Aim: Diastasis Recti Abdominis (DRA) is a condition affecting many post-partum women. The aim of this study was to evaluate long-term results of surgical repair of DRA in a cohort of post-partum women.

Material and Methods: Sixty post-partum women with DRA and training-resistant core dysfunctions were included. Surgical repair was performed with suture plication of the linea alba. Abdominal core function was evaluated with the Abdominal Trunk Function Protocol (ATFP) including a self-report questionnaire and seven functional tests. Urinary incontinence and Quality of Life was evaluated with the Urogenital Distress Inventory (UDI-6), the Incontinence Impact Questionnaire (IIQ-7) and the SF-36 questionnaire. Follow-up was performed at one year and three years’ post-operatively.

Results: Response rate at the three-year follow-up was 86.7 % for the DRI questionnaire; and 71.7% for ATFP, the UDI-6, IIQ-7, and SF-36 questionnaires. All DRI-parameters were improved (p < 0.05) after three-years of follow-up compared to preoperative values. The functional tests in the ATFP showed an improvement (p < 0.05) in core muscle strength and stability, persisting back and abdominal muscle strength compared to preoperative values as well as an improvement compared to the one-year follow-up values (p < 0.05). UDI-6 and IIQ-7 results were improved (p < 0.05) compared to preoperative values and showed consistent values compared to the one-year follow-up. Quality of life measured with SF-36 were improved compared to preoperative values and showed consistent values compared to the one-year follow-up (p < 0.05).

Conclusions: The functional improvement of surgical reconstruction of the DRA persisted for three years in this series of post-partum women with DRA.