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## Pelvic Health Seminar Summary Notes

Introduction to Pelvic Health and Physical Therapy

**Speaker:** Corryn Nelson, Physical Therapist

Corryn Nelson introduces her role as a physical therapist at Monadnock Community Hospital, focusing on pelvic health. With a background in kinesiology and physical therapy, she outlines her work in various departments, including orthopedics, pulmonary fitness, and rehabilitation. Corryn's primary focus is on pelvic health, where she treats conditions related to the pelvic floor—a group of muscles and connective tissue at the base of the abdomen, which she likens to a foundation that supports the “house” of the body.

### Understanding the Pelvic Floor

**Role of the Pelvic Floor:** Supports abdominal organs, stabilizes the spine, manages pressure, and aids in movement.

**Coordination with Other Muscles:** Works alongside abdominal, back, hip, leg, and diaphragm muscles to control bodily functions like breathing, posture, and balance.

- **Functions:**

Supports internal organs (bladder, bowel, and uterus).

Maintains bowel and bladder continence.

Aids sexual function.

Helps stabilize lower back, sacroiliac (SI) joint, and balance.

## Common Issues and Conditions Treated in Pelvic Health Therapy

- **Bowel and Bladder Control:**

Therapy can improve bowel and bladder control, reducing risks of incontinence and prolapse, and enhancing quality of life.

- **Diaphragmatic Breathing:**

Involves synchronized movement between the diaphragm and pelvic floor muscles, aiding pressure management within the abdomen. Benefits include:

Reduced heart rate, muscle tension, and stress hormone levels.

Improved energy, social confidence, and movement comfort.

- **Types of Incontinence:**

**Stress Incontinence:** Leakage due to external pressure on the bladder from actions like coughing or laughing.

**Urge Incontinence:** Sudden, strong urge to urinate due to bladder contractions.

**Overflow Incontinence:** Bladder overfills due to a desensitized urge signal.

**Neurogenic Incontinence:** Caused by nerve communication issues, often linked to neurological conditions or trauma.

## Managing Incontinence and Pelvic Health with Lifestyle Adjustments

- **Identifying Bladder Irritants:**

Common irritants include caffeine, carbonation, alcohol, and acidic foods.

Control techniques include limiting consumption and balancing with plain water.

- **Pelvic Floor Exercise:**

Focus on proper Kegel exercises to strengthen pelvic muscles, ensuring activation of the correct muscles without compensatory movements like shoulder lifting.

- **Habit Adjustments:**

Avoid “just in case” bathroom visits.

Limit fluids before bed to reduce nighttime urination.

Quit smoking to reduce bladder irritation.

Manage constipation, as it can increase bladder pressure.

# Prolapse Management and Prevention

- **Understanding Prolapse:**

Types include bladder (cystocele), rectal (rectocele), and uterine prolapse, where organs shift from their typical positions due to weakened pelvic muscles.

- **Preventive Measures:**

Avoid straining, heavy lifting, and holding breath during physical activities.

Seek assistance for heavy lifting and practice proper body mechanics.

Use support devices, like pessaries, when recommended by a healthcare provider.

- **Weight and Physical Health:**

Maintaining a healthy weight helps reduce abdominal pressure on the pelvic floor.

## Special Considerations for Different Life Stages

- **Pregnancy and Postpartum:**

Pelvic health focus during pregnancy includes posture, core strength, and body mechanics.

Common challenges include increased urination frequency and fatigue.

Techniques involve avoiding heavy lifting, maintaining hydration, and practicing mindful movement.

- **Menopause:**

Changes include decreased estrogen, leading to muscle atrophy, reduced bone density, and potential pelvic organ prolapse.

Emphasis on weight-bearing exercises, hydration, and pelvic floor exercises to counteract hormonal effects.

- **Male Pelvic Health:**

Prostate health issues, including inflammation or post-surgery complications, may cause pain or difficulty urinating.

Techniques like belly breathing can help with muscle relaxation, and positioning adjustments improve urination ease.

## Addressing Pelvic Pain and Movement-Related Discomfort

Pelvic rehab therapy also addresses musculoskeletal issues, which can contribute to pelvic and back pain. Therapy may focus on:

Restoring muscle balance and flexibility in the hips and lower back.

Addressing overused muscle groups and improving blood flow.

Practicing body positioning and posture techniques to minimize pain and tension during daily activities.

## Summary

Corryn encourages patients to openly discuss pelvic health concerns with healthcare providers.

This comprehensive summary outlines the importance of pelvic health, management strategies, and therapeutic options, empowering patients to take informed steps toward improving their well-being.

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