Utilization of services (Section C), and Factors that affect the utilization (Section D) (3). The survey mainly used Likert-type questions to assess the attitudes and practices in use of the utilization among the participants, and they were found to be consistent and simple to process in the computation.¹⁶ There were 10 dichotomous items (Yes = 1, No/Don't know = 0) in section A, making the range between the total scores a value of 0 and 10. The scores established to be: Scores with high knowledge: 810, Moderate knowledge: 57, Low knowledge: 04. Section B also consists of 8 items with a Likert 5-point scale (strongly disagree 5 strongly agree) that had a range of scores of 8 to 40. The points were grouped in the following manner: positive attitude 32-40, neutral/moderate attitude 24-31, and negative attitude <24. Sections C and D also had 8 questions, which were rated on the scaled of 5-point Likert scale with a total point per question rank of 8-40. The concept of categorization was as follows: High: 32-40, Moderate: 24-31, and Low: <24.

Open-ended questions were deliberately excluded to streamline data collection and maintain uniformity in participant responses. The survey was distributed in both digital format (Google Forms) and as printed copies to accommodate the varying preferences of participants and maximize response rates. The data was entered and analyzed by using SPSS version 26. Continuous variables such as age were presented using means and standard deviations, while categorical variables such as gender, designation, and response categories were expressed in frequencies and percentages. Findings were graphically illustrated using charts and bar graphs where appropriate to enhance interpretability.

Results

The study involved 100 GYN/OBS consultants and senior registrars. The respondents were aged between 29 to 52 years (standard deviation = 5.56, mean = 32.70), which implies a relatively young range of professional practitioners whose practice is active within clinical practice.

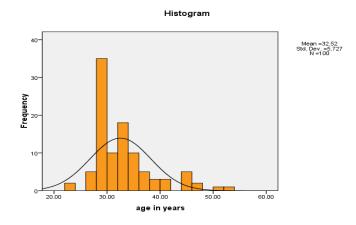


Figure 1: *Histogram of the age of participants*

Section A indicated that most subjects (67%) were well informed regarding the role of physical therapy in prenatal and postpartum, especially its musculos-keletal pain, pelvic health, and post-partum recovery. Also, 28% possessed an average level of awareness, and only 5% had very little knowledge of its practical implementations in obstetrics and gynecology (Table-1).

Table 1: (Section A) Knowledge of the Job of Physical Therapists in OB/GYN

	Frequency	Percentage
High knowledge	67	67.0
Moderate knowledge	28	28.0
Low knowledge	5	5.0

Section B shows participants' opinions regarding the integration of physical therapy in prenatal and postnatal care are remarkably neutral, with 100% of them expressing neither extremely favorable nor negative sentiments (Table-2).

 Table 2: (Section B) Attitude towards Physical Therapy

 Services

	Frequency	Percentage
Positive Attitude	100	100

Section C revealed that a majority of obstetricians and gynecologists (60%) reported high utilization of physical therapy services in their clinical practice. These respondents routinely refer pregnant and postpartum patients to physiotherapists, especially for issues such as pelvic pain, urinary incontinence, and backache. 39% reported moderate utilization, suggesting that while they may refer patients occasionnally, the practice is not fully integrated into their clinical routine. Only 1% indicated low utilization, reflecting limited engagement with physical therapy services (Table-3).

Table 3: (Section C) The level of utilization of the Physical Therapy services by OB/GYN

	Frequency	Percentage
High utilization	60	60
Moderate	39	39
utilization		
Low utilization	1	1

Section D explored the external and institutional factors influencing the integration of physical therapy into maternal healthcare. 84% of respondents identified moderately positive factors such as institu-

tional availability of physiotherapists, interprofessional collaboration, patient awareness, and administrative support. Only 2% of participants reported highly supportive conditions, while 14% perceived their working environments as having limited suportive features, potentially due to a lack of PT staff, inadequate communication channels, or infrastructural limitations (Table-4).

