Pelvic Floor Rehabilitation Can Help

Physical therapy can improve pelvic floor and bladder conditions by eliminating or managing incontinence and pelvic floor conditions - giving you the confidence to live your life again.

*Inova Loudoun Hospital Pelvic Floor offers a comprehensive, customized approach to bladder, bowel and sexual dysfunction.*

We develop a tailored plan for the evaluation and treatment of pelvic floor disorders, offering patients the following components:

- EMG biofeedback
- Pelvic floor exercise prescription, such as Kegel exercises, to strengthen the weakened structures around the bladder
- Neuromuscular electrical stimulation
- Abdominal rehabilitation
- Vaginal cones and dilators
- Ultrasound
- Education, such as bladder training to control sudden urges to urinate
- Tips on behavior modification, such as altering eating habits to relieve the symptoms of incontinence
- Musculoskeletal assessment of contributing dysfunction
- Manual therapy to assess and treat muscle spasms

*For questions or to learn more, please visit inova.org/ILHpelvicfloor or our patient navigator at 703.858.8936*
Do You Experience Any of the Following Symptoms?

- Loss of urine with lifting, laughing, sneezing, running, and/or jumping
- Increased frequency of urination, such as urinating more than eight times a day
- Sudden urgency to urinate, such as when you hear water
- Need to urinate often during the night
- Leaking urine during normal activities of daily living causing a need to wear protective liner/pad in clothing
- Inability to void urine and bowels/constipation
- Lower back pain
- Pelvic pain during sexual intercourse, exercise or other activities
- Diastasis recti, or separation of the abdominal muscles
- Pubic symphysis separation which occur often after childbirth
- Pelvic organ prolapse

Many of these symptoms are defined as either **stress** or **urge incontinence**. Types of incontinence include:

**Stress incontinence** occurs when urine leaks out during activity due to weak pelvic floor or sphincter muscles.

**Urge incontinence** is when your bladder feels full and urine pushes out. There is sudden, uncontrolled and frequent need to urinate.

**Mixed incontinence** is a combination of stress and urge incontinence and shares symptoms of both.

**Fecal incontinence** is a combination of stress and urge incontinence and shares symptoms of both.

**Post prostatectomy incontinence** is urinary incontinence caused by prostate surgery or radiation to the prostate.

What is Pelvic Floor Dysfunction?

- The muscles of the pelvic floor control the flow of urine and support the bladder, uterus and rectum – organs located within the pelvis.
- For good bladder control, all parts of your system must work together. The pelvic floor must hold up the organs, the sphincter muscles must control the flow of urine and the nerves must activate these muscles to function.
- Bladder and bowel control problems can occur when the muscles in the sphincter become weak.
- Sexual dysfunction including different types of pain, avoidance of sex, and subsequent relationship difficulties

What Causes Pelvic Floor Dysfunction?

- Pregnancy
- Childbirth
- Episiotomies (grade 1-4)
- Hysterectomies
- Abdominal surgeries
- Hormonal imbalance, such as during menopause or post-menopause
- History of chronic infection
- Chronic cough or constipation
- Obesity
- Muscle weakness
- Stretch weakness (faulty posture)
- Pelvic injuries, including pelvic fractures or dislocations
- Increased abdominal pressure with lifting and jumping
- Improper lifting of infant or inappropriate nursing postures