

PELVIC FLOOR WORKSHOP

PRESENTED BY:



&



DR. RACHEL MILLER PT, DPT

WHO ARE WE?

- 2 Physical Therapist both trained in Pelvic Floor Therapy & 3 Chiropractors (Dr. Rick, Dr. Nick, and Dr. Anthony)
- Both Graduated with our DPTs from Stockton University
- Continuing education:
 - BirthFit Professional (Dr. Rachel is currently a Professional and Dr. Jamie is currently taking the courses)
 - Pelvic Floor PT through the Herman and Wallace Institution
 -
- What We treat:
 - Pelvic floor dysfunctions
 - Sports/musculoskeletal injuries
 - Post-surgical joint repairs



PELVIC FLOOR PHYSICAL THERAPY

A non-surgical approach to rehabilitation of dysfunctions in the pelvic area that contribute to bowel, bladder, sexual health, and pain complaints.

Approaches may include behavioral strategies, manual therapies, breathing techniques, modalities, therapeutic exercise, education, therapeutic activities, and functional re-training.



DIAGNOSES:

- Urinary Incontinence
- Fecal Incontinence
- Pelvic Organ Prolapse
- Pelvic Pain
- Interstitial Cystitis
- Constipation
- Dyspareunia
- Vulvodynia
- Pudendal Neuralgia
- Prenatal/Postpartum related dysfunction

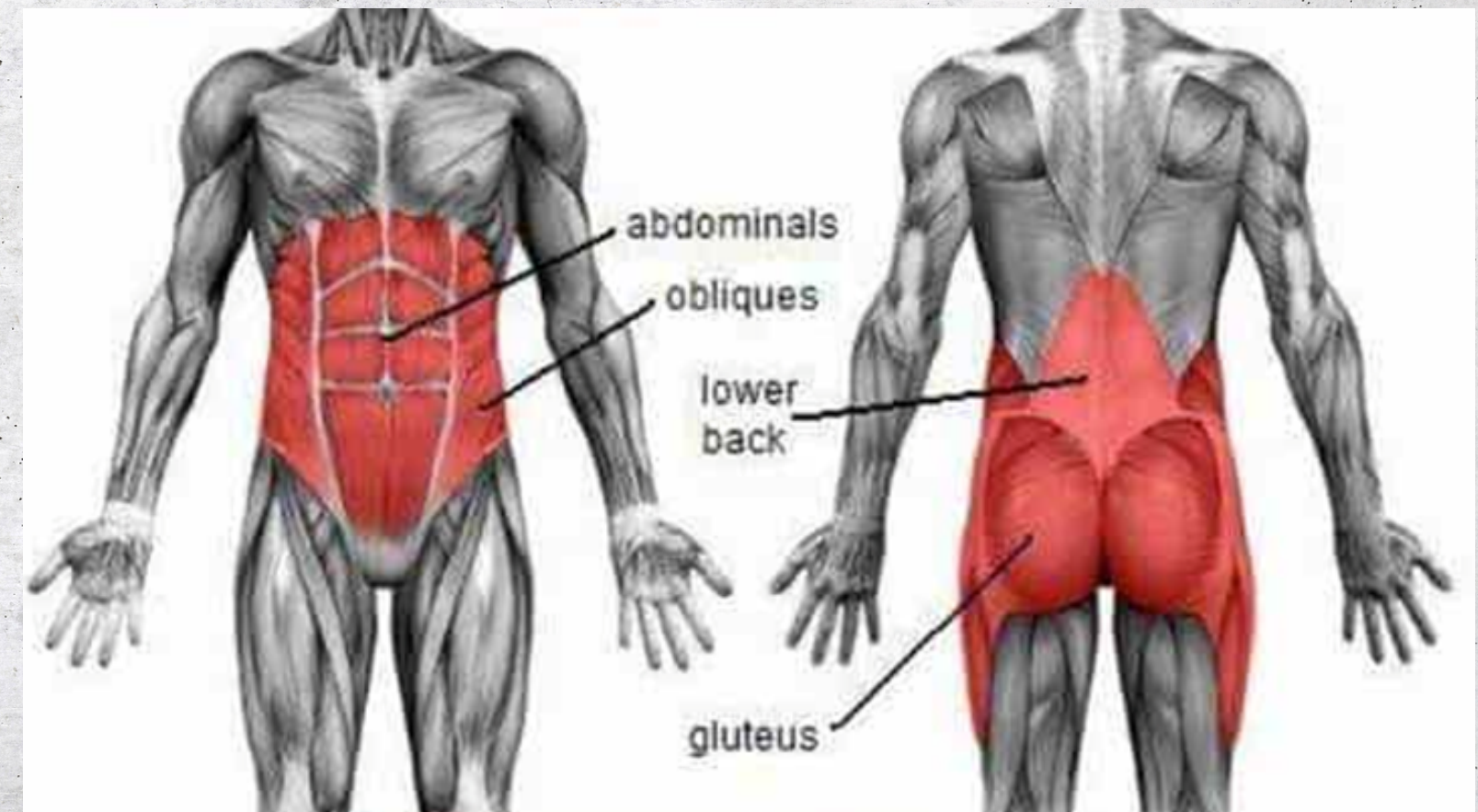
HIPS, CORE, LOW BACK AND PELVIC FLOOR

These 4 main players work together!

