

Carrying - Try to alternate what side you feed and carry your baby, the shoulder you hold your changing bag on or which hand you carry the car seat with. Consider using a sling to carry baby if you are struggling with the pram. If you have a toddler let them come to you and climb on your knee instead of lifting where able.

If you are still struggling after following this advice, you can contact the **Pelvic Health Physiotherapy Team** on 0151 430 1890 at Whiston or 01744 646 304 at St Helens, you can ask your Consultant or GP to refer you for an appointment with the Pelvic Health Physiotherapy Team.

Abdominal Muscles During Pregnancy and Beyond

This leaflet can be made available
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式
此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona
w innych językach/formatach.

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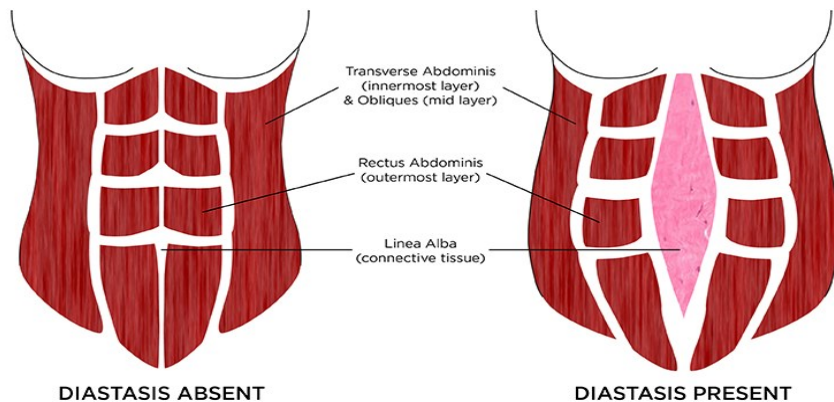
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Separation of Abdominal Muscles



How does it happen?

Any separation of the stomach muscles (Diastasis Recti), is a natural occurrence during pregnancy to allow the baby to grow and develop. The tissues in-between the muscles soften and stretch to accommodate the growth of your baby. The above picture shows how this may look or feel (it can be above or below the navel area).

How does it recover?

To help recovery it is important to avoid overworking the affected stomach muscles in the postnatal period, i.e. try not to repeatedly lift, pull or push heavy objects such as car seat, washing basket or pram. Avoid holding your breath when you are doing these tasks. If you have already been doing your deep abdominal muscle exercises during pregnancy (pelvic floor and lower stomach muscle exercises) continue with these and if you haven't, start doing them as soon as possible to help rebuild the support. Try to avoid becoming constipated or straining when opening your bowels.

Why is it important to treat?

Following a pregnancy your stomach muscles will be weaker. Weak muscles can be linked with back pain, poor bladder/bowel function, increased risk of hernia and reduced pelvic control when moving in the future.

Deep abdominal exercises

- Lying down with your knees bent is a good way to start as there is less pressure on the stomach and pelvic floor muscles. Take a deep breath into the sides and back of your rib cage and as you breath out gently lift and tighten your pelvic floor and imagine pulling your hip bones together (as though you are tightening your belt a notch or pulling up a zip from your pubic bone to belly button). Try to keep your breathing relaxed as you do the above.
- Try to hold the contraction of the pelvic floor and stomach muscles for **up to** 10 seconds (you may only manage a couple of seconds initially but this will get better with practice), then repeat **up to** 10 times.
- Once this starts feeling easier in this position, try it in lying on your side, then in a sitting position and then standing.
- Then also try doing it when you lift, pull, push etc.

When getting up from lying down - Always bend knees, roll on to your side, lower your legs to the floor and push yourself up with your arms (try not to hold your breath and try doing the above exercise as you get up).

When laughing, coughing or opening your bowels - hold your stomach with your hands to support your muscles. You can also wear support knickers or shorts initially, that will keep the muscles supported when you are moving around. Avoid holding your breath.

When standing and walking - practise good posture, make sure your tail bone is not tucked under or out (point it down to the floor), Grow tall from the crown of your head and breathe rhythmically Avoid holding your breath.

Avoid repeated lifting - if you have to lift, hold the load close (baby, washing basket, car seat, toddler, pram etc). Bend your knees and breathe out and gently contract your pelvic floor and lower stomach muscle as you stand and lift.