Table 4: (Section D) Factors Affecting Utilization of Physical Therapy Services

	Frequency	Percentage
High factors affecting the utilization	2	2
Moderate factors that affect the utilization	84	84
Low factors that affect utilization	14	14

Discussion

The integration of physical therapy (PT) in prenatal and postnatal care is a critical component of comprehensive maternal health services. The purpose of the study was to determine the knowledge and attitude about the importance of physical therapy in the childbearing period by the OB/GYNs. The findings reveal that a majority of OB-GYNs demonstrated a high level of knowledge and a neutral-to-positive attitude towards the incorporation of physiotherapy in maternal care, indicating a general awareness of its benefits but potential limitations in active endorsement or clinical integration. Literature has consistently demonstrated that physical therapy, particularly through supervised exercise programs, can significantly alleviate common obstetric symptoms such as lower back pain, pelvic girdle pain, and urinary incontinence. Randomized controlled trials have shown that targeted exercise regimens developed by women's health physical therapists improve function, reduce pain, and enhance maternal quality of life.¹⁷ The previous research on postpartum physical therapy awareness among gynecologists demonstrated that gynecologists are predominantly informed regarding the role and utility of physical therapy in postpartum females; however, there exist obstacles regarding referral of female patients because of inadequate arrangements.¹⁸ In contrast with the previous study, the current study concluded that the gynecologists and obstetricians highly refer their patients to physical therapists in the physical therapy departments that

are established within their hospitals of practice; some might consider referring their patients to private setups as well. Another study was conducted on the knowledge and beliefs of medical practitioners about exercise during pregnancy. This study shows that medical practitioners have favorable attitudes toward exercising during pregnancy. The study emphasized the preventive benefits of maternal exercise and identified a need for improved awareness and communication within the healthcare community, low referral rates, and poor knowledge of guideline recommendations.¹⁹ The current study shows similar results about the attitude of gynecologists and obstetricians towards the utilization of physical therapy exercises in pregnancy and demands for developing better communication within the healthcare community. A study conducted on awareness of physical therapy among general practitioners showed full awareness of physiotherapy among general practitioners, with good awareness of obstetrics physical therapy. Physicians primarily believe that there is limited information at the community level.²⁰ The current study shows similar results about the knowledge and awareness of physical therapy among general practitioners and suggests that there is a crucial need for healthcare professionals to communicate, collaborate, and share information more effectively. A study was conducted in Nigeria on the roles of physiotherapy in primary health care: Awareness and perceptions of other health care professionals, which revealed that 94% of physicians utilized PT regularly, and the level of specific knowledge varied, with senior physicians reporting more confidence in its benefits.²¹ Our study showed similar results, with higher utilization linked to institutional support and clearer referral structures.

A similar study done by Maqsood et al, on Awareness of Obstetricians and Gynecologist regarding Role of Physical Therapy in Managing Obstetric and Gynecological Patients in Private and Government Hospital revealed the fact that the Obstetricians and gynecologist working in both the private and government hospital are equally aware about the role of physical therapy in managing the gynecological and obstetric patients and the awareness level should be increased.²² The above findings correlate with our current study that obstetricians and gynecologists hold a positive attitude towards the integration of physical therapy in postnatal and prenatal care, and

also during the management of obstetric and gynecologic conditions. This research presents valuable data about the knowledge, attitude, and practice of obstetricians and gynecologists in terms of the incurporation of physical therapy into the prenatal and postnatal process. There are, however, some limitations that should be recognized. To begin with, the use of a self-administered questionnaire presents the potential of response bias, whereby the respondents may have over-reported positive attitudes and/or knowledge based on social desirability. Second, there was a census method applied, but the use of nonprobability convenience sampling might lead to a sampling bias, even in the case that the people more informed or supportive of physical therapy were prone to a greater willingness to participate. Third, the results presented represent only a single geographic location (Lahore) with a small sample of OB-GYNs in tertiary care hospitals, and they might not be the same in other settings (rural, under-resourced, etc.). Lastly, the cross-sectional nature of the research makes it impossible to determine the relationship between the knowledge, attitude, and pattern of utilization. It is advised that future research should cover a greater sample size and diversity, have a longitudinal design, have comparisons of demographics in knowledge/attitude/utilization using inferential statistics, and have objective measures to extend and validate these results. The development of hospital policies that formalize collaboration between physical therapists and OB-GYNs could help bridge the gap between knowledge and clinical practice.

Conclusion

The present study concludes that obstetricians and gynecologists revealed high knowledge, a positive attitude towards the integration of physical therapy in the prenatal and postnatal period. Nevertheless, although the attitude to physical therapy services is quite positive, moderate rates of institutional support and the lack of formal referral processes exist as relevant obstacles to regular use of physical therapy services. These findings point towards the necessity to develop more serious interdisciplinary collaboration, policy framework, and orderly referral mechanisms to better ensure the integration of physical therapy into maternal health procedures.

Ethical Approval: The Ethical Review Committee, Lahore College of Physical Therapy, approved this study vide Ref No. DPT/ERB/.15

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SA: Conception and design; acquisition of data

MK: Drafting of article, critical revisions for important intellectual content, final approval of the version to be published

HBK: Acquisition of data, analysis and interpretation of data

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