When one is not optimally in motion, it will cause tightness and weakness in other regions!
This region spans from your diaphragm to your pelvic floor, both anterior and posterior, and includes bones, muscles, and connective tissue!

Key Players:

- Diaphragm
- Pelvic Floor
- Internal and External Obliques
- Lumbar Erector Spinae (back extensors)
- Transverse Abdominis
- Rectus Abdominis
- Glutes
- Hip Flexors



WHAT IS YOUR PELVIC FLOOR?

Your Pelvic Floor is muscles, fascia, and nerves located between the two pelvic bones and the sacrum



Their Function:

- Support organs
- Sphincter
- Sexual
- Stability/Posture
- Sump Pump for Lymphatic Drainage
- Breathing

WHAT ARE WE DISCUSSING TODAY?

Urinary Incontinence and Normal Bladder Health

Pelvic Organ Prolapse

Sports Hernias

Pregnancy (Prenatal and Postpartum)

Intra-abdominal Pressure and Core

Exercises



URINARY INCONTINENCE

Urinary Incontinence is leakage of urine in inappropriate time and not on command.

There are 3 Different Types:

- Stress Incontinence - Leakage of urine when there is increased pressure on the bladder.
 - This occurs with exercise, sneezing, coughing, laughing, lifting or other activities
- Urge Incontinence - Leakage of urine when a person feels a sudden strong urge to urinate
- Mixed Incontinence - Symptoms of both stress and urge incontinence

