

# The Reliability and Validity of a Telehealth-Instructed Self-Assessment of Inter-rectus Distance to Diagnose Diastasis Rectus Abdominis

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**INTRODUCTION:** Approximately 3.8 million women give birth every year in the U.S. Fifty-six percent of postpartum women indicate that pain interferes in daily activities. One cause of physical impairment is Diastasis Rectus Abdominis (DRA), which is an overstretching and/or separation of the left and right rectus abdominis muscles from their attachments along the linea alba in the middle of the abdomen. DRA is prevalent in up to 83% of postpartum women and has been shown to cause decreased abdominal strength, pain in the pelvic girdle low back, or abdomen, and urinary incontinence. The gold-standard to measure IRD is real-time ultrasonography. However, amid the COVID-19 pandemic, assessments of IRD for diagnosing DRA relies on women's self-assessment guided by clinicians via telehealth. Yet, it is unclear if this self-palpation assessment of IRD, when conducted via telehealth, is reliable or valid.

**PURPOSE:** The purpose of this study is to determine test-retest reliability and construct validity of self-palpation assessment of IRD via telehealth.

**METHODS:** A methodological design will be used to test the null hypotheses: (a) there will not be a strong agreement between DRA diagnoses determined by self-palpation measurements of IRD via telehealth instructed by a physical therapist and those determined by ultrasonographic measurements with a  $\kappa < 0.6$ , and (b) there will not be a strong agreement between DRA determined by self-palpation measurements of IRD via telehealth-instructed visit and those determined by a physical therapist using the palpation method with a  $\kappa < 0.6$ .

**RESULTS:** Results are pending and will be included in final abstract submission.

**CONCLUSION:** There is a strong need for reliable methods of assessment with telehealth services. The results of this study will potentially provide physical therapists with a reliable alternative form of assessment of postpartum women through the use of telehealth services.