

THE FLOOR THAT SUPPORTS

Most women don't think about their pelvic floor until something goes wrong — and something goes wrong for many women. An estimated 1 in 11 women will need surgery for pelvic floor problems. Unfortunately, many women don't even talk to their doctor about their concerns.

The Pelvic Floor

You may be wondering, what is a pelvic floor? This important piece of anatomy is located in the lower pelvis and is a collection of muscles, ligaments and tissues that form a tightly slung hammock that supports the bladder, rectum (part of the large bowel), uterus and most of the vagina. It contains openings that allow the urethra, vagina and rectum to pass through.

A healthy pelvic floor ensures urine, gas and feces are contained, preventing urinary and fecal incontinence and involuntary passing of gas. It also allows for sexual intercourse by relaxing the vaginal sphincter, lengthening the vagina and lifting the uterus to a higher position in the pelvis.



When muscles or ligaments are weakened or damaged, they no longer support the organs in their correct position and control is lost. The most common sign is urinary stress incontinence. If you lose a few drops of urine when intra-abdominal pressure increases, like when you laugh, cough, sneeze, run or play sports, you have stress incontinence. If you pass gas involuntarily, or if you rush to the bathroom at the first hint that you need to urinate or defecate, you likely have a weakened pelvic floor.

Complications of a Weakened Pelvic Floor

In severe cases, the internal organs (uterus, bladder and bowel) can slide down into or beside the vagina. These are known as uterine prolapse, cystocele, rectocele or enterocele. These can cause a feeling of pressure, heaviness or pulling in the pelvis that may worsen when you stand and improves when lying down. In severe cases, the uterus or the bulging vaginal wall may protrude out of the vagina.

Specific symptoms for a prolapse may include:

Uterine Prolapse:

- problems with bowel movements
- low back pain
- feel like you're sitting on a small object
- feel that a tampon is misplaced

Cystocele:

- feelings of fullness or pressure in the vagina
- discomfort if straining or lifting
- your bladder doesn't feel empty after urinating
- leaking urine
- recurrent urinary infections
- pain or leaking on intercourse

Rectocele:

- rectal pain or bleeding
- a feeling of fullness or pressure in the rectum
- difficulty emptying the rectum
- chronic constipation

Enterocele:

- vaginal bleeding
- painful intercourse

Common Cause of a Weakened Pelvic Floor

- The weight of the uterus during pregnancy
- Vaginal childbirth- damage increases with number of births
- Obesity
- Chronic constipation
- Participating in sports that increase abdominal pressure (jogging, jumping, skipping)
- Repeated heavy lifting
- Some surgeries
- Lower estrogen levels after menopause
- Genetics – some women have weaker connective tissue

Prevention and Lifestyle

1. Kegal exercises, designed to strengthen the pelvic floor. Learn them and do them as often as possible for maximum effect.
2. Treat and prevent constipation; listen to your body signals. Eating high fibre foods and sufficient fluid intake greatly improve bowel function.
3. Have patience when you go to the toilet and avoid straining to speed up urination and defecation.
4. Avoid heavy lifting; lift with your legs to reduce negative impacts on the pelvic floor.
5. Maintaining a healthy weight can reduce pressure on the pelvic floor.
6. Control coughing. If you smoke, stop; if you have a chronic cough, seek treatment.
7. If you engage in high impact sports strengthen your pelvic floor to withstand repeated negative impacts.

For More Information:

- Pelvic floor problems are common in women. Fortunately, they can be prevented and sometimes reversed by simple exercises and lifestyle changes. To learn more, register for the “Achieving Bladder & Bowel Control” and “Exercising your Pelvic Floor” workshops by calling 403-944-2260.
- If you want a free consultation from the women’s health resources, you can contact Irene M. Jackson at 403-944-2262 or email irene.jackson@albertahealthservices.ca
- To speak to a health professional, contact your family doctor or speak to a registered nurse 24 hours a day, seven days a week by calling: Alberta Health Link toll free at 1-866-408-LINK (5465).

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