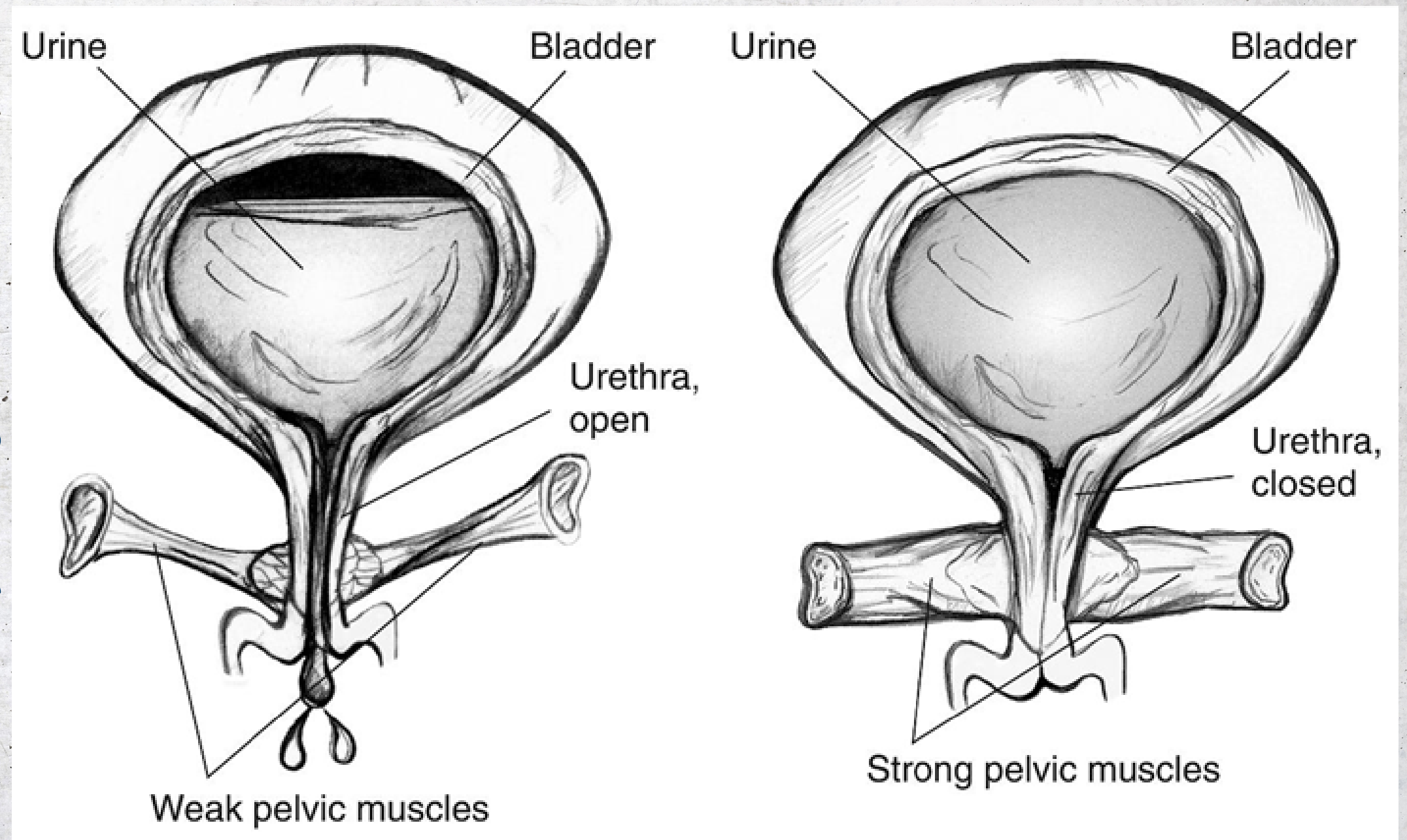
Did you know that 2 out of 3 women



suffer from urinary incontinence?

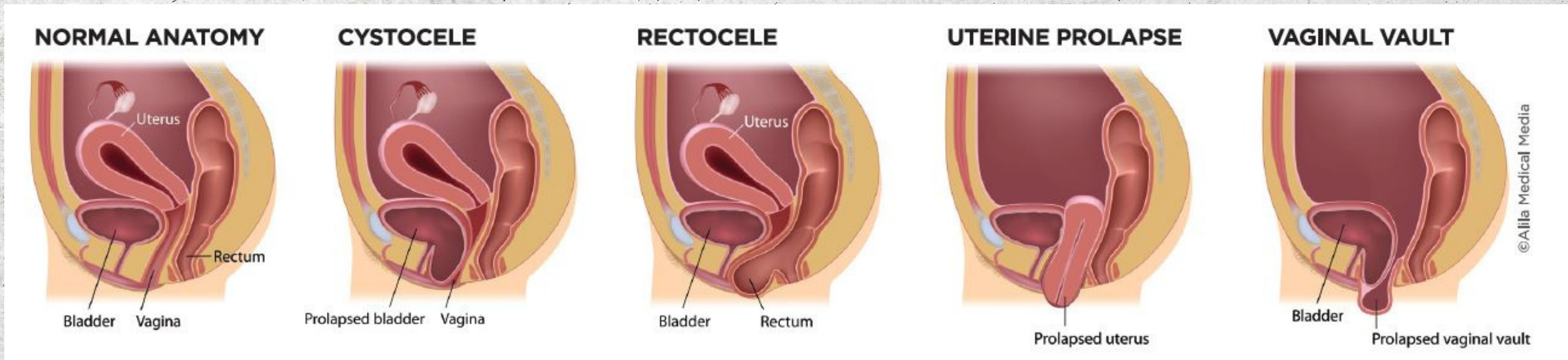
NORMAL BLADDER

- The bladder usually has a capacity of about 2 cups of urine
- Typical emptying is about 8 times per day every 2-3 hours for a minimum of 8 seconds
- As the bladder relaxes, it collects urine and the pelvic floor muscles turn on to prevent leakage.
- When you urinate, the bladder muscle contracts and the pelvic floor muscles relax to expel the urine
- Your **SHOULD NOT STRAIN OR FORCEFULLY PUSH OUT URINE**



