



Your Ab Rehab Plan

BY - JANA SHIRLEY

Welcome from Jana



Welcome to your Ab Rehab 4 week focus e-book! This journey is all about you—empowering, strengthening, and rebuilding your core in a way that truly supports your body and lifestyle. Whether you're starting from scratch or seeking to refine your progress, this program is here to guide you every step of the way.

Take this opportunity to invest in yourself, embrace the process, and remember that every small step forward counts. I'm here cheering you on, and I'd love to hear how you're getting on, so don't hesitate to keep me updated on your progress. Let's get started and make this journey one of strength and transformation!

Find your timetable on the following page and tick it off as you go along. Do have a read of the following pages, to truly get a strong foundation on the journey you are about to embark on,

Love Jana xx

Ab Rehab

Can you tick 3 sessions a week??

Week 1

Week 2

Week 3

Week 4

VIDEO 1	VIDEO 2	VIDEO 3	OPTIONAL EXTRA VIDEO
↓ Recovery Day 19 mins	Active Mobility Day 23 mins	↓ Recovery Day 19 mins	Choose a video that spoke most to you this week as a bonus video ...or Online Members every Fri Mobility Pilates - FB 7am-7.20am
Strength 1 19 mins	Active Mobility Day 23 mins	Strength 1 19 mins	
Strength 2 16 mins	Strength 1 19 mins	Strength 1 16 mins	
Strength 3 25 mins	Strength 2 16 mins	Strength 3 25 mins	

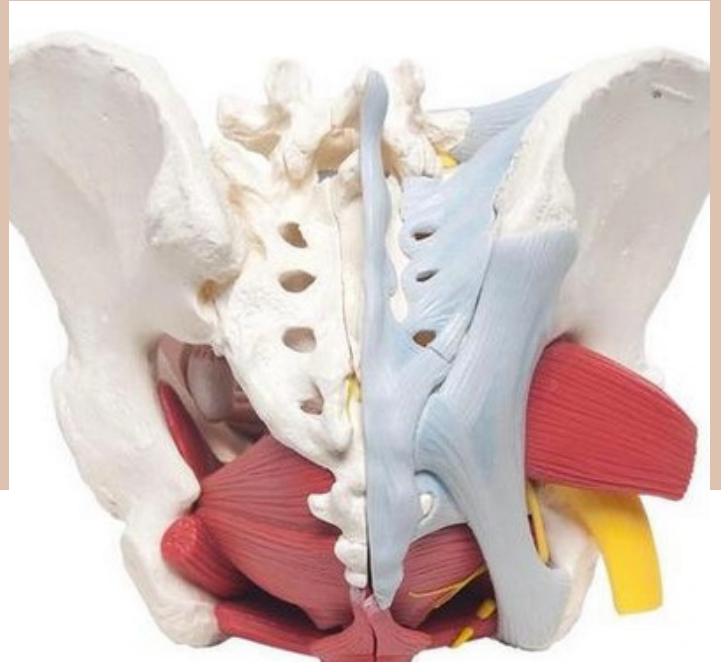
Did you know?
If you love this + want monthly support you could become an online member?
We always have a monthly theme of videos +

Pelvic Health Pilates ZOOM

1st Wed of each month 6.30pm-7.30pm

♡ = restorative

Do You Have a Hypotonic Pelvic Floor?



Symptoms of a hypotonic pelvic floor “weakness”

Do you have:

