



Diastasis Recti

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What is diastasis recti?

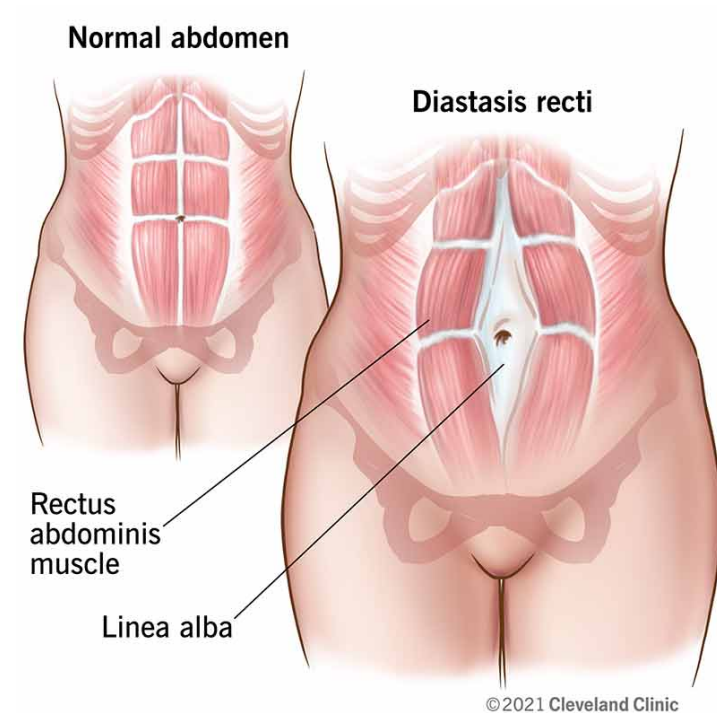
Diastasis recti (diastasis rectus abdominis or diastasis) is the separation of the rectus abdominis muscles during and after pregnancy. The rectus abdominis runs vertically along the front of your stomach. It's frequently referred to as someone's "six-pack abs." It's divided into left and right sides by a band of tissue called the linea alba that runs down the middle. As your uterus expands during pregnancy, the abdominals are stretched and the linea alba thins and pulls apart. This band of tissue gets wider as it's pushed outward.

Once you deliver your baby, the linea alba can heal and come back together. It's highly elastic and retracts backs (like a rubber band). When the tissue loses its elasticity from being overstretched, the gap in the abdominals will not close as much as it should. This is diastasis recti.

If you have diastasis, your belly may appear to stick out just above or below the belly button, making you appear pregnant months or years after giving birth.

Why does diastasis recti happen?

Pregnancy puts a lot of pressure on your abdomen (abs). The abdomen is made up of left and right ab muscles and a thin band of connective tissue (linea alba) in between. They are pushed outward



Diastasis recti happens when a person's abdomen stretches during pregnancy and creates a gap in the abdominal muscles.

and stretched to make room for the growing baby. Diastasis recti occurs when the linea alba is overstretched and doesn't come back together. The left and right sides of the abdominals stay separated. It's also referred to as an "ab gap" or abdominal separation.

Who gets diastasis recti?

Diastasis recti is most common in pregnant and postpartum women (it can also be seen in men and infants). Diastasis recti usually develops in the third trimester. There is increased pressure on the abdominal wall because the baby is growing quickly during this time. Most people don't notice diastasis recti until the postpartum period.

How common is diastasis recti?

Diastasis recti is extremely common in those who are pregnant and during the postpartum period. It affects 60% of people. It usually resolves itself within eight weeks of delivery. About 40% of those who have diastasis recti still have it by six months postpartum.

Symptoms and Causes

What are the symptoms of diastasis recti?

Most people don't notice signs of diastasis recti until they are postpartum. You can have diastasis recti during pregnancy, but it's hard to distinguish because your abdomen is stretched.

