Bwrdd Iechyd Prifysgol Aneurin Bevan University Health Board

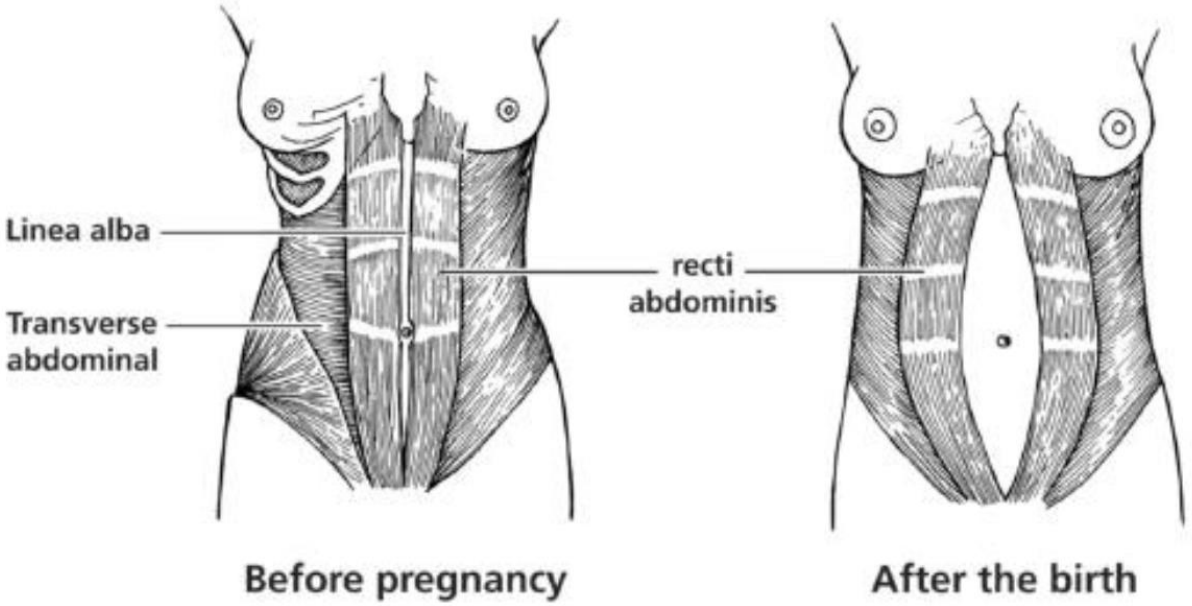
Information for Patients

Diastasis Recti (Separation of the Abdominal Muscles during Pregnancy)

Physiotherapy Service

Advice and exercises to help improve your abdominal strength and control

What is Diastasis Recti?



Diastasis Recti, or DRAM (divarication of the rectus abdominis muscles) is a separation of the abdominal muscles down the midline which may be noticeable during pregnancy or following the delivery of your baby. This separation indicates that your tummy muscles may have become stretched and weakened. You might notice a gap between your muscles, or doming / bulging with strong contractions such as coughing or sitting up from lying.

What causes Diastasis Recti?

Diastasis Recti occurs for a number of reasons, including:

- Muscles and ligaments stretching as your baby grows
- Pregnancy hormones causing the softening of ligaments and connective tissues
- Abdominal weakness
- Large baby / twins / triplets
- Multiple pregnancies

When should I address this problem?

Closure of the diastasis normally occurs on its own by 8-12 weeks after the delivery of your baby, however in some instances it can take longer to return to normal.

You should seek advice if the gap is larger than 2 fingers width, if you notice that your tummy bulges or domes when coughing or moving from lying to sitting or if you experience low back pain / pelvic pain, issues with control of your bladder/bowels or any signs of prolapse (heaviness and ache or a lump felt in the entrance to your vagina).

Speak to your doctor or midwife if you have any concerns. They can check the size of your abdominal gap and refer you into physiotherapy if necessary.

Why should I address this problem?

If these muscles remain separated long-term it can lead to other problems including:

- Low back pain
- Pelvic/hip pain
- Constipation / difficulty emptying the bowels
- Abdominal hernia

What can I do to help?

- **Getting out of bed** – Bend your knees, roll on to your side and let your legs drop down the side of the bed. Use your arms to push you into an upright position. Keep your tummy muscles squeezed throughout. Do the reverse to get back into bed.

- **Getting out of the bath** – Try getting out of the bath from kneeling.

- **Lifting** – Avoid heavy lifting where possible. If you do have to lift, keep your tummy muscles squeezed in and pelvic floor muscles engaged. Don't stoop or strain your back. Use your legs to help.

- **Laughing / coughing / sneezing / emptying bowels** – Hold your tummy with your hands to give it support and stop it bulging.

- **Twisting / side bending** – avoid this where possible. If you have to, draw in your tummy muscles first.

- **Posture** – Think about practicing good posture. Keep your tummy muscles drawn in, and your tail bone tucked under - especially when moving between positions e.g. sitting to standing, walking, up / down stairs.

- **Exercise** – Start by exercising your deep tummy muscles and gradually progress as your strength improves. For advice on post-natal return to exercise speak to your pelvic health physiotherapist or ask your doctor or nurse to refer you to one.

- **Caring for your baby** – When pushing the buggy, keep your tummy muscles drawn in. Change your baby on a surface at waist height to avoid stooping.

  If you cannot control the bulging of your tummy then limit the activity

Diastasis Test

It is important to be able to check your diastasis gap yourself so you can monitor your progress and seek professional advice if needed.

