

Pelvic Floor Dysfunction

By

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Pelvic floor dysfunction affects about 25% of the women ages 30-70 around the world. While many go undiagnosed and untreated, the symptoms can be frustrating, embarrassing, and lifestyle altering.

Who does it affect? The stage is set for dysfunction with a loss of pelvic support from injury to the pelvic floor tissues. The most common cause is childbirth but other factors can contribute. These include women who are overweight; Women who have asthma or chronic constipation, women who have physically strenuous jobs; women who have had abdominal surgery; women who do strenuous exercises (like weight lifting), and women who are aging. Pelvic pain from various sources can cause spasm of the pelvic floor muscles which can affect voiding and intercourse. If you are lucky enough to live to be a senior citizen, there is a good chance you will experience some type of pelvic floor dysfunction in your life.

Symptoms of Pelvic Floor Disorders

There are many different symptoms which manifest themselves as a result of Pelvic Floor Disorders. The following is a list of some of the most common symptoms:

Urinary incontinence

Fecal Incontinence

Painful Intercourse

Bulging Organs in the Vagina

Painful Bladder

Inability to have regular bowel movements

Difficulty urinating

Bloated or heavy feeling in the abdomen

While these are the most common symptoms, it is far from being a complete list which can be as individual as the women who have these issues.

Causes of Pelvic Floor Disorders (In Laymen's Terms)

The condition, called pelvic organ prolapse is caused when the connective tissue supporting the internal organs (uterus, bladder, vagina or rectum) have been damaged by childbirth, strenuous exercise, or chronic increases in abdominal pressure. When the supporting tissue cannot hold the organs in place, they fall to an unnatural position within the pelvic area, causing a myriad of problems. Women can experience anything from organs bulging from the vagina, to a heavy feeling in the pelvic area, obstructive urinary symptoms, or the strong urge to urinate with no success, and even the inability to have regular bowel movements. While not life-threatening, the problems can affect every area of a normal lifestyle as women are afraid to leave their homes, have no desire for, or experience painful sexual relations, or are uncomfortable doing every day chores like shopping, housework, or even walking.

Treatments for Pelvic Floor Disorders

There are several approaches to Pelvic Floor Dysfunction.

For mild cases of prolapse, or pelvic floor muscle dysfunction, Physical Therapy is very helpful. Muscle strengthening can be instrumental in treating urinary incontinence, fecal incontinence and mild cases of prolapse. Muscle relaxation can be the key to treating things such as painful intercourse or voiding dysfunction. Sometimes medications are used in conjunction with the therapy.

Pessaries are a cornerstone of non-surgical treatment for prolapse. They are silicon devices (similar to the diaphragm) that holds the organs in their normal position. They can either be removed by the patient or she can leave it in and the doctor will do the care and maintenance.

Definitive treatment would be surgical reconstruction of the supporting pelvic anatomy. The thinking is normal function follows normal form. Abdominal suspensions of the vagina (called sacrocolpopexies) are felt to be the most durable surgeries for severe prolapse. These can be accomplished with minimal incisions using the robot. Slightly less durable but very effective and the least "invasive" of repairs are done through the vagina. Hysterectomies (removal of the uterus) are often done at the same time to facilitate the suspension, but it is not absolutely necessary. Talk to your doctor about whether hysterectomy may be right for you.

The most effective surgeries for urinary incontinence are slings. These can be done through a small incision and done on an outpatient basis with return to work, in most cases, in a few days.

For more information on Pelvic Floor Disorders, visit Dr. Greg Owens web site at www.advancedpelvic.com