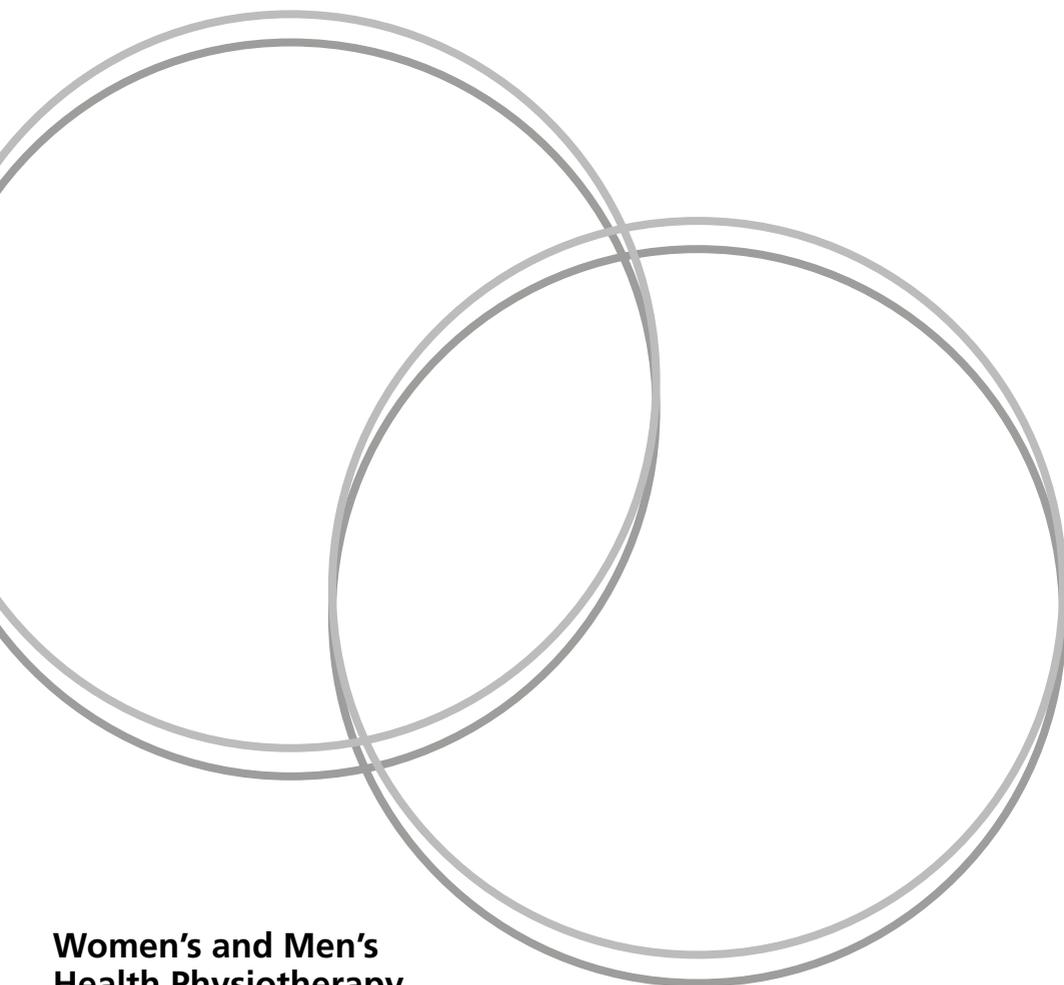




Oxford University Hospitals
NHS Foundation Trust

Recti Diastasis

Information for patients

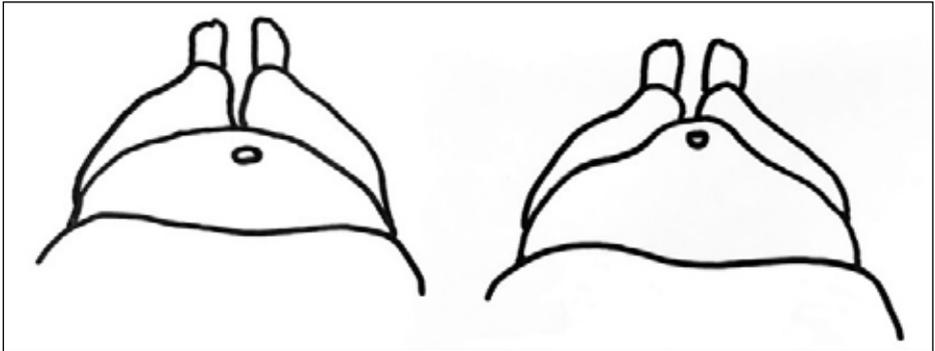


Women's and Men's
Health Physiotherapy

Recti Diastasis

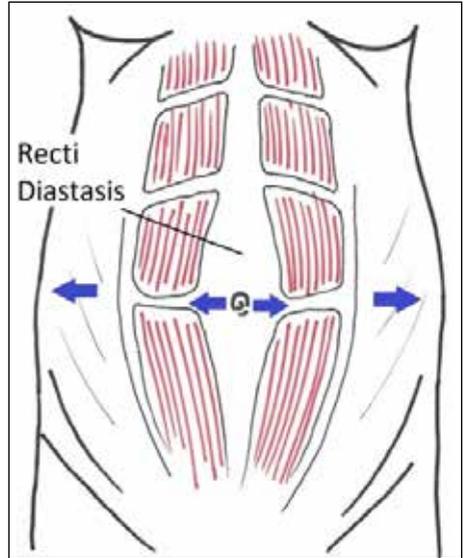
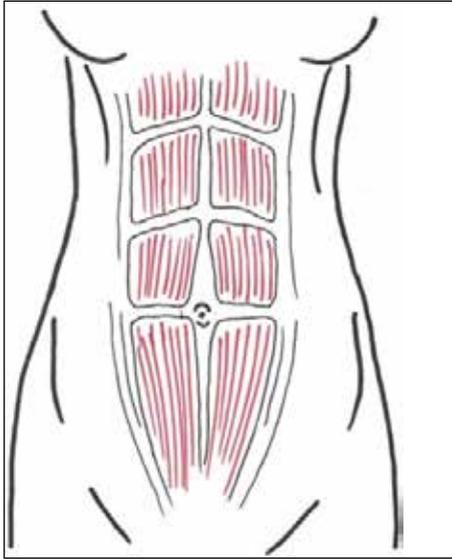
Recti Diastasis occurs when the two sides of your recti (or rectus abdominus) muscle separate in pregnancy. This separation is a normal occurrence of pregnancy which is only a 'problem' if the muscles do not go back to their correct position.

You may notice bulging / doming of your tummy with activities such as sitting up in bed or coughing and sneezing.



How does it happen?

Pregnancy hormones soften your connective tissue, making it more easily stretched by your growing uterus. The picture below shows how this causes your recti diastasis.



Why is it important to treat?

If you have a recti diastasis your abdominal (tummy/stomach) muscles will be weaker.

Weak abdominal muscles are linked to problems with back and pelvic pain, poor bowel function and reduced control when moving your joints.

How does it recover?

