



## ***Dynamic Neuromuscular Stabilization (DNS) according to Kolar***

**DNS Course for Women's Health – Part 1**

Contact Hours: **12**

Course date:

**February 14 - 15, 2026**

Location:

**ZD dr. Adolfa Drolca**

**Ulica Talcev 9**

**Maribor**

**Slovenia**

**<https://www.zd-mb.si>**

Instructor:

**Martina Jezkova, MPT**

Organizer:

**Slovenian Association of Physiotherapists**

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## Tentative Course Program

(the actual program will be sent to you by the local organizer)

### Day 1 Saturday – February 14, 2026

9.00 – 10.45	Pelvic floor from the view of developmental kinesiology. Pelvic floor function/Dysfunction. Functional sterility, dysmenorrhea, amenorrhea and other types of gynecological dysfunctions.
10.45 – 11.00	Break.
11.00 – 12.30	Soft tissue techniques for the chest, low back, abdominal wall, hips. “Active scar” treatment using barrier phenomenon according to Lewit. Correcting respiration stereotype.
12.30 – 13.30	Lunch.
13.30 – 15.15	PF muscle relaxation techniques.
15.15 – 15.30	Break.
15.30 – 17.00	Isolated activation of PF muscles. PERFECT schema.

### Day 2 Sunday – February 15, 2026

8.00 – 9.45	Integration of PF muscle function into the muscle chains.
9.45 – 10.00	Break.
10.00 – 12.00	Integration of PF muscle function into the muscle chains cont.
12.00 – 12.15	Break
12.15 – 14.00	DNS principles for exercise during pregnancy, child birth and post partum exercise. FAQ, Certificates.

More information about the course:

[https://www.rehabps.cz/rehab/course.php?c\\_id=3708](https://www.rehabps.cz/rehab/course.php?c_id=3708)

## Course Goals and Description

This course is for practitioners who have taken DNS A course or Pediatric 1 previously. It is designed to enhance your clinical skills and confidence in applying DNS principles and manual techniques in clients with pelvic floor dysfunction. Dysfunction of internal organs may lead to various clinical pictures in the locomotor system. In functional diagnosis of the motor system it is critical to consider the viscerosomatic relationships as a possible etiopathogenetic factor. It is essential to bear in mind that in patients with internal organ pathology, irritation and reflex changes (muscle TrPs, joint blockages, soft tissue dysfunction, altered motor stereotypes) in the locomotor system occur as a rule. Patients with diagnoses involving the internal organ system are thus important potential clients of the rehabilitation specialists. This course will focus on functional diagnosis and treatment of viscerosomatic patterns in females with gynecological problems. Gynecological diseases are closely linked to functional deficits of the movement system. Although this connection, or its etiopathogenetic meaning, has not been sufficiently validated, it needs to be taken into consideration that any gynecological disorder is registered by the CNS through receptors. Then, the CNS reactively, or adaptively develops protective changes in muscles (changes in muscle tone), including the smooth muscle. Clinically, it is important that movement system symptoms in some cases of gynecological dysfunctions (amenorrhea, dysmenorrhea and sometimes functional sterility) are quite alike and show similar characteristics. These are protective motor patterns. The possibility of gynecological causes needs to be considered in patients with back pain who demonstrate a chaining of functional deficits of the muscle system (pelvic nutation, pelvic floor spasm, unilateral gluteal muscle hypotonia, TrPs in the hip adductor region, etc.). However, a large number of functional spinal and pelvic dysfunctions exist that are mistakenly considered to be gynecological diseases. Gynecological dysfunctions that are being significantly influenced by movement system function include menstrual cycle deficits, dysmenorrhea, premenstrual syndrome, certain gynecological infections, functional sterility and deficits during menopause (climacterium). Another syndrome which can be positively affected by rehabilitation is stress incontinence. Training ideal coordination between muscles of the pelvic floor, diaphragm and abdominal muscles may significantly decrease undesirable spontaneous loss of urine.

- **Course objectives**

- Functional DNS assessment and treatment of patients with non-specific abdominal pain
- DNS assessment and treatment for functional sterility and gynaecological problems
- DNS assessment and treatment for urine incontinence
- DNS assessment and treatment for constipation
- Live patient demonstration
- Visceral-vertebral patterns
- Application of DNS based treatment techniques
- Visceral mobilization techniques
- Patient's education, self-treatment techniques