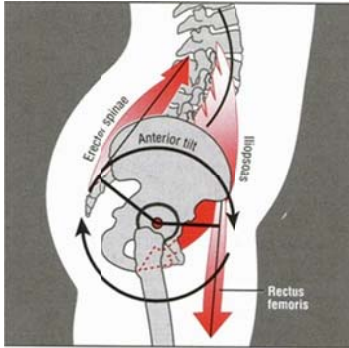


# Fixing the Computer Guy Posture

## Lower back/hip stability









Let's look at ideal posture for a minute. Look at your profile in the mirror. Chances are you're gonna find that your head is jutting forward, or that your shoulders are slumped forward coupled with a hunchback posture, or that your lower back is so arched that your stomach protrudes forward, giving you the "skinny gut". People are under the mistaken impression that working out hard in the gym will fix this. Let's make one thing clear - what you do in the gym only cements what you have. If you have bad posture, heavy lifting makes it worse. If you have good posture, heavy lifting makes it better. Of course there are exceptions to this, but for the majority of the population, that's the norm.




This post is about anterior pelvic tilt, the most common posture dysfunction. I will address posterior pelvic tilt in another post. How do you know if you have an anterior pelvic tilt? Look at your belt. If your belt points towards the floor, you have an anterior pelvic tilt. Or, look sideways in the mirror. Does your butt stick out? Chances are that you have an anterior pelvic tilt. I'm gonna break bad posture in 2 sections, lower body and upper body. The lower body influences the upper body, but upper body doesn't always influence the lower body.

The classic bad guys in APT are **tight hip flexors coupled with a tight rectus femoris (quads) and lumbar erectors (lower back). The weakened muscles are the glute max, hamstrings and the abs** (mostly the rectus abdominus and external obliques). Most people think that the hamstrings are tight in this position and stretch the heck out of them, but the hamstrings are actually in a lengthened state – stretching them will only make it worse. Due to antagonist dominance, the glute max will not fire to its maximum capacity and to pick up for this slack, the adductor magnus and the hamstrings will be forced to step in. This leads to hamstring pulls and groin pulls. Have you ever heard of an athlete suffering from glute pulls?

### Steps

- 1) Lengthen the Hip Flexors
- 2) Activate and strengthen the glutes
- 3) Lower back stretching
- 4) Strengthening abs

<p><b>Lunge Stretch</b>  <i>Lengthen the hip flexors</i></p> <p>30 seconds per leg</p>		<p>Move hip, not lower back. Squeeze butt of leg behind you. Push hips forward, rotate hips slightly from side to side.</p>
<p><b>Hip Circuit</b>  <i>Hip Mobility</i></p> <p>10 circles in both directions  10 abductions (move leg sideways)  10 superdogs (kick leg up)</p>		
<p><b>Glute Bridges</b>  <i>Activate and strengthen the glutes.</i></p> <p>15 slow movements up and down</p>		<p>Move hips up by squeezing glutes.</p>
<p><b>Cook Hip Lift</b>  <i>Advanced glute activation.</i></p> <p>10 for each leg</p>		<p>Keep tennisball between leg and ribcage. Squeeze other glute. Raise several inches. Isolate glute from lower back/hamstrings.</p>
<p><b>Clam</b>  <i>Hip Mobility</i></p> <p>10 for each leg</p>		<p>Keep your spine in one line, raise upper leg focussing on the glute muscles.</p>
<p><b>Half squat Half Deadlift</b>  <i>Activating posterior chain</i></p> <p>10 for each leg</p>		<p>Bend over/squat down until you assume this position. Move up by using hips.</p>

<p><b>Cat and Camel Stretch</b>  <i>Stretch the lower back</i></p> <p>10x</p>		<p>Do not stretch the back via traditional flexion stretches like the toe touch stretch. Although it is a decent lumbar stretch, it puts a lot of pressure on the spinal discs and can make a bad back worse.</p>
<p><b>Dead Bug</b>  <i>Train/tighten abdominal muscles.</i></p> <p>10 repetitions</p>		<p>Pull bellybutton inwards. Pull knees and arms up. Lower left leg and right arm. Alternate.</p>
<p><b>Plank</b>  <i>Train/tighten abdominal muscles.</i></p> <p>60 second plank</p>		<p>Knees should have a very slight bend in them. You abs should be tight with a slight arch in the lower back and the butt should be squeezed hard.</p>
<p><b>Foam Rolling</b></p>	<p>Hips          Quads          Calves          IT Band</p>	

