

Ep #93: The Power of the Lower Glutes



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With Your Host

Susi Hatelty

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Male Announcer: You're listening to *From Pain to Possibility* with Susi Hately. You will hear Susi's best ideas on how to reduce or even eradicate your pain and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hately.

Welcome back, I'm really excited to share this topic of the lower glute fibers with you because we've been running a one hour workshop, where more than 500 people have actually watched the workshop to this date. And we have just been getting really, really amazing feedback from people when they practice what's going on in their lower glute fibers and their rotators generally, and how that's changing their knees, their hips, their backs, their SIs, their posture.

And so many of my clients are over the age of 50, many of them are over 60. And it's demonstrating yet again, that when we give our systems the correct stimulus or a significant stimulus, so much can change. Even at an older age, right? So that's really the essence of this episode.

Now, as you're listening to this, if you find yourself thinking, "Ooh, yeah, I want to get more on this," then send us an email at health@functionalsynergy.com and we can offer you the recording of the workshop that we've run. Or if you want to join it live Kiya can let you know when the next sessions are going to be happening and you can get in on it.

So I'm going to give you some of the anatomical relationships here. I'll give you an exercise to explore so you can start to get a sense of it. And like I said, if you want to dig in deeper, then just send us off a note and we can get you set up with that. Also in the show notes on our website we'll have the direct link, where you can just go and purchase it. All right?

So the big piece around this, that about eight months ago I was reading some evidence and research around the lower glute fibers and how important they were for people with osteoarthritis in the knee or the hip, as well as for recovering from knee and hip surgery. And I've been doing a lot

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of work over the past few years with clientele with osteoarthritis, as well as the surgery recovery.

So I started to play with it. Now what I have found in a lot of traditional rehabilitation is when they are asking people to do glute work, a lot of them are saying squeeze the glutes. Like just squeeze them like squeezing a sponge. Not all of them do this, but I find that that's what clientele come back to me with, "Oh, this is what I was taught." Whether they were taught it, whether it was just their interpretation, who knows.

But the idea is, is that the squeezing of the glutes wasn't quite it. So we started to really play around with how do we actually help this occur? So when we're looking at the glutes, the first thing that's really important is when we think about the glute maximus, which is what I'm really focusing on here, is we tend to think of the glute maximus as a powerful hip extensor.

So think about cross country skiing and bringing that leg back behind you, or just extending the leg back behind you, bringing it behind you. The glute maximus, that's what it is primarily known to do. And when you look closely at the glute maximus, all you need to do is Google this, and I show a great image of this in the workshop. When you look at the image of it, there's like three quarters of it contributes truly to that extension.

But then there are these lower fibers in the lower quarter and they attach directly into the femur. Whereas the upper ones, the upper fibers attach into the iliotibial band. So what's interesting is these lower fibers attach directly into the femur. So when they shorten, they draw that femur into rotation.

And there's some talk in the anatomy world about how those lower fibers that create rotation as well as the deeper rotators of the hip act much like the rotator cuff of the shoulder. Where up in the shoulder, that rotator cuff is helping to maintain the head of the humerus in most ranges of motion.

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There's a possibility that's what these lower fibers and the deeper rotators could be doing.

I'm just sharing what I've read from other anatomist whether that's true or not, I let them debate it. But it just becomes an interesting idea. Yes, granted the acetabulum, that hip socket is deeper than what we've got going up in the shoulder. It's just interesting. Because what we do know for sure, when you look biomechanically at our bodies, we have three planes of movement.

There's a plane of movement that's the sagittal plane. So if you think about extending your arm behind you or your leg behind you, or raising your arm up overhead, or bringing that knee to your belly, that's flexion and extension, that's sagittal plane.

If you think about frontal plane, that's when you bring your arms or your leg away from you, think about a snow angel, and then bring it back in abduction, adduction, that's frontal plane. And then there's the rotational or the transverse plane.

All of our movements are just one of those or a combination of all three. So biomechanically we have those ranges. And what's interesting is when you look at how we move, and a lot of our movement day to day does involve heavily the sagittal plane, that front back plane. That when we move, there's three primary things that need to happen.

Now I'm distilling this into the basic three. And people who are really keen on biomechanics might get on my case because there's a lot more than three, but I'm just distilling it into its simple categories. We need to have a primary mover. We need to have a primary driver which enables the movement forward. So we can think about that as the force that makes the movement occur.

Then we have an opposing muscle group, which needs to release. And so there's a primary driver, that's the fuel or the force. And then we have a

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muscle group that's the release, and those happen opposing. And then we have muscle groups that are supportive. And those supportive muscle groups are in the other two planes.