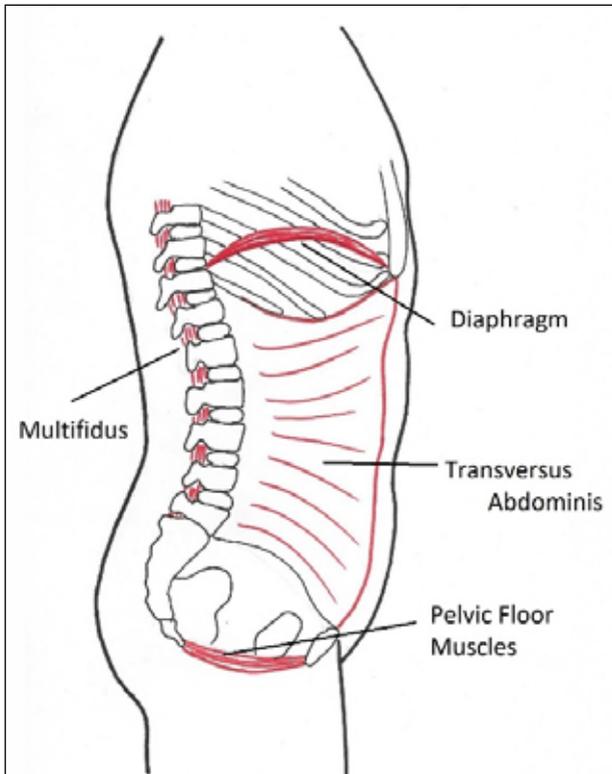
Often a small diastasis resolves within 6 - 8 weeks of delivery. Should it not resolve within this time scale, you may need to seek referral to a Women's Health Physiotherapist.

There are a number of things you can do in the first 6 weeks to aid in your recovery.

Muscle Strengthening

To help recover it is important to strengthen the muscular corset around your trunk. However, it is important to avoid overworking the affected recti muscles at first. Beginning to perform gentle abdominal activation is a good place to start.

Activation involves contracting your deep abdominal muscles known as transversus abdominis, by gently drawing in the abdominal muscles below your belly button toward your spine and up slightly, holding this position for as long as you comfortably can.

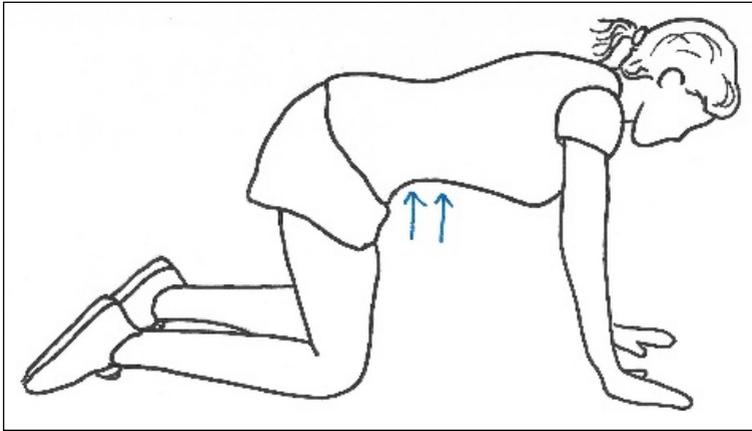


Many women do not activate correctly, often pulling in the muscles too hard whilst also holding their breath, so it's a good idea to check your technique against the following tips:

- Lifting your pelvic floor first can help you connect to your lower and deeper abdominal muscles, as they are “wired” together. When they are working well, you will feel you pelvic floor lift and the abdominal area below your belly button draw in.
- Aim to do this without holding your breath. Stop if you hold your breath - this means you are pulling in too hard and need to refocus and practice the more gentle technique.
- You are aiming to feel the lower half of your abdominal muscles (below your belly button) contract. You should not feel that you are sucking in the muscles under your ribcage, otherwise you are mainly working your upper abdominal muscles.
- Feeling downward pressure on your pelvic floor muscles means your technique is incorrect and you should seek further guidance.
- If you find it hard to feel your pelvic floor and lower abdominal muscles working together, do them as separate exercises.
- You should feel no pain or discomfort while activating.
- If you are unsure, have your technique checked by a Women's Health Physiotherapist.