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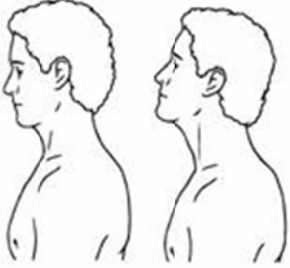
## Lower back/hip stability

Before, I talked about the anterior pelvic tilt and how to fix it. If you haven't read that, please do. This post shall be about the upper body dysfunction that normally accompanies the lower body issues. But let's get one thing straight – you can fix the upper body as much as you want, but unless the lower body is optimally aligned, the upper body will not be. The upper body is a slave to the lower body. Fix the lower body and the upper body gets a lot better. Fix the upper body and the lower body will not necessarily follow. I hope you understand this.



Most people in today's society have the "Quasimodo" look, the bent upper back with slumped shoulders and a neck that juts out. This can lead to a lot of **tension in the upper traps and the levator scapulae**, can lead to the open mouth breathing, and in some cases, can lead to **migraines**. The tight muscles in this scenario are usually the **pec minor, the lats and sometimes, the upper abs**. The stretched out muscles are the rhomboids, the mid and lower traps, and the thoracic extensors. Remember the hamstrings from yesterday's article? The levators and traps are the equivalent of the hamstrings, as in, they are in a stretched position. Look at this picture of the head jutting forward. The levators have to always be active, or else the head is gonna succumb to gravity. Stretching them will only make the matter worse. The trick is to get the thoracic spine back into its natural curves, and to get the head into a more neutral position – "floating" on top of the body.

<p><b>Foam rolling Thoracic Spine</b> <i>DeFranco's Upper body warm-up</i></p> <p>10 times centered 10 times left 10 times right</p>	A person is lying on their back on a gym floor, using a white foam roller to roll their upper back. They are propped up on their elbows, and their head is resting on the floor.	<p>Separate scapula and foam roll upper back, 10 times centered</p>
<p><b>Extending thoracic spine</b> <i>Thoracic mobility</i></p> <p>10 reps</p>	Two side-by-side photographs of a person lying on their back on a gym floor, using a green foam roller under their upper back. In the left image, they are in a neutral position with knees bent and feet flat on the floor. In the right image, they have lifted their hips and shoulders, arching their lower back to extend the thoracic spine.	

<p><b>Extending thoracic spine</b> <i>Thoracic mobility</i></p> <p>10 reps</p>		<p>Put arms on low bench, push down the chest.</p>
<p><b>Wall Pec Stretch</b></p> <p>45 seconds each arm</p>		<p>Grab doorledge or column. Gently push chest forward during stretch</p>
<p><b>Lats Stretch</b></p> <p>45 seconds per arm</p>		<p>Hold beam, lean back till lats stretched.</p>
<p><b>Shoulder Stretch</b></p> <p>Hold for 60 seconds</p>		<p>Hands back. Slide body forwards till stretchy feeling in shoulders is felt.</p>
<p><b>Shoulder dislocations</b></p> <p>15 reps</p>		<p>Start wide, use rope or broomstick. Tilt arms around till you touch your butt. Grip tighter when things loosen up.</p>
<p><b>Scapular Wall Slide</b> <i>Scapular depression and retraction</i></p> <p>10 reps</p>		<p>Muscle activation mid-back. Get the elbows as low as possible without overarchng the lower back.</p>
<p><b>Chin Tuck</b> <i>Deep neck flexors</i></p> <p>10 reps</p>		<p>Chin Tucks: Stand with back and head against wall. Keeping back of head to wall, roll chin down towards neck. It is a very small movement.</p>

## Reverse Crunch

*Prevent lordosis/kyphosis  
Strengthen Abs*

3\*max



Lie back on the floor. Flex your knees. Raise your knees against your head by crunching your abs. Keep feet down, legs squeezed and head on the floor. Put pelvis on floor after each rep. Work abs, not flexors. Don't let legs come past perpendicular.