So when we're looking at sagittal plane movement of that leg bone in the hip socket, so forward and back, that is where that primary drive and then the releasing muscles occur. And then to help create support our transverse and our frontal plane muscles help maintain the femur head or the thigh bone head in the socket. You can also think about it as providing some force closure so that there's some stability through that joint so that movement forward and back can happen smoothly.

A lot of people don't tend to think about that transverse and frontal plane work as important. And yet, it's so vital for us to really develop, and grow, and express both the force that's needed to move the bone, but also the release of that opposing muscle group.

So when we're looking at the lower glute fibers and those deeper fibers of the rotators, they're providing that rotational element, right? That's why when I've been teaching this inside the workshop setting, so many people have felt like, holy smokes, I'm so much more stable now. I feel lighter, I feel solid in my pelvis. I feel like I'm in my legs. I'm solid on my feet. They're surprised that their shoulders feel good, or their jaw relaxes, or their neck settles.

And a big reason for that is because now there's more dynamic stability going on through that pelvis. And when you look at the pelvis connection to the legs, the pelvis connection to the spine or the ribcage, that's a really important bridge between the energy or the force moved from the upper body to the lower body, lower body to the upper body. As well as how energy and force moves left to right and right to left.

So it's a really huge, important, significant area of our body that these, apparently what I'm really seeing clearly, clinically, is that these lower fibers have a big play. We often look at the pelvic floor has been super important

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to pelvic stability, and it is. And as I'm noodling on it and trying to express it, these lower rotator fibers, it's not that they create a floor to the torso, that really is the realm of the pelvic floor.

But they do provide some kind of support between that leg bone and the pelvis. So there's kind of a floor, and again, some of the anatomists who follow me, they'll be like, "No, no, no, Susi, it's not quite like that." Which is fine. But it's like there is something lower that is providing like a shelf, or a patio, or like a hammock of sorts where the pelvic floor connects between the pelvic bones, these lower fibers are connecting the leg bone to the pelvis.

So it's taking more of a global stabilizing role to the overall relationship between the pelvis, the leg, and the torso. So it's helping bridge between that pelvis and the leg in a really, really profound way.

And what I mean by that as profound is the profundity is in the nuance, because the movement is not big, it's actually quite subtle and quite small. And there is a tuning into your body that you need to do. It's nothing huge. So you've got to quiet down enough to really be aware, which I think adds to it because it helps refine your focus that much more.

Which I believe when someone can refine their focus, they help to grow their curiosity, it helps grow their exploratory nature of themselves. Which we know from the mindfulness research is paramount to helping down regulate. If we're coming at an exercise from this is the right way and this is the authoritative way to do something, we're actually more in a sympathetic drive. We know that from the mindfulness research.

Whereas when we can come at it from this, "This is really curious. Let's see what's going to go on here. Look at that, my leg bone is doing this. And then my rear pelvic floor is starting to contract. Hmm, interesting, I'm holding my breath. I wonder if I relax my breath a little bit. Interesting, now I can feel more of my foot." You see how that's different? Like there's just

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this different sort of like, “Huh, what's going on here? Curious.” Just a curious nature of what's happening.

And what we have found is that there's more of a parasympathetic response, there's a rest and digest response, there's a curiosity, a clarity of what's going on. And when there's clarity, clarity is power because we're more certain and clear about what actually needs to shift.

So as I take you through an exercise that you can explore, see if you can be in that state, that curious exploratory state. And if you find yourself weaving over to the, “This is the way to do it. This is the authoritative way,” just notice that you're doing that. I mean, we all do it at times, I think. And so we just kind of get to notice ourselves in that state. And then can you be curious about being in that state and be curious about why you're there?

And, again, not be like getting down on yourself, per se. But can you just maintain that curiosity and explore being curious again? And just notice, again, what happens. Like notice with your breath. Notice what happens in your head. Notice what happens in your brain. Notice what happens in your guts. Notice what happens through your system and the results that you get. Because, ultimately, what the results are in your system are the ones that are the most important.

So to do the exercise that I want to share with you, you're going to need to place your hand on your hip and around the bottom of your bum, if I can call it that. So if this feels a little bit odd to do, then maybe take your hand to the top of your pelvis or to the side of your pelvis.

And you can also place, like if you have a pen, or a pencil, or a like a spinal strip, or a foam noodle, or a block even. Either you can't reach the bottom of your bum or you don't feel comfortable touching the bottom of your bum, then you can always utilize a prop to kind of place in that area.

The idea of putting touch there, if you're comfortable with doing that, is to bring awareness for your brain to focus in on. And again, sometimes we

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can't quite reach it. I know for me when I'm in standing, I can get there, I don't get my whole hand there. But if you can get a piece of it that you can cup with your fingers, or again, just touch with a foam noodle or a yoga block that might be helpful.

Okay, so what I want you to also play around with is either get onto a step, or onto a yoga block that's not foam in the sense of soft foam. So I've got a whole set of blocks, and I know a bunch of my other Canadian colleagues have blocks that are a bit smushy. I'm thinking more about the yoga bricks, that might be a better term for it. Stand up on a brick, whether it's a cork brick, or firm foam brick, or a cork where there's not a gush to it, or stand on a step. And then let one leg dangle.

And then just rotate your leg bone in your hip socket. And what I want you to pay attention to is as you rotate it, does the leg move wide, or forward, or back? Do you bend your knee? Are you guiding the movement from your foot, or is your foot moving simply because the leg and the hip socket is moving?

Because your foot, in this exercise, is the bottom of the kinetic chain. So when you're moving that leg in the hip, the foot follows it. So try not to drive the movement from your ankle, or from your toes, or from your foot. See if you can keep your foot as quiet as possible and then just guide the movement from the leg and the hip socket.

And what you're going for here is can you feel the lower bum engage? It's not an adduction, your inner thighs aren't involved. Your hamstrings are not involved, so the back of the leg is not involved. Your quads are not involved. It's just the lower curvature of your bum, the bottom part of your bum. And work with rotating it and then unrotating it, rotating it and unrotating it. And then switch sides and do the same thing.

And another thing to tune into is watch if you're wanting to grip with your belly, your ribcage, your jaw, your breathing. And relax all that because the only thing that's actually necessary to get into the movement here is the leg

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bone and the hip socket. And the response, the muscle that is getting involved are those lower glute fibers, those deeper rotators, those are the only muscle groups that are involved.

Now sometimes people will say, “Okay, well I'm going to just squeeze those muscles.” And I want to encourage you to consider it in another way, where it's not that you need to squeeze them, like in your brain go “Okay, I'm going to engage this muscle group.” I want you to think about the segment that's moving.

So you're moving that leg bone in the socket. So think about the desired movement, which is the leg bone is rotating in the socket. And when you think of it that way, now you're starting to generate the movement, you should feel your lower fibers respond to that. And if they don't, that's okay, keep playing with it. Keep playing with it. Try not to use your brain to make the muscle contract.

Think about utilizing like the actual movement is the leg rotating in the socket. And as you play with that, you'll start to train your neuromuscular system to be responsive, as opposed to you clenching something to make it happen. After each time doing this, just stand on the step with both feet and notice what it is that you feel.

It's not uncommon, initially, for people to have a couple of different experiences or a few different experiences. The first one being, I have no idea how to move my leg. Without clenching my butt, I have no idea how to move my leg. And then the other is, as they start to get it and they start to stand, they're like “Huh, well, this feels different. I feel like I'm on my feet, I feel like I'm more on my legs. My knees don't feel as sore.”

A third option is they might also notice where they want to compensate and kind of bring in other parts of the body to make it happen because they don't quite have that neuromuscular pattern. So they might, like I said, clench their jaw, hold their eyes, hold their armpits and their arms quite tight to themselves, or clench with their toes. Or they might go into a pelvic

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tilt or a tuck. They might hyperextend their knees. They might lean over one side quite a bit.

So it's just noticing that and seeing what happens. And see if you can reduce the compensatory pattern. And again, just focus on the thing that we're asking to move, which is just the leg bone rotating in the hip socket. Explore that and then notice what happens.

And if you're getting kind of like, "Ooh, this is kind of cool. This is really interesting." And you want to dig in more to it, then come join us. Either join us for one of the live workshops that we are running. And if we've already passed through the running of the live workshops and you're listening to this episode later, past the time we did these live, we do have a recorded version of this. And I highly encourage you to grab a copy of that.

And again, the link is in the show notes. And you can also email us directly or direct message us. Our email is health@functionalsynergy.com. It would so much fun to teach you. It's an amazing, amazing concept.

While I've got you here, I want to tell you a little bit about the certification program, our IAYT accredited yoga therapy program. It would be such a delight to share all of the great things about it and how we help people grow their technical skill, grow their client bases to be some of the most successful yoga therapists that we have in our industry, simply because they know how to get great results and they know how to grow a business.

So we do both and we do both really, really well. If you're interested in becoming a yoga therapist, do send us a note at health@functionalsynergy.com. Take great care.