

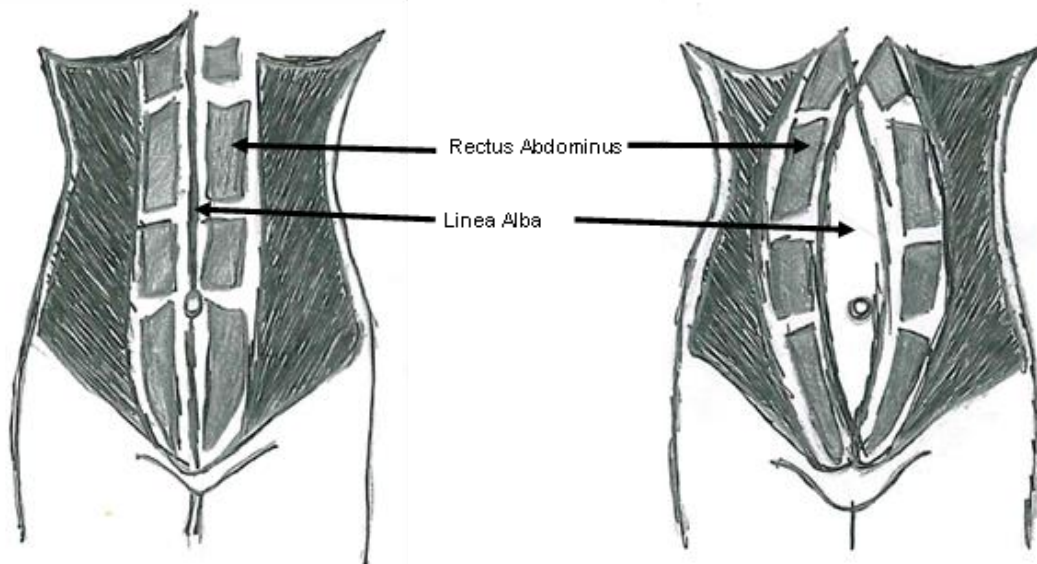
Rectus Abdominis Diastasis

This leaflet offers more information about rectus abdominis diastasis (RAD). If you have any further questions or concerns, please speak to your physiotherapist.

RAD is a common occurrence in pregnant and post natal women. It normally resolves within eight weeks postnatally without any intervention. In approximately one third of women it may not resolve by itself. It can sometimes occur in women who have not had children and also in men.

What is RAD and why have I got it?

The abdominal muscles are made up of four layers. The top layer of muscle is called the rectus abdominis. This muscle runs from the bottom of the ribcage down to the pubic bone of the pelvis. The muscle is in two halves which are joined together in the middle by connective tissue called the linea alba. During pregnancy it is normal for these two halves to move further apart and for the linea alba to stretch as in the picture below.



It is caused by the abdomen stretching to accommodate the growing baby, along with hormonal and postural changes during pregnancy. It may also be caused during labour by actively pushing to deliver your baby. It can also occur due to your connective tissue type which is genetic.

What are the signs and symptoms?

The main symptom to be aware of is doming (bulging) of your abdominal muscles during everyday tasks, such as when you go from lying to sitting, or when you return to exercise. Other symptoms that you may experience are lower back pain, pelvic pain and pelvic floor muscle dysfunction. It can also affect how you feel about your body and impact your self-confidence and mental wellbeing.

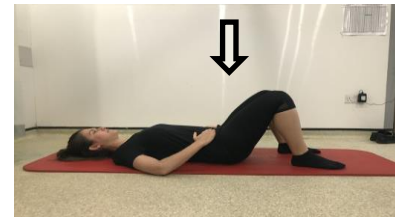
What treatments are available?

The most effective treatment for RAD is exercise focused on re-educating and strengthening all of the abdominal muscles in a way that is functional and individual for you. You can do any exercise you wish as long as your tummy does not dome whilst doing so or cause you any pain. Rehabilitation will not affect loose skin or stretch marks.

The following exercises targeting the deep abdominal muscles can be started immediately after delivery.

1) Abdominal drawing in.

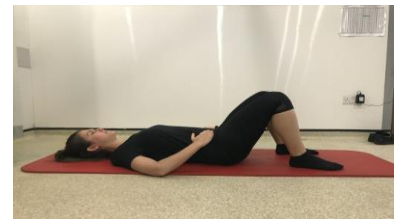
Lying on your back with your knees bent. Gently tilt your pelvis backwards, pressing your lower back into the floor, then gently arch your back away from the floor. Find a half-way point between these two positions; this is your “neutral spine”.



Now, keeping your pelvis in this position, gently draw your lower stomach muscles (below your bellybutton) in towards your spine. Try to make this a gentle drawing in and ensure you are breathing throughout the exercise. Hold for up to 10 seconds. Repeat 10 times.

2) Bent knee fallout.

Lying on your back with your knees bent. Find your neutral spine and engage your lower stomach muscles (as in the exercise above).

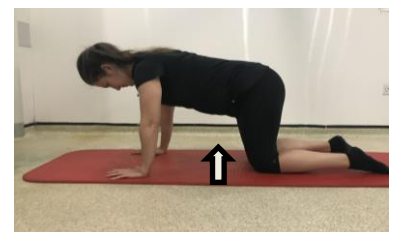


Keeping your feet on the floor, slowly move one knee out to the side, maintain your neutral spine and keep your lower abdominal muscles engaged. Repeat with the other leg. Repeat 10 times with each leg.



3) Prone drawing in – *you can progress to this exercise in four point kneeling when you feel comfortable*

Kneel on your hands and knees. Find your neutral spine (your back should be in a flat position). Gently draw your lower stomach muscles in towards your spine (as in exercise 1). Hold for 10 seconds. Remember to breathe throughout. Repeat 10 times.



Following your assessment your physiotherapist will give you more exercises *and advice specific to you.*

Can I wear a support?

Occasionally your physiotherapist may recommend you wear an external support around your stomach and low back. This double-layered elasticated material provides some gentle support to your stomach muscles if you are struggling to complete your daily activities. This support is not always recommended. In some cases it can impede the rehabilitation process.

Always follow the advice given to you by your physiotherapist.

What happens if I do not get treatment?

RAD does not cause any significant harm. Some natural recovery of RAD occurs in the first eight weeks following delivery. Following this your recovery may level off without treatment. Your GP or midwife can refer you to a physiotherapist for assessment and treatment.

Is there anything I can do to help myself?

- It is important to protect the stomach muscles from further strain whilst you are recovering *but also do not be afraid of movement or exercise.*
- You should modify or *adapt physical work or exercise that causes doming of the abdomen.*
- *If you notice doming* when getting in and out of bed – you should bend your knees, roll onto your side and use your arms to push yourself up.
- *Try not to hold your breath as you do the most strenuous part of an activity e.g. as you lift your child up. Instead breathe out as you do the movement.*
- *Avoid constipation/straining on the toilet when doing a bowel movement by adopting the position below;*

Correct position for opening your bowels



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Useful Sources of Information

- Pelvic Obstetric and Gynaecological Physiotherapy Fit for the Future – essential advice and exercises following childbirth
https://pogp.csp.org.uk/system/files/publication_files/POGP-FFFuture%20%281%29.pdf
- St. George's University Hospitals NHS Foundation Trust Patient Information Leaflets
<https://www.stgeorges.nhs.uk/patients-and-visitors/patient-information/>

Contact us

If you have any questions or concerns about RAD, please contact the Pelvic Health Physiotherapy team on 020 8725 1333 (Monday to Friday) 8am to 6pm). Out of hours, please leave a message on this number and we will contact you as soon as we can.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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