deep pain

leaking with sneezing, jumping, coughing

cant get a connection

feels vulnerable down there

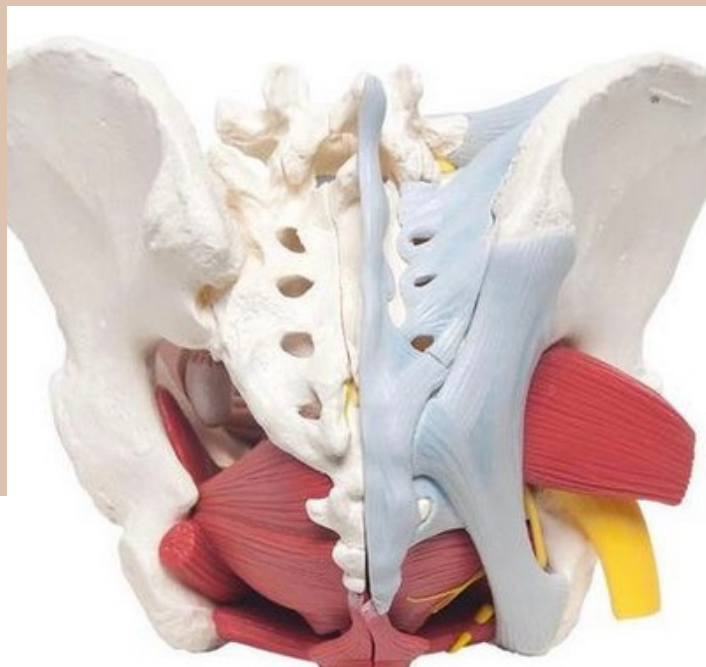
pressure or heaviness

SIJ pain, low back pain

Kegels initially improve your symptoms, but then with kegels alone the improvement wears off.

If you ticked yes to a few of these syptoms, you may have a pelvic floor weakness. You will feel benefits after about 3 days, due to the brain to muscle connections you are making...but be aware building true strength will take 4-6 weeks of pelvic floor training. Within 4-6 weeks, we are aiming for the ability to be able to do 10 slow contractions of the pelvic floor, and 10 quick flicks...you'll see this in this program! You must not stop after symptoms disapear, you need to keep working on your muscles long term to keep them firing up functionally.

Do You Have a Hypertonic Pelvic Floor?



Symptoms of a hypertonic pelvic floor “tightness”

Do you experience:

- Can't get a deep inhale down into the pelvis
- deep pain on penetration
- Pushing to start weeing
- leaking with sneezing, jumping, coughing, or a second bit of wee after you think you've finished
- constipation
- UTI risks
- Feels weak when you are lifting weights (this could be because your pelvic floor is already doing lots of work and feels like it can't do more)
- SIJ pain, low back pain, neck and jaw pain
- Kegels alone make the symptoms WORSE (this is because the pelvic floor is already active all.of.the.time)

If you ticked a lot of these symptoms on this page, your main goal initially is to really tap into the release work of breathing wide and all the way round ... you'll see this in the very first video.

You may see improvement in 3 days if the tightness is new. If you've been tight for years, this may take a very long time, which is why I recommend you do certain elements of this program again and again whenever you need. *You must not stop after symptoms disappear, you need to keep working on your muscles long term to keep them firing up functionally.*

Do You Have a Diastasis?



If you are postnatal, no matter how long ago, let's check your tummy for a diastasis.

A diastasis is the term used for the 'gap' you may feel down your mid-line of your tummy, between your six-pack muscles. This feeling of a gap, is due to the expansion of the muscles and connective tissue to make space for growing your baby in pregnancy.

It is normal to have a diastasis initially postnatal, anywhere up to a 4 finger gap. It is always best practice to get a professional to check this, but you can always do the initial check at home. As you start to reconnect to your pelvic floor, and start to release your scar, the width between your six-pack muscles will most likely get narrower. However, the most important aspect, is that the tissue in the gap, should start to feel flatter and firmer under your finger tips as the weeks progress. This is due to the connective tissue becoming more functional. This becomes the 'barrier' that keeps your organs in place. Aesthetically, when you reduce your diastasis, it will make your core look flatter. More importantly, as your core gets stronger, your back will be more supported.

In the meantime, if you find you have a soft diastasis gap, ensure you still roll sideways to get up and down off your back, and avoid putting too much loading on your core. For example, a 'sit-up' action causes a lot of intra-abdominal pressure and may result in a coning protrusion down the midline as you perform the move. Use the steps outlined in the following pages for best pelvic floor and core activation rather than sit-ups!

How to do a diastasis check:

- 1) lay on your back, with your knees bent
- 2) place your hand just under the place your ribs meet in the middle, fingers facing down towards your pelvis
- 3) wiggle your fingers sideways and see how many fingers may possibly 'dip' down between the six-pack muscles.
- 4) Test this below the ribs, again just above the belly button, and just below the belly button. Record your findings on the next page. Retest in 4 weeks and so on. Do ask if you are unsure.

