

The Volatile Relationship between the Glute Max & Abdominals

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The *Volatile* Friendship between Glute Max & Abdominals

The relationship between the Gluteus Maximus and the Abdominals is quite complex. In some instances, we need them to work as a team and in other instances we need the Gluteus Maximus to take a step back and allow the Abdominals to do what is expected of them.

So, what is actually happening and why?

Let us analyse it from a Biomechanical perspective.

Step 1: What is the more prominent Pelvic Tilt position?

- **Anterior;** Can your client easily maintain a neutral pelvis when the client is in an anterior pelvic tilt and with what will they initiate the movement? Will they use their Gluteus Maximus or are they able to activate the Rectus Abdominus? Does this tilt present them with any hip flexor restrictions? This tilt will need more emphasis on the awareness of abdominal activation.
- **Posterior;** Can your client comfortably pull their pelvis to a neutral position with the use of the abdominals or do they dominate this movement with the Gluteus Maximus? If they do dominate with the Gluteus Maximus, do they take it to the point where lateral hip rotation occurs?

When assessing the pelvic tilts, we really want to assess the awareness of Abdominal activation versus flexibility of Hip Flexors. This will give us a good indication of how easy it will be to get the Gluteus Maximus to activate efficiently in its most concentric form. This is vital for any hip stability as well as the ability to dissociate in the hip.

Step 2: What is the Natural Mobility of the Hips?

In order for the concept of hip dissociation to work effectively, your client would need to have the ability to extend their hips to approximately 20°. This however, is not possible if the client has tight hip flexors or Rectus Femoris. If this is the case, the activation of the Gluteus Maximus into hip extension will be compromised as the range will be limited. This will increase the challenge for the abdominals to maintain the pubic symphysis while the client is performing hip extension.

Step 3: What is the current state of the Gluteus Maximus tone?

The Gluteus Maximus state is compromised on a daily basis due to our lifestyle. It has less ability to handle load and therefore, the tone is non-existent. We have done extensive work on the Gluteus Maximus to see what it responds to, what compensations are prevalent when we try and train it and how we can improve the effort of the Gluteus Maximus.

Review the **image below taken directly out of our [Sleeping Bum Solved course](#).**

result of this 'lazy bum syndrome'?

Weak glutes lead to:

- Very weak hip stability.
- Compromised sacro-iliac joints.
- Weak hip disassociation.
- Loss of stability for the lumbar spine.
- Hip injuries.
- Knee injuries.
- Compromised movements when getting out of bed or getting up off of chairs.
- Bums that generally just don't look great.

Need we say more?

We have gone to do **tests with an EMG** to see what exercises would get the gluteus maximus to work

Step 4: What is the current state of the abdominals?

There is a certain amount of mind-body connection that comes into this relationship. You can have exceptionally strong abdominals but are unable to create spinal isolation through activating the lower abdominal area to create movement, while the upper abdominal area activates but maintains the thoracic spinal position. This is a crucial part of the Abdominal and Gluteus Maximus relationship. This is where the Abdominals can assist the Gluteus Maximus to activate more efficiently and delete the compensation of lumbar extension.

See the image on the next page to illustrate this.

This image comes directly out of our [Effective Cross Training for Sports Online course](#).



Step 5: What is the client's ability to perform spinal isolation

As stated in Step .4. the client must have the awareness of being able to move the lumbar spine with little change to the upper thoracic spine. This will ensure that they can avoid the common compensation of lumbar extension when trying to perform hip extension. However, when the client passes the 20° hip extension mark, they will need to extend their lumbar spine.

Step 6: What is the client's habitual hip movements?

This where mobility and flexibility are important. You cannot activate all the muscles around a joint effectively to their most concentric form is they are unable to move the limb into its full range. Therefore, sitting for long periods of time inhibits mobility and tone. Unless your client is naturally flexible.

Step 7: What load are you using?

Think about the size of the Glute Max and then think about the load that you are giving it. Think about **the All or Nothing principle of muscle fibre contractions** and then think how many fibres do you think are activating when you give the Gluteus Maximus low load resistance. When starting the process, form is important and this is where the low load work lies as depicted in the image above. In this course we take it step by step to see how we can increase the load without losing the form.

Step 8: Do you incorporate Isometric and Isotonic training?

Incorporating both isometric and isotonic Gluteus Maximus training with following the guidance in the steps above can really take your hip training to a new level of success. The main objective here is to **teach your client better form as well as pelvic control when moving the legs.**

Incorporate slow isotonic training and when you see that the form is good, then increase the speed. For isometric training, increase the time of the contraction. Remember that when it is challenging then it is making a difference.

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