



Live Postural Correction Class

Lower Crossed Syndrome

Please ensure you have completed all six classes of the Ergo 101 series via SABA prior to registering for the Live Postural Correction Series.

Welcome to our live Postural Correction Series! This is a 6 class series that will provide a pre- and post-assessment of your posture and provide you the tools to correct your posture on your own.

It's important to take the classes in order and with a week between each class. This will give you ample time to work on the concepts you have learned in the class and have the best chance at correcting your posture.

Class Outline:

- Class 1: Intro, Review of Ergo 101, Initial Posture Assessments
- Class 2: Core Stabilization
- Class 3: Upper Crossed Syndrome
- **Class 4: Lower Crossed Syndrome**
- Class 5: Extremities and Self-Myofascial Release
- Class 6: Conclusion and Post-Postural Assessment

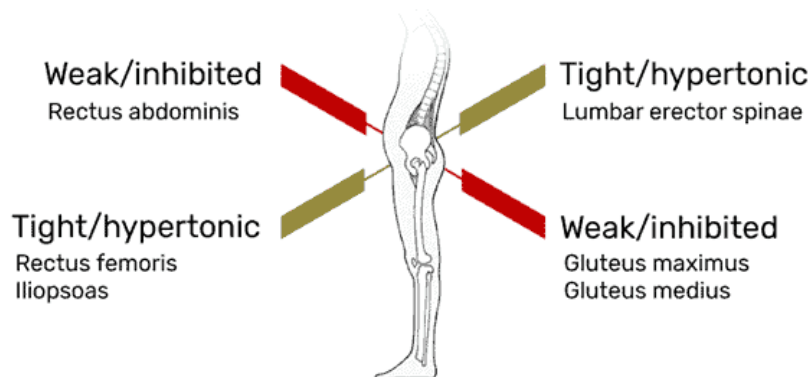
Lower Crossed Syndrome (pelvic crossed syndrome)

- Lower crossed syndrome (LCS) is the result of muscle strength imbalances in the lower body. These imbalances occur when muscles are constantly shortened or lengthened in relation to each other.
- Characterized by specific patterns of muscle weakness and tightness that cross between the dorsal and the ventral sides of the body.
- There is over activity and hence tightness of hip flexors and lumbar extensors. Along with this there is underactivity and weakness of the deep abdominal muscles on the ventral side and of the gluteus maximus and medius on the dorsal side.
- The hamstrings are frequently found to be tight in this syndrome as well. This imbalance results in an anterior tilt of the pelvis, increased flexion of the hips, and hyper-lordosis in the lumbar spine.

Remind yourself of your goal here:



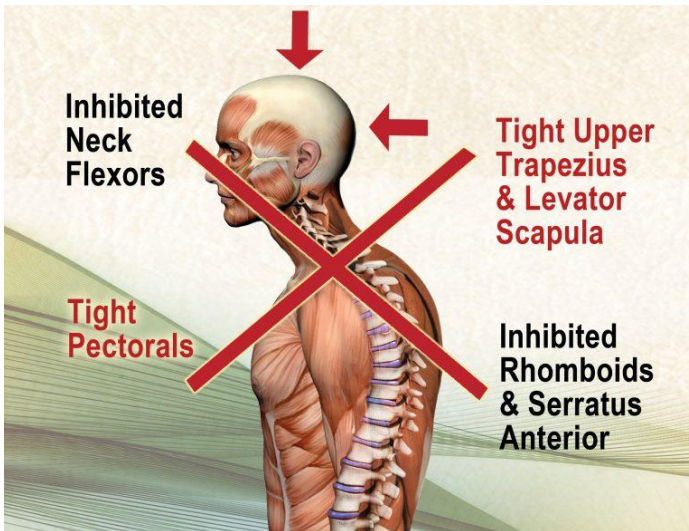
Lower crossed syndrome



Upper Crossed Syndrome

- Upper-crossed syndrome (UCS) is also referred to as proximal or shoulder girdle crossed syndrome. In UCS, tightness of the upper trapezius and levator scapula on the dorsal side crosses with tightness of the pectoralis major and minor.
- Weakness of the deep cervical flexors, ventrally, crosses with weakness of the middle and lower trapezius.
- Implications: forward head posture, increased cervical lordosis and thoracic kyphosis, elevated and protracted shoulders, and rotation or abduction and winging of the scapulae.
- Exposure of the human body to gravity forces, e.g., when standing or walking, is necessary to ensure proper activity of the skeletal muscles responsible for maintaining good body posture.
- When these muscles are not stimulated regularly (during prolonged sitting or lying) their stabilizing function is disturbed resulting in muscular weakness and atrophy

Remind yourself of your goal here:



Diaphragmatic Breathing:

Diaphragmatic breathing, or “belly breathing,” involves fully engaging the stomach, abdominal muscles, and diaphragm when breathing. This means actively pulling the diaphragm down with each inward breath. In this way, diaphragmatic breathing helps the lungs fill more efficiently.

- Inhale > push your belly out
- Exhale > contract belly

Three Point Contact:

- The back of your head; make sure your nose and gaze point straight up towards the ceiling (if you’re lying down) or to the line of the horizon (if you’re standing, kneeling or sitting).
- The space between shoulder blades, your bra strap line, or the area of the lowest rib pair.
- The lower part of the sacrum, very close to the tailbone.

Neutral Posture:

- Ears, shoulders, elbows, hips, knees, ankles
- The weight of the spine is evenly distributed across each vertebral disc
- Maintain the curves > Cervical, Thoracic, Lumbar
- Body is most efficient in neutral posture, our bodies WANT to be in neutral posture

Remind yourself of your goal here: