



Sacral Flexion
Postpartum Pattern



Institute *for*
Birth Healing

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SACRAL FLEXION
POSTPARTUM PATTERN



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Why this is important	Eliminate low back or pelvic pain
	Immediate results in the session
	Better pelvic floor muscle contraction



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What we will cover:

- Review the pelvic motions during birth
- Introduction to the Open Birthing Pattern
- Indicators to look for this pattern
- How to assess and identify sacral flexion
- Treatment Options



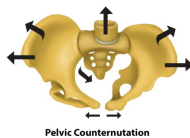
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Key takeaways for this pattern

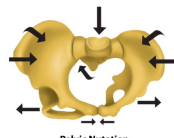
- You will be able to assess the sacrum, coccygeus muscles and EAS to identify the sacral flexion pattern
- You will be able to mobilize the sacrum to correct this pattern



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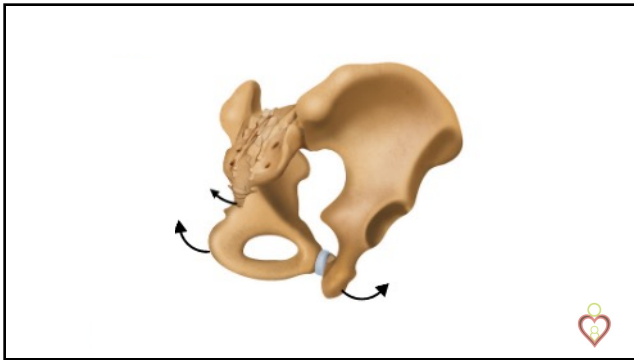
Pelvic Counternutation



Pelvic Nutation



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Considerations for this pattern

- Occiput Posterior presentations
- Feels posterior pressures during labor - back labor
- "Not a vaginal birth but an anal birth"

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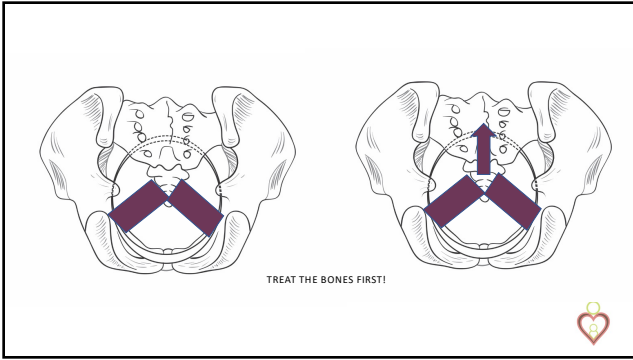


Effects of this pattern

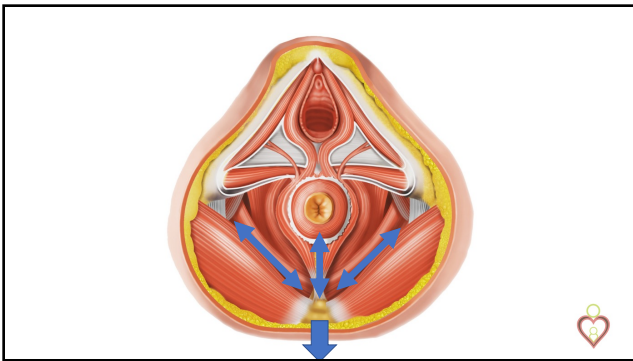
- Elongated pelvic floor muscles
 - Weakness
 - Insertional pain with intercourse
- Tailbone pain
 - Sitting discomfort
- Pulling tension in low back with flexion/extension

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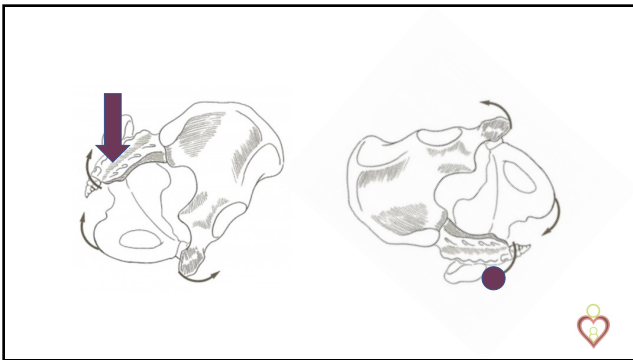




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TREATMENT RULES

- NEVER CREATE PAIN
- RESPECT THE TISSUES
 - Encourage the tissues, never force them
- Longer this pattern has been present in the body the more sessions it may take to correct it.



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What we just covered:

- The pelvic outlet can get stuck open
- Sacrum is stuck in flexion putting tension on bilateral coccygeus muscles and how the EAS is pulling inferiorly
- How to identify
- Treatment options: manual and a home program




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LABS: SACRAL FLEXION
ASSESSMENT AND
TREATMENT



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CASE STUDY



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Case Study


- Mother of 4,6 y/o
- C/O LBP, pulling in low back with bending over
- Hemorrhoids and incomplete emptying of stool



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Assessment

- Limited lumbar flexion with trunk flexion, pulling with flexion, pain with extension
- Sacrum was hard in lower third aspect with decreased mobility
- Bilateral Coccygeus muscles had increased tone
- EAS pulling inferiorly
- Pelvic Floor Muscles had 2/5 strength with only 25% of fiber firing



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Treatment

- Patient was seen one time
- Sacrum was mobilized anteriorly in both supine and prone
- Internal work – intravaginal protocol
- Core activation protocol



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Post Treatment

- Full trunk flexion and extension with no pain/pulling
- Coccygeus and EAS tone normalized
- Pelvic Floor muscles strength 3+/5
- No more pain
- Felt more relaxed in pelvic space
- Felt stronger in core



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REVIEW

- How the pelvic outlet expands and can get stuck open
- Key aspects of the sacral flexion pattern
 - Assess the lower third of the sacrum for hardness and immobility
 - Bilateral coccygeus tone and
 - Inferior EAS tone
- Treat the sacrum with anterior compression either manually or with prop for home exercise program
- Reassess the muscular tone and sacral mobility



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QUESTIONS? Email
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THANK YOU!