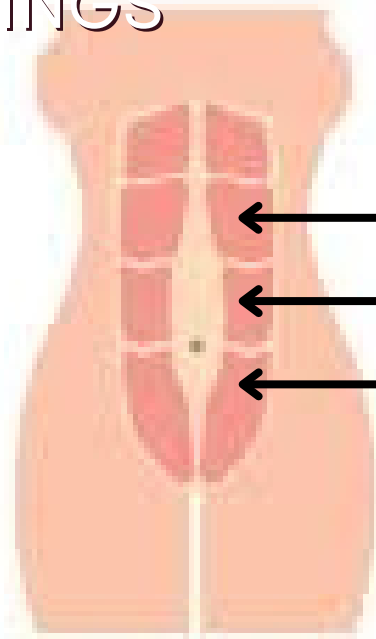
USE THIS PAGE TO RECORD YOUR DIASTASIS FINDINGS

before

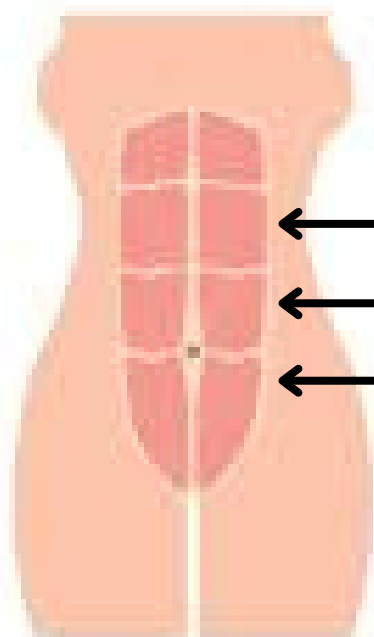
NORMAL ABDOMEN

A DIASTASIS IS DUE
TO THE EXPANSION
OF THE MUSCLE &
CONNECTIVE TISSUE
DURING PREGNANCY

after



DIASTASIS RECTI



Pelvic Floor + Peri- Meno + beyond

Menopause and Pelvic Floor Health: Understanding the Impact



Menopause marks a significant transition in a woman's life, defined by the end of menstrual cycles and typically occurring between ages 45 and 55. This natural process brings hormonal changes that can significantly affect the pelvic floor—the group of muscles, ligaments, and tissues supporting the bladder, uterus, and bowel. Maintaining pelvic floor health is crucial for bladder and bowel control, sexual function, and preventing complications like pelvic organ prolapse.

Hormonal Changes and Their Effects on the Pelvic Floor

Role of Oestrogen and Progesterone

Oestrogen and progesterone are vital for maintaining pelvic floor strength and elasticity. These hormones also keep vaginal walls thick and elastic, which is essential for sexual comfort and sensation. During menopause, the decline in these hormones can weaken pelvic floor muscles, leading to issues like urinary incontinence, pelvic organ prolapse, and sexual dysfunction.

Symptoms of Hormonal Changes...common symptoms include:

- Urinary incontinence
- Pelvic pain
- Vaginal dryness
- Decreased sexual sensation

Pelvic Floor Muscles and Menopause

The pelvic floor muscles support critical organs and control urinary and bowel functions. Declining oestrogen levels during menopause can weaken these muscles, especially our type II fast twitch muscle fibres, causing problems such as:

Peri-Meno Continued + Pelvic Organ Prolapse

- Urinary incontinence: Involuntary leakage of urine, often triggered by activities like sneezing or exercise.
- Pelvic organ prolapse: A condition where pelvic organs descend into the vaginal canal due to weakened muscles.
 - Sexual dysfunction: Reduced sensation and discomfort during intercourse.
 - Urinary tract infections and difficulty emptying the bladder.

Managing Urinary Incontinence During Menopause

Types of Incontinence:

- Stress Incontinence: Leakage during physical activities.
- Urge Incontinence: Sudden, strong urges to urinate.
- Mixed Incontinence: A combination of stress and urge incontinence.

Treatment Options:

- Pelvic floor exercises (learn the lift of the pelvic floor 'kegel' initially and swiftly move on to incorporating it within functional moves)
- Bladder training: Helps the bladder hold more urine.
- Lifestyle changes: Avoid bladder irritants, maintain a healthy weight, and quit smoking.
- Medical interventions: Talk to your GP

Pelvic Organ Prolapse: Causes and Solutions

Pelvic organ prolapse occurs when there is too much downward pressure on the pelvic floor, perhaps due to:

- constipation,
- a pressure management issue like a diastasis or incorrect exercises or posture,
- or weakened pelvic floor muscles that fail to support organs like the bladder or uterus.
- Or scar tissue dragging into the pelvic floor, like an episiotomy scar
- Factors like pregnancy, obesity, and menopause increase the risk.

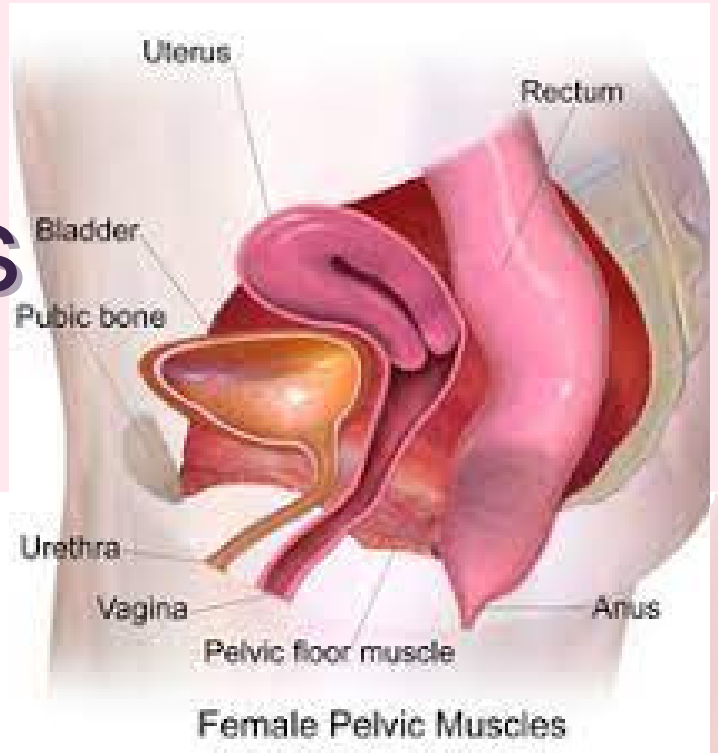
Symptoms include discomfort, pressure, and difficulty with bowel or bladder functions.

Treatment Options

- Pelvic floor exercises to strengthen support muscles. Mild prolapses can be reversed with correct exercise + breathwork techniques.
- Hormone therapy to improve tissue tone. Please talk to your GP about topical oestrogen cream.
- Surgical options for severe cases.
- Maintaining Pelvic Floor Health During Menopause, including nutrition to relieve constipation.

Peri-Menopause + Menopause can profoundly affect pelvic floor health, but proactive steps like exercises, lifestyle changes, and seeking medical advice can help maintain strength and function. Addressing these changes ensures an empowered menopause and beyond.

Pelvic Floor Foundations



Finding a connection to your pelvic floor is the BEST place to start

For initial recovery, knowing you can comfortably release your pelvic floor can be more important than the contracting, to begin with, especially if you ticked lots of symptoms on the hypertonic pelvic floor page.

Why? If you have pelvic pain, or slouch a lot, or are nervous to squat to pick your baby up; ensuring you have full range of movement in the pelvic floor is important *before* you start "squeezing" your pelvic floor muscles. To have full range of movement means we need flexibility as well as strength. This gives us the best overall function, and is key to help you on your recovery journey especially if you feel uncomfortable in or around your pelvic floor.

Lets take this in stages, firstly, it all starts with our breath

Try this:

- 1) Place your hands on the sides of your lowest ribs. Take a deep breath down into the sides of the ribs and feel the breath expand all the way round into your back.

Sometimes its good to do this with your back against a chair so you can give yourself feedback ~ when the back relaxes it will expand across the chair. This is called a 360 breath. Try up to 10 repetitions because at first it may feel hard to get a deep breath. Aim to relax your tummy throughout.

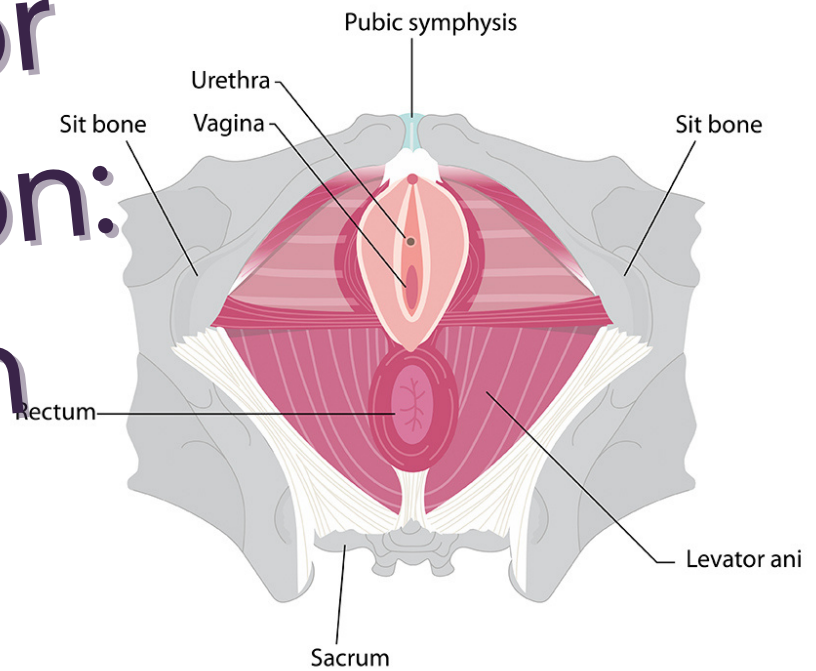
If you ticked a lot of symptoms on the hypertonic (tight pelvic floor) please aim to do this relaxing breath

theVitalitymethod

EVERYDAY throughout the program

Pelvic Floor Foundation: Activation

view of your pelvic floor
muscles from below



Phase 2 ~ Activating the Pelvic floor

This next exercise can be started quite soon after having your baby, but not whilst you have a catheter.

For some of us, activating the pelvic floor can be hard at first

Why? if you have had trauma to your pelvic floor, birthed, or had baby sat on your pelvic floor for 9 months. Even if you then went on to have a c-section, the weight of baby still has an affect on your pelvic floor. You may find the feeling of 'lift' of your pelvic floor feels different or less than it used to. And that is ok

Activating your pelvic floor exercise:

Visualise the 4 corners of your pelvic floor - pubic bone (sometime called pubic symphysis), coccyx (sometimes called sacrum), and sit bones drawing closer towards each other and lifting all the space between them. Then relax the 4 corners away from each other.

Have you ever seen a jellyfish move in sealife centre? Notice how they contract 360 degrees and gently float upwards - then they relax and open 360 degrees and float down. Its gentle but powerful. A lot of my ladies find this analogy useful when starting to activate their pelvic floor.

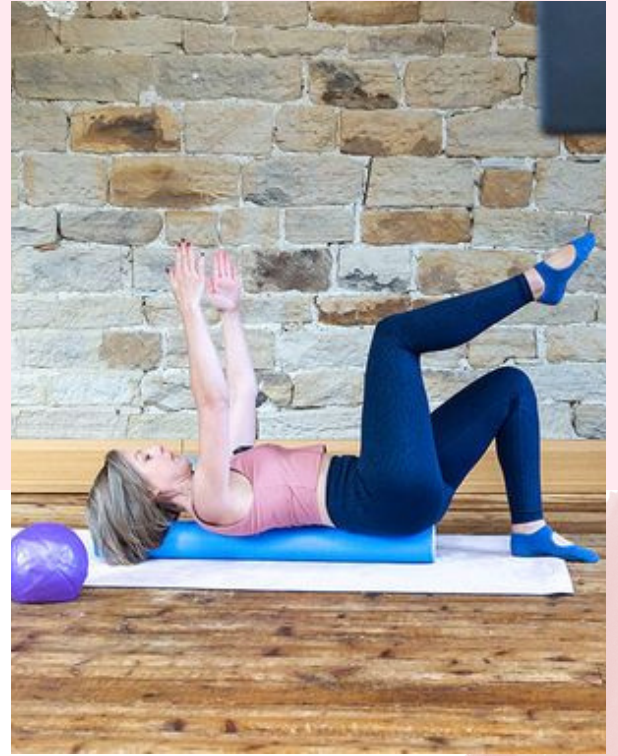
How many and how often? Try 10 slow lifts, relaxing between each repetition. Try 10 repetitions, 3 times a day

Then over the next few days as you feel the connection with each repetition, add in 10 quicker lifts of your pelvic floor, 3 times a day. ***If you ticked lots of symptoms on the hypotonic (weakness) in the pelvic floor, please do these daily throughout the challenge***

Note to make it easier to connect: Try making a sound: Try a sssshhhh or a ssssett noise as you lift to see if that helps.

Try this: hands on work. Put a couple of fingers on your perinium (the space between your vagina & rectum) & as you lift, see if you can feel this part of your pelvic floor lift.

Lower Ab Series



You'll see this A LOT through the program ~ so here are written cues to help

Aims: Strengthens the pelvic floor & the deep lower abdominals.

