

Diastastis of the rectus abdominus muscles (Separation of the abdominal muscles)

Has your pregnant patient reported feeling weaker in their abdominal muscles?

Diast asis Have you noticed or can feel a 'gap' between their rectus abdominus?

of <u>Has your pregnant patient reported an increase in back pain?</u>

rectus abdominus (DRAM) is the increased distance of the muscle belly of the rectus abdominus, due to hormonal changes that affect laxity of the linea alba¹. Research reports varying estimates of incidences of having a DRAM >2cm from 66% to 100% during the third trimester¹, with 60% of participants still having a widened separation 8 weeks after delivery². Diastasis of the rectus abdominus commonly occurs during pregnancy as the linea alba goes through hormonal elastic changes and accommodates for the growing fetus¹. This diastasis can occur due to several reasons including; having a large baby or twins, repetitive heavy lifting, straining with constipation, regular coughing or genetic predisposition to laxity.

The rectus abdominus muscle is part of the abdominal wall, and plays a vital function in posture, trunk and pelvic stability, respiration, trunk movement and support of the abdominal viscera¹. It is also essential for lumbopelvic function through fascial tension². With a widened muscle separation there are alterations of trunk mechanics, impaired stability and a change in posture, which can lead to risk of injury. It is known that activating certain abdominal muscles aid in maintaining and supporting the abdominal contents, as well as optimizing the transfer of forces across the abdomen through fascial tension².

During your patient's pregnancy it is important to monitor if they have a diastatsis and help manage their abdominal muscles to decrease the separation length. It has been shown that participants who undertake antenatal interventions, such as tailored abdominal muscle exercises, have significantly reduced DRAM width compared to participants that do not do any tailored exercises³. After birth and within three months of recovery is the optimal time to work on re-strengthening the abdominal wall with appropriate rehabilitation to ensure a faster recovery of a DRAM⁴.

At MPFP we will help by

- A comprehensive assessment of the rectus abdominus muscles during pregnancy and post-natal periods
- Use of the real-time ultrasound machine as visual biofeedback to ensure appropriate core muscle activation
- Design a tailored exercise program to aid in re-strengthening the abdominal wall
- Advice on return to appropriate exercise

¹ Benjamin et al, 2014. Effect of exercise on diastasis of the rectus abdominis muscle in the antenatal and post-natal periods: a systematic review. ²Lee et al (2016). Behaviour of the linea alba during a curl-up task in diastasis rectus abdominis: an observational study. ³Jones et al, 2000. Natural resolution of the rectus abdominis diastasis. Two singe case studies. ⁴Chiarella et al, 2005. The effects of an exercise program on diastasis recti abdominus in pregnant women.



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