

## WHAT IS PELVIC FLOOR DYSFUNCTION (PFD)?

- Pelvic Floor Dysfunction (PFD) affects 30% of women and up to 10% of men.
- PFD refers to conditions such as urinary/bladder incontinence, pelvic pain and pelvic organ prolapse. These conditions are more common after giving birth or frequent urinary infection.
- Although there are higher occurrence of symptoms in older adults but PFD should not be considered an acceptable part of aging.
- Trained physiotherapists are important members of management team for PFD.

Physiomobility's Pelvic Health program is directed by Ingrid Yu, a physiotherapist with extensive post-graduate training in Pelvic Health physiotherapy.

This program is aimed to help both male & female patients with pelvic floor dysfunctions. We will always be in contact with your referring physician and/or specialist to update them on your progress.

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## THE ROLE OF PHYSIOTHERAPY IN TREATING PELVIC FLOOR, URINARY & GASTROINTESTINAL DYSFUNCTIONS

*This document is not intended as a substitute for professional healthcare.*

## WHAT IS THE PELVIC FLOOR?

The pelvic floor consists of a series of muscles, ligaments and connective tissue that span from pubic bone (front) to tailbone (back), and between Ischial Tuberosities (sit bones). They form a sling-like support for our abdominal contents, such as the bladder, bowel, and reproductive organs.

Pelvic floor muscles are also an important component of core muscles that stabilize the low back, hip joints, and pelvic girdle. When the muscles of the pelvic floor begin to lose function or if they are too tight, symptoms will be experienced and may include:

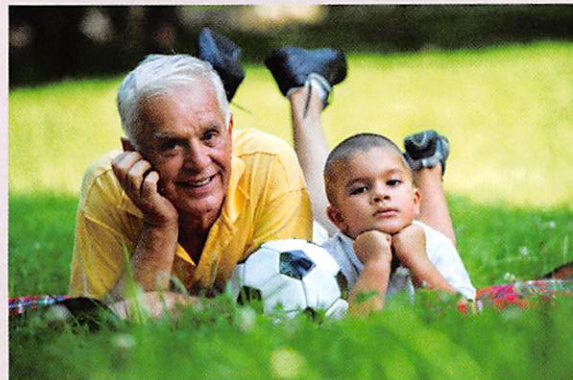
- **Urinary incontinence** (commonly post-partum, post-prostatectomy)
- **Urinary leakage**
- **Painful urination**
- **Incomplete emptying**
- **Painful sex**, Pain for women during intercourse
- **Sexual dysfunction** in both men & women
- **Pelvic organ prolapse** and heavy feeling in pelvis or vagina
- **Interstitial Cystitis** (long term inflammation of the bladder wall)
- **Low back pain** or muscle spasm in the low back and pelvic
- **Constipation**, straining or pain during bowel movements
- **Irritable Bowel Syndrome (IBS)** and diarrheal state

## HOW DOES PELVIC FLOOR PHYSIOTHERAPY HELP?

Pelvic floor dysfunction is a very treatable condition, usually through the use of biofeedback and physiotherapy.

Physiotherapists are uniquely qualified to treat pelvic floor dysfunction with conservative management techniques. A specially trained physiotherapist will perform a thorough assessment of posture, alignment, breathing pattern, muscle recruitment, and to identify areas of tissue tension. For most people suffering from above mentioned conditions, physiotherapy usually has a dramatic and positive effect on pain and dysfunction and improves quality of life. Treatments usually include:

- Using external and internal manual techniques to evaluate the function of pelvic floor muscles and teaching appropriate exercises to either strengthen or relax pelvic floor muscles
- Teaching behavior changes, such as avoiding pushing or straining when urinating and having a bowel movement.



Teaching how to contract & relax the muscles in the pelvic floor area using manual treatment or Biofeedback therapy

- Electrical stimulation
- Applying muscle activation and pain management techniques after surgery

In addition to internal treatment, a pelvic health physiotherapist will explore and address areas in clients' daily life that may be contributing to their pain/dysfunction such as diet, voiding patterns, and stress management.



### KEGEL EXERCISES ARE NOT ENOUGH...

In order to maintain bowel, bladder and sexual function, the pelvic floor must contract and relax effectively. Kegel exercises are commonly prescribed, but they are often either performed incorrectly, or may even be contributing to the issue. A pelvic health physiotherapist teaches proper techniques.