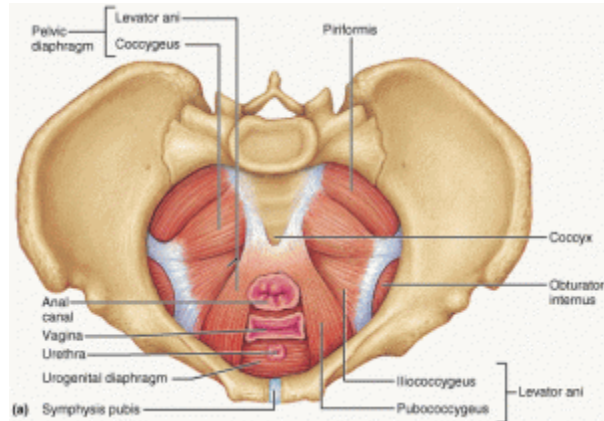


PELVIC FLOOR DYSFUNCTION AND PELVIC HEALTH PHYSICAL THERAPY

Summary:

1. **Definition of Pelvic floor**
2. **What does the pelvic floor do?**
3. **Common dysfunctions and signs and symptoms which may indicate pelvic floor physical therapy**
4. **How physical therapy can help**



What is the pelvic floor?

The pelvic floor is a group of muscles and connective tissues attached to the bones at the bottom of your pelvis. If you could look down vertically in-between your hip bones, you would see the pelvic floor muscles at the bottom.

What does the pelvic floor do:

The pelvic floor plays many roles that assist everyday functioning in both men and women. The pelvic floor acts like a hammock which supports the bladder, colon, rectum, and genitals. It assists the bladder and rectum to open and close when it is supposed to in order to allow peeing and pooping. It works in unison with your low back, hips, trunk, and diaphragm in order to maintain upright position while walking. It also plays an important role in maintaining healthy sexual function.

Examples of pelvic floor dysfunction:

- Urinary Incontinence (stress or urge)
- Pelvic Organ Prolapse (uterine, cystocele and rectocele)
- Chronic pelvic pain (including vaginal, perineal or rectal)
- Vulvodynia/Vestibulodynia
- Vaginismus or Dyspareunia (painful intercourse)
- Interstitial Cystitis
- Pregnancy Related Pelvic Girdle Pain
- Chronic low back, sacroiliac joint and/or hip pain

How can physical therapy help?

- Treatment for pelvic floor dysfunctions and conditions related to such begins with a thorough examination by a therapist specifically trained in this area. Examination may or may not include internal assessment, intravaginal or intrarectal, of the muscles of the pelvic floor as well as assessment of external structures in order to determine deficits which may be leading to dysfunction.

Pelvic floor physical therapy involves methods of strengthening and/or relaxing of muscles of the pelvic floor in order to assist with stability and control over urination,

bowel movements, and sexual function. It can also assist with pain control and preparation for labor during pregnancy.

Treatments to address deficits and dysfunctions may include but are not limited to:

1. Exercises to relax and contract the muscles of the pelvic floor
2. Manual therapy or soft tissue mobilization to relax the pelvic floor and relieve trigger points (internal or external)
3. Exercises to address strength and stability deficits of external structures which support and may contribute to pelvic dysfunction (ie: thoracic spine (mid-back), lumbar spine (low back) and hips)