PELVIC ORGAN PROLAPSE

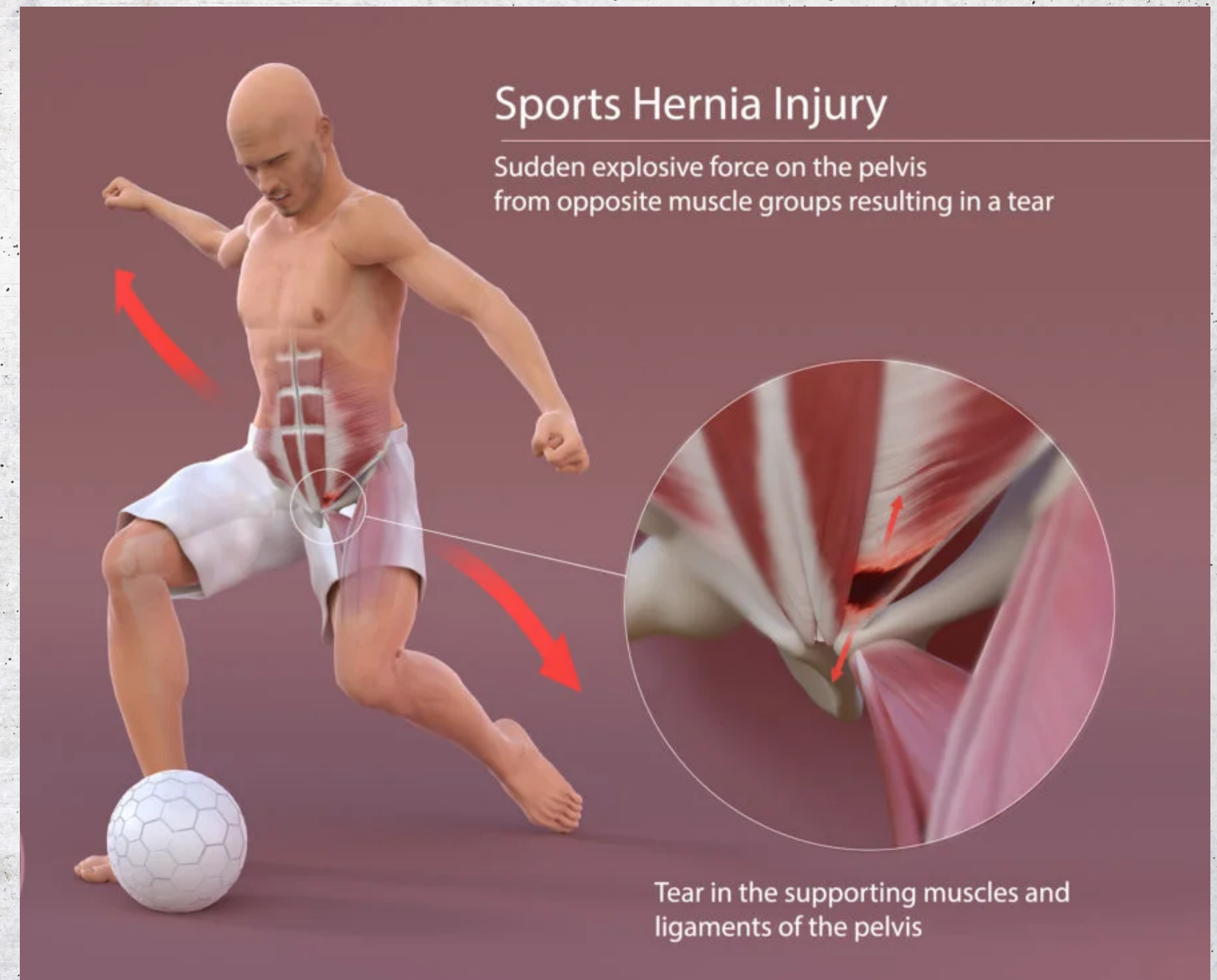
Pelvic Organ Prolapse is when the pelvic floor musculature is too weak and cannot support the uterus, bladder, and/or bowel leading to their descent from their normal anatomic position towards or through the vaginal opening.



SPORTS HERNIA

A sports hernia, athletic pubalgia, is a painful, strain or tear of any soft tissue in the lower abdomen or groin area. It most often occurs during sports that require sudden changes of direction or intense twisting movements.

Another common hernia is the inguinal hernia is is when abdominal tissue, such as part of the intestine, pushes through an opening in the lower abdominal wall, creating a painful bulge.



PREGNANCY

Over the 9 months of pregnancy, your body is changing and growing, so you may experience aches, pains, and change in bowel/bladder/sexual function that you didn't experience before.

Childbirth is perhaps the most physical, mental and spiritual experience of a person's life, and during the time leading up to birth, you need to have a strong support system!

Weeks Pregnant	Chiro	PT	Massage	Expectations
6-12 wks	Monthly if balanced		Monthly	
13-16 wks	Monthly if balanced		Monthly	1st Trimester Transition
17-20 wks	Monthly if balanced		Monthly	Energy Increases, continue with strength and conditioning 3-4x/wk
21-24 wks	Monthly if balanced	Initial Evaluation	Monthly	Feeling motivated, continue with strength and conditioning 3-4x/wk
25-28 wks	Bi-monthly or more if BREECH	Bi-Monthly	Monthly	Glowing Phase, continue with strength and conditioning 3-4x/wk
29-32 wks	Bi-monthly or more if BREECH	Bi-Monthly	Monthly	Baby is Positioning, continue with strength and conditioning 2-4x/wk
33-37 wks	1x per week	1x per week	Bi-Weekly	Deload and Store Energy, continue with strength and conditioning 2-4x/wk
38-42 wks	1x per week	1x per week		Move to Enhance fitness, continue with general movement, strengthening, and accessory work

POSTPARTUM

After the arrival of your bundle of joy,
sometimes we forget to also focus on
Mom!

POSTPARTUM IS:

- 0-2 weeks co-regulation period
- 2-6 weeks - recovery period
- 6-12 weeks - rehabilitation period
- 3-12 months - rebuilding period

BOTTOM LINE:

Postpartum lasts **FOREVER!** Give yourself
time and space to heