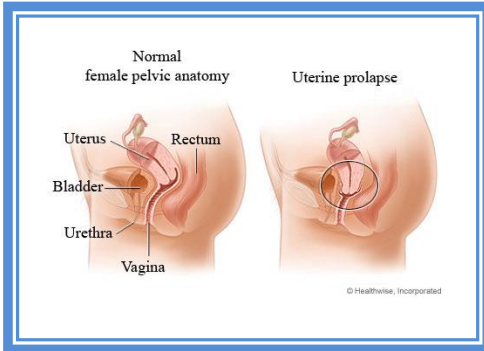


Pelvic Organ Prolapse



When the uterus, bladder or bowel drop down into the vagina instead of sitting in their normal position it is called a prolapse. Ligaments support the pelvic organs from above and pelvic floor muscles and fascia support from below. If these structures weaken then the pelvic organ's support lessens and they drop.

Symptoms of a prolapse are heaviness, dragging or aching in the pelvis (usually vaginal area), lower abdominal aching and backache.

These symptoms are often worse at the end of the day and better in the morning or after lying down. A bulge in or outside the vaginal area may also be felt.

Pelvic Organ Prolapse can result due to:

- Weak pelvic floor Muscles
- Body type – softer connective tissue
- Pregnancy & Childbirth
- Straining

Physiotherapy Treatment at Core Control Physiotherapy may involve:

- Education and management strategies
- Pelvic Floor Muscle Training and techniques
- Guidelines for management of tasks, work, rest
- Alternative exercise advice
- Involvement in an individual or group exercise programs

Some things you could start now:

- Lie down as much as possible
- Space out your activities - Rest when your symptoms are worsening
- Brace your pelvic floor muscles during daily activities
- Minimise lifting & low squats
- Avoid straining to use your bowels
- Be careful when exercising – Avoid abdominal curls ups, sit ups and crunches
- Use clean hands to gently push the prolapse back into your vagina.
- Rest after intercourse.

You may be awaiting a specialist opinion. Please **start this approach now** as in 6-12 weeks you may notice a difference. Pelvic floor strengthening prior to surgery will help recovery – a bit like pre-strengthening prior to a knee reconstruction. It improves surgery outcomes and as incontinence is a risk of surgery it is imperative you do this! There is mounting evidence that this should be the approach we take.