Postnatal abdominal activation

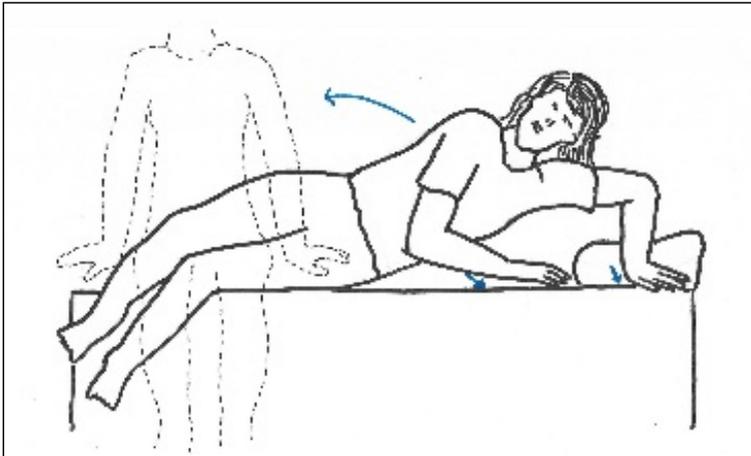
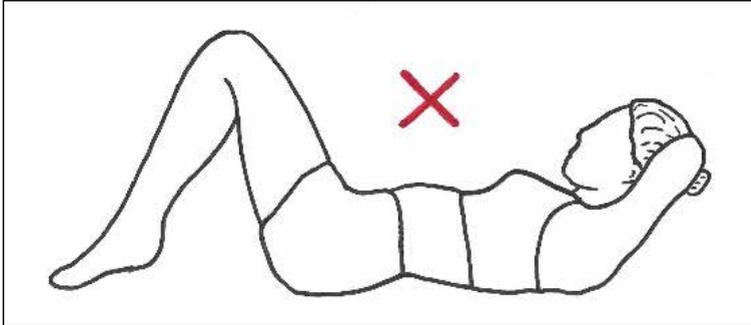
- Start by drawing in the muscles as soon as you are comfortable within the first few days after the birth. Find a comfortable position that works for you. You may prefer sitting, lying or your back or side, or in standing. As this gets easier, you may progress to hands and knees.



- Incorporating abdominal activation into daily tasks such as lifting, carrying, pushing the pram etc helps to protect your back
- There are many progressions of postnatal abdominal muscle exercises, so carefully consider the program you choose to follow. By progressing too quickly or missing out on the correct stages of progression, you may be left with an underlying weakness in the deeper abdominal muscles and hence, less lower back support during exercise. Progressing too quickly or doing the wrong exercises can place downward pressure on your pelvic floor muscles. It is often a good idea to talk about this with a Women's Health Physiotherapist as they can work out what is safe for you.

Avoid Straining

When getting in and out of bed, avoid sitting straight up as this will generally feel weak and puts added strain on your separation. Instead, roll onto your side and push up through your elbows.

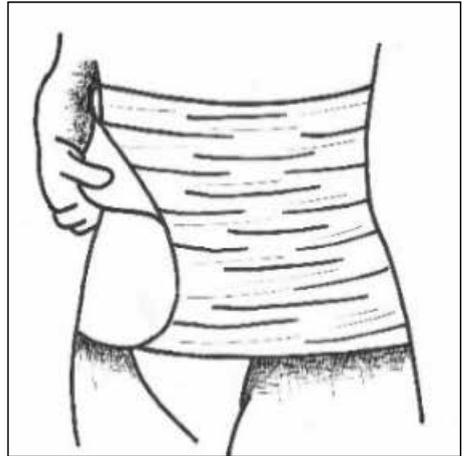
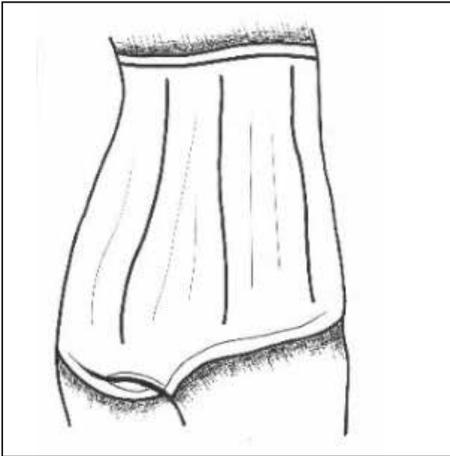


Also try and avoid lifting anything heavier than your baby, as this can put added strain on your lower back.

