

PELVIC FLOOR AND DIASTASIS

6 PART COURSE

Part 6

Diastasis Exercises

Things to address in a diastasis

- Tightness in the lateral abs.
 - Affects their ability to contract
 - Can contribute to a bread loaf appearance or rectus-dominant abdominal engagement
 - Side breathing exercises from the pelvic floor section are amazing for decreasing tightness in the transverse abdominals and improving their function
- Rib cage mobility on the inhale and exhale, both relaxed and forced.
- Midline pressure management and rib cage movement with a small crunch.
- Imbalances in abdominal muscle function as well as side-to-side imbalances.
- Kinetic chain factors.
 - The pelvis can drive rib cage positioning, and vice versa
- Check the diastasis in various loaded positions.

Step 1: Assessing rib cage movement with breathing

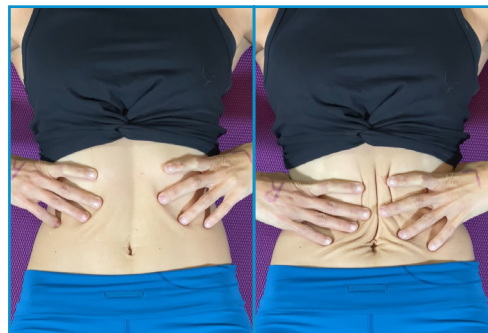
- Lie on your back and use your phone or a mirror to see your rib cage.

Inhale



- Does the ISA expand on your inhale?
- How far do your ribs move?
- Does your diaphragm pull down below your ribs?
- Does your rib cage move equally from side to side?

Exhale



Relaxed

Forced

- Try first relaxed and then forced.
 - Does the ISA narrow on your exhale?
 - Does your rib cage move equally side to side?
 - Are you able to relax and exhale without using your abs?

Step 2: Assessing the ISA with a small crunch

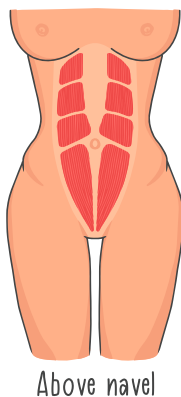
- Do your ribs widen or narrow?



Widen

Narrow

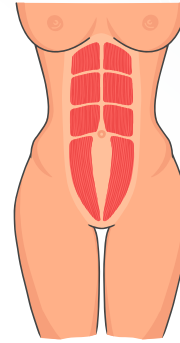
- Do your ribs widen with the crunch or a forced exhale?
 - Internal oblique-dominant pattern due to IOs pulling the rib cage open
 - Often (but not always) contributes to an upper diastasis



Above navel

- Do they narrow with the crunch or a forced exhale?
 - External oblique-dominant pattern
 - Often (but not always) contributes to a diastasis below the belly button
 - Will most likely need to address what's happening at the pelvis as well.

*The pelvis can drive rib cage positioning and vice versa, both of which can affect a diastasis.



Below navel

Step 3: Assessing rotations and asymmetries in the rib cage



- How even is your rib cage from side to side? Does one side stick out more? Do they move relatively equally in and out on each side?
- The thoracic spine, abdominal strength and balance, and other factors can affect the length-tension relationship across the midline and function of the abdominals.

Step 4: Assessing pressure management with a small crunch

- Issues that do not naturally resolve on their own can be due to poorly managed pressure during movement.
- Try a small crunch while bringing your ribs in and down to narrow the ISA as you raise your head.
- What happens to your abs?
 - Do they bulge or distend out the front?
 - Does your lower belly pooch?



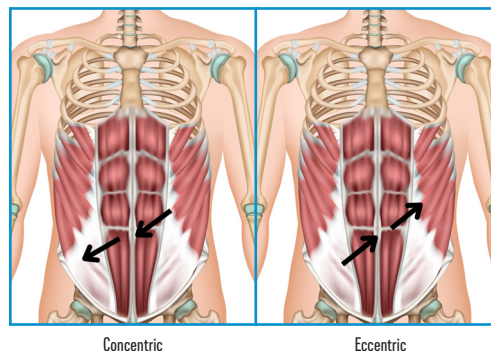
- The lower abs should flatten with no bulging or distention out of the midline with the increased pressure from up top. It's important for the lower abs to be able to manage the pressure being put on them by the upper abs.
- Isoholds with varied cuing (depending on what the person needs) can be useful here to work on rewiring.
 - Cues: Improve rib cage expansion on the inhale, widen or narrow the rib cage with a crunch, flatten the lower abs
 - Use props: Elevate the head and shoulders with pillows, squeeze a block between the knees

Half-Kneeling Rotations With a Band

- Thoracic rotation is great for core and pelvic floor function.
- Loaded thoracic rotation helps address mobility and strength to improve the load through the midline.



- Hips stay level to help create a good ab connection and avoid using your back.
 - Think of sitting down into the front glute
 - Can pull back on the front foot to help find your hamstring and pull your sit bone down, and this can also help to anchor the pelvis
 - If this still doesn't feel good, you can always put a yoga block underneath the bottom knee to help level out your hips
- Holding the band in both hands, press it directly out in front of you.
- Lean forward slightly as you drop your tailbone down.
- Brace your abs and do a tiny rotation through your rib cage over your front leg.
 - The lumbar spine and pelvis shouldn't move to isolate the movement to your thoracic spine
 - Your belly button should stay pointed straight ahead to incorporate the lower TAs
- Concentrically work the contralateral external obliques and ipsilateral internal obliques to rotate over your front leg.
- Eccentrically work those same muscles as you slowly rotate away from your front leg.



- Maintain equal tension throughout the entire range of motion in both directions.
- Switch the direction that the band is pulling, or turn around to work the opposite obliques.

*The images above pertain to how Sarah demos the exercise in the video, including the resistance and direction of pull.