These muscles act like a corset, which supports the lower back & pelvis

Activating with this exercise helps to close and bring function back if you have a diastasis gap, low back ache, or pelvic floor activation issues.

Use the piece of kit Jana has advises in each video

1. Take a deep breathe in to prepare – expand 360 degrees belly, side waist and back.
2. As you breathe out, visualise drawing all 4 points of your pelvic floor attachments towards each other & lift the muscle, the tummy should gently draw in as you do this.
3. Use your hand to check abs are gently drawing in.
4. Maintain core connection as you aim to lift one leg and lengthen
5. Once you have replaced that foot to its start position, inhale fully, relaxed, before you go again.
6. Alternate - one leg slowly LIFTING & LENGTHENING on the exhale
7. Aim for up to 3 MINS altogether. STOP if your abs dome, or back lifts, or your pain increases. This may mean you start with 1 minute and build up
8. For best results, aim to complete 4 days out of 7

Nutrition for Recovery + Healing

Nutrition and recovering from surgery, birth and abdominal interventions 101

I feel really passionate about this subject, because I feel it is an area that is completely overlooked.

What a client eats and drinks as part of an optimal recovery strategy.

If a cell is damaged, is it getting what it needs to regenerate?

This short guide will show you where you can find the specific micro and macro nutrients that help a cell to regenerate.

What we do in early days matters – the less mobilisation and less massage means that the collagen can lay down in a pattern that is unhelpful. Immobility and lack of soft tissue work will cause a scar that is sticky and loss of functionality. We have GOT TO keep things mobile.

Nutrients to support during the Inflammatory phase post-birth to 3 weeks: Vit C , Vit A, protein.

Nutrients to support during the Proliferation phase: Vit C, Glucosamine, Zinc, Vit A, protein.

Early days and early weeks – nutrition REALLY counts, as injury is a time of high oxidative stress.

We need to help reduce inflammation with :

- Alkaline foods - green cruciferous vegetables
- Anti-oxidant rich foods - such as blueberries, green vegetables like kale, dark chocolate
- Omega 3s like flaxseed and chia seeds
- Protein (amino acids – proline & glycine)
- A, C, E vitamins
- Magnesium, especially if constipated.
- Selenium, calcium, zinc, iron, copper

• also consider a collagen supplement to help with connective tissue repair

Preventing Constipation



Having a good daily bowel movement, that isn't hard to pass, is extremely important for our pelvic health. If a bowel movement is hard to pass, this could contribute to a prolapse, because constipation puts pressure on the pelvic floor.

Constipation cure remedies:

- Sit in a squat position on the toilet. Feet elevated on a small stool or 'squatty potty' brings your pelvis into optimal alignment for evacuation without straining.
- Drink water: Roughly 2 litres per day. Herbal teas & weak cordial counts. For personalised amount, divide your body weight in kgs by 2.2 = the number of litres you need each day. If this is nowhere near your current intake, increase very slowly over a few weeks.
- Colon Massage - post 6 weeks you can go slowly and more deeply into abdominal massage for your colon. 1:1 clients you will receive a video to assist you at home.
- Eat fibre daily: green vegetables, nuts, seeds, beans, chia seeds
- Eat omega 3s: Chia seeds and flaxseeds (1-3 tbsp in a day of either/or) These also help hormone health, liver health & clean the bowels. Ask me about the flaxbread and chia overnight oats recipes!
- Eat Magnesium: Green vegetables, black beans. A couple of squares of dark chocolate.
- Consider a powdered supplement at night. This is very good for muscle recovery & sleep too. I take Nutri Advanced Magnesium blend Fem Balance. Do ask for details.
- Eat Vitamin C: Kiwis, green veg, lemon juice (your liver will love hot water and lemon in the morning!)
- Consider a supplement if you feel run down or you are recovering. We actually need a really high dose in a day. I use Nutri Advanced brand again, as they are very reputable, conscious company who do not use fillers or binders.

Thank you so much

I hope you have found this challenge extremely powerful and life-changing! Don't forget to let me know how you get on. Do stay in contact with me throughout your journey and beyond.

I also love to see your pictures and successes on instagram and facebook, so do tag me @vitality_method

Now you are feeling the benefits, do not stop here! Our core needs maintenance just like all our other muscles. If you aren't an online member yet, what are you waiting for? Jump in and join the community of like-minded ladies and get access to zoom with us as well as progress your pilates with 100's of videos and monthly challenges

I am so proud of you and the care you are taking of yourself

Take care, Jana xx