1. Lie on your back with your knees bent and feet flat on the floor.

2. Place your fingers in a horizontal line just above your belly button.

3. Push down firmly.

4. Slowly raise your chin to your chest, lifting your head and shoulders up off the floor / bed.

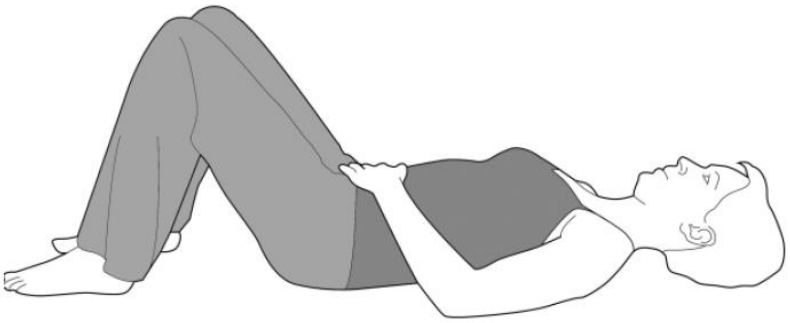
5. You should feel your fingers sink into the gap and your abdominal muscles tighten around your fingers.

6. How many fingers can you fit into the gap?

   2 or less is fine, if more than 2 you need to seek advice and exercises from your pelvic health physiotherapist.

Exercises that you can get started on

1. Deep lower abdominal exercise



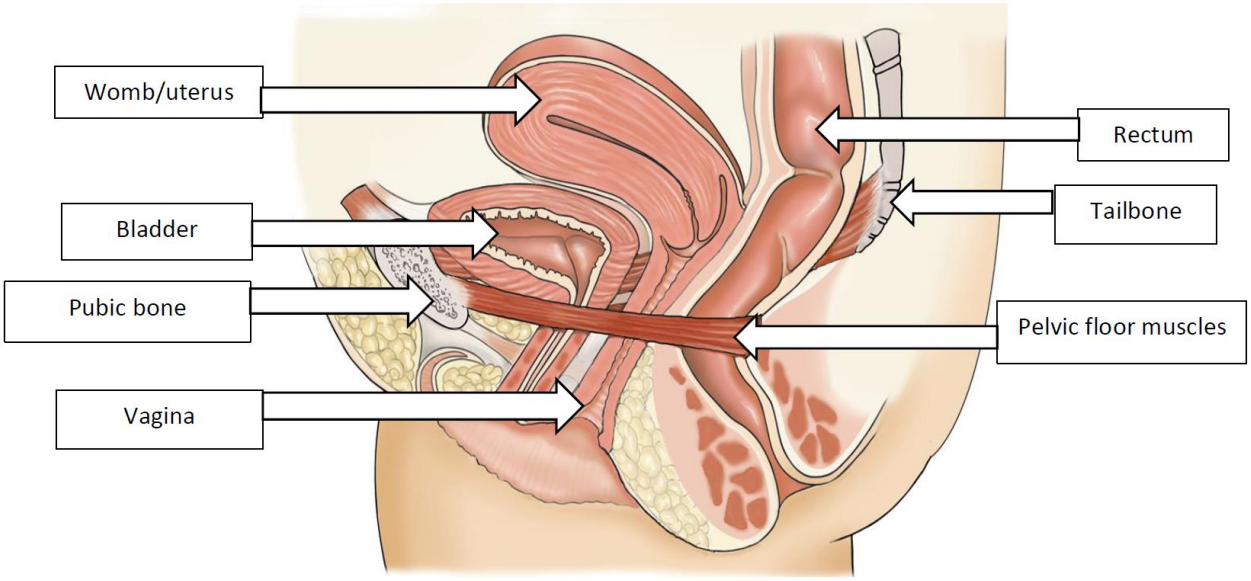
- Lie on your back comfortably with your fingertips resting on the inside of each hip bone.
- Take a deep breath in.
- As you breathe out, squeeze around your back passage and slowly draw your lower tummy muscles in towards your spine as though squeezing into a tight belt.
- You should feel the muscles tighten just under your fingertips.
- Hold these muscles whilst gently breathing in and out.
- Try and hold for 5 seconds, building up to 10. Repeat x 10.

2. Pelvic Floor Exercises

Your pelvic floor forms a hammock of muscles at the bottom of your pelvis. Strong pelvic floor muscles are essential for good bladder and bowel control. They help to prevent / improve prolapse symptoms and may also improve your sex life. They also work closely with your abdominal muscles to support and stabilise your spine.

Pregnancy and child birth can weaken your pelvic floor muscles so it is important to rebuild their strength after having your baby.

Left side view of a woman's pelvic floor muscles and related structures



The basic exercise

Lie, sit or stand with your knees slightly apart. Tighten up your back passage as though you are trying to stop yourself from passing wind. Join in with the muscles that you would use to stop yourself from passing urine. The feeling is one of "**squeeze and lift**", with the direction of movement going from the back passage up towards the pubic bone. Fully release the muscles back down in the direction of the tail bone. Gradually increase the number of repetitions and amount of seconds that you hold for until you are able to complete 10 sets of 10 seconds. You can repeat this 2 – 3 times throughout the day.

You can also try and squeeze your muscles quickly and then let go. Repeat this up to 10 times.

Vary the position that you do the exercises in and squeeze your pelvic floor with lifting, coughing, sneezing or anything that might make your tummy muscles bulge / dome.

This document is available in Welsh / Mae'r ddogfen hon ar gael yn Gymraeg