With your abdominal muscles feeling weaker, it can also be difficult to empty your bowels, especially if you are experiencing constipation. Speak to your midwife if you are experiencing difficulties in this area.

Abdominal support

Wearing firm clothing or other forms of compression can offer additional support to the abdominal muscles as your exercises help them to recover and strengthen. Your midwife may offer you some Tubigrip to wear. Alternatively, wearing sports compression tights or shapewear, or even a wrap-around abdominal binder may prove helpful. As you continue with your exercises, you will find yourself needing to rely on this additional support less and less.

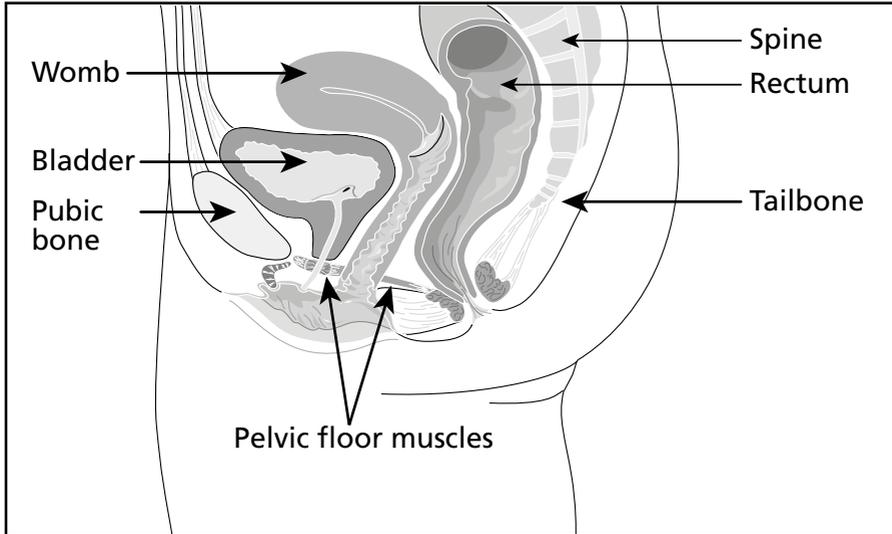


REMEMBER.....

Returning to your normal shape after the birth of your baby may take time and effort. Your abdominal muscles have been stretched for months during pregnancy. This, when combined with heavy lifting or returning to sport or your usual physical activity too soon, increases your risk of developing back or pelvic pain.

Pelvic floor exercises

The pelvic floor sits like a hammock of muscle supporting the pelvic contents from underneath.



How to train your pelvic floor muscles

Find a comfortable position. Lying down is easiest at first.

1. Imagine you are trying to stop yourself passing wind by tightening around your back passage. Imagine trying to stop yourself passing urine by tightening the muscles around your front passage. At the same time gently draw your pelvic floor muscle up into your pelvis. Some women describe imagining they are holding onto something inside their vagina and stopping it from falling out. Keep breathing normally.
2. Aim to hold the contraction for ten seconds. Repeat up to ten times. If you feel the contraction dropping off, stop, rest and start again later.
3. Next, repeat the contraction quickly but firmly. Hold for one second then relax completely. Repeat this aiming for 10 - 15 repetitions.
4. Once you can do this lying down, try sitting and then standing.

How to Seek Help

If you are continuing to have difficulties, contact the Women's and Men's Health Physiotherapy Department at the Churchill Hospital where an appointment can be made for you to be seen in Oxford or Banbury.

Tel: **01865 235 383**

(Monday to Friday, 8.30am - 4.00pm)

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Women's and Men's Health Physiotherapy Team
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Review: June 2025
Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information



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