Common signs of diastasis recti during the postpartum period are:

- A visible bulge or "pooch" that protrudes just above or below the belly button.
- Softness or jelly-like feeling around your belly button.
- Coning or doming when you contract your ab muscles.
- Difficulty lifting objects, walking or performing everyday tasks.
- [Pain during sex](#).
- Pelvic or hip pain.
- [Low back pain](#).

- Poor posture.
- Urine leaking when you sneeze or cough.
- Constipation.
- Feeling weak in your abdominals.

What does diastasis recti feel like?

Diastasis recti is not painful. You may feel pain associated with some of the side effects of diastasis, but the ab separation itself doesn't hurt. You may feel weakness in your core when doing once easy tasks, like lifting a laundry basket. Some people feel a jelly-like texture in the space between the left and right abdominals when contracting the ab muscles.

How do I know if I have diastasis recti?

There are some common signs that can signal you have diastasis recti. One of the most common signs of diastasis recti is a bulge in your midsection that doesn't go away, even after exercising or losing weight gained during pregnancy. Another sign is that your belly cones or domes when you lean back on a chair or get up out of bed. You can check for diastasis recti on your own, but it is always a good idea to speak with your healthcare provider about your symptoms.

What are the risk factors for developing diastasis recti?

Several factors can increase your risk for developing diastasis recti:

- Having multiple pregnancies (especially back-to-back).
- Being over 35 years old.
- Having multiples (such as twins or triplets).
- Having a heavy or big baby.
- Being extremely petite.
- Vaginal delivery. Pushing can increase abdominal pressure.

Diagnosis and Tests

How is diastasis recti diagnosed?

Your healthcare provider will evaluate if diastasis is present, where it's located and how severe it is. Diastasis recti can occur above the belly button, below the belly button and at the belly button.

Your provider will use their hands and fingers to feel the abdominal area for gaps and muscle tone. Some providers may use ultrasound, measuring tape or a tool called a caliper for a more accurate measurement. This exam typically occurs at your postpartum appointment before being cleared for exercise.

An abdominal gap wider than 2 centimeters is considered diastasis recti. Diastasis recti is also measured in finger widths, for example, two or three fingers' separation.

Your healthcare provider may recommend movements for diastasis recti or they may refer you to a specialist for additional treatment.

How do I test myself for diastasis recti?

You can test yourself for diastasis recti:

- Lie on your back with your knees bent and feet flat on the floor.
- Lift your shoulders slightly off the ground, keeping one hand behind your head for support. Almost like you are doing a sit-up. Look down at your belly.
- Move your other hand above your belly button area, palms down and fingers towards your toes.
- Use your fingers to feel for a gap between the abs. See how many fingers can fit in the gap between your right and left abdominals.

If you feel a gap of two or more finger widths, discuss your concerns with your healthcare provider. They should confirm diastasis recti with a proper diagnosis and recommend appropriate care.

Management and Treatment

How can I fix diastasis recti?

To fix diastasis recti, you'll need to perform gentle movements that engage the abdominal muscles. Before starting an exercise program, be sure it's safe for diastasis recti. Work with a fitness professional or physical therapist who has experience with diastasis recti. They can create a treatment plan to make sure you are performing the

movements correctly and progressing to more challenging movements at the right time.

Certain movements will make abdominal separation worse. During the postpartum period, there are some modifications you should make:

- Avoid lifting anything heavier than your baby.
- Roll onto your side when getting out of bed or sitting up. Use your arms to push yourself up.
- Skip activities and movements that push your abdominals outward (like crunches and sit-ups).

Some people use binding devices (elastic belly bands) to help hold their belly in and support the lower back. Wearing binders can't heal diastasis recti and will not strengthen your core muscles. It can be a good reminder of your diastasis recti and promote good posture.

Can you fix diastasis recti without surgery?

Yes, it's possible to fix diastasis recti without surgery. Surgery is rarely performed to fix diastasis recti. Healthcare providers will recommend physical therapy or at-home exercises to help heal diastasis before surgical methods. Surgery is performed in cases of hernia (when an organ pushes through the linea alba) or if a woman wants diastasis recti surgery (a [tummy tuck](#)).

What are the best exercises for diastasis recti?

The best exercises for diastasis recti are those that engage the deep abdominals. Most diastasis recti exercises involve deep breathing and slow, controlled movements. Unfortunately, many of the most common ab exercises (like crunches) can worsen your diastasis. Before starting abdominal exercises, ask your healthcare provider to check you for diastasis recti.

What movements make diastasis recti worse?

Any movement that bulges the abdominal wall forward can cause more damage to your diastasis recti. Everyday movements like getting out of bed or up off a chair can worsen diastasis. Try to be mindful about how you are using your abdominals as you go about your day.

These exercise movements should be avoided if you have diastasis recti:

- Crunches or sit-ups of any kind.

- Planks or push-ups (unless using modifications).
- Downward dog, boat pose and other yoga poses.
- Double leg lifts, scissors and other Pilates moves.
- Any exercise that causes your abdominals to bulge, cone or dome.

Prevention

How do I prevent diastasis recti?

Some abdominal separation is normal and expected with pregnancy. There are some things you can do to lower your risk for developing diastasis recti:

- **Healthy weight gain during pregnancy:** Exercising and eating healthy foods to keep weight gain within a healthy range.
- **Proper posture and deep breathing:** Stand up straight with your shoulders back. Take deep breaths that allow your ribs to expand and not just your belly.
- **Safe core exercises:** Avoid exercises like sit-ups and crunches that put pressure on your abdominals after 12 weeks of pregnancy and postpartum.
- **Don't strain while lifting:** Certain day-to-day activities like lifting grocery bags or your children can put undue strain on your abdominals.
- **Log roll when getting out of bed:** If you're pregnant or postpartum, roll to one side and use your arms to push up out of bed.

Outlook / Prognosis

How long will it take to heal my diastasis recti?

The amount of time it takes to heal diastasis recti depends on the amount of ab separation and how consistent you are with strengthening exercises. After several weeks postpartum, this gap will start to close as your muscles regain strength. If you're making modifications to your lifestyle and performing exercises with good form, you're more likely to notice progress.

Can I get diastasis recti again?

Yes, you can heal your diastasis recti and get it again. Your risk for diastasis recti increases the more times you are pregnant. Think of the linea alba as a rubber band that is continuously stretched. Over time, the rubber band will lose its elasticity. The linea alba may not regain its original shape or form after being stretched through multiple pregnancies.

Is it too late to fix my diastasis recti?

It's never too late to repair your diastasis recti. With the proper exercises, you can fix your ab separation years after you've delivered your last baby.

Are there complications from diastasis recti?

If left untreated or in severe cases of diastasis recti, complications can include:

- Umbilical [hernia](#).
- Increase in back pain.
- Pain during sex.
- Urinary incontinence.
- [Pelvic](#) and hip pain.

Living With

When should I see my healthcare provider?

Diastasis recti is a common and easily treated condition. If you have more than a two-finger gap between your abdominals or are experiencing pain, contact your healthcare provider for a diagnosis. They may want you to see a physical therapist or pelvic floor specialist to help strengthen your abdominal muscles.

A note from Cleveland Clinic:

Diastasis recti can make you appear pregnant years after your last baby. Discuss your concerns with your healthcare provider so they can diagnose and treat you. Getting treatment can help you feel more confident in your body and correct any pain you are experiencing.

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Terms Linked In This Article:

- rectus abdominis muscles (<https://my.clevelandclinic.org/health/body/21755-abdominal-muscles>)
- pregnancy (<https://my.clevelandclinic.org/health/articles/9709-pregnancy-am-i-pregnant>)
- Pain during sex (<https://my.clevelandclinic.org/health/diseases/12325-dyspareunia-painful-intercourse>)
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- Pelvic (<https://my.clevelandclinic.org/health/symptoms/12106-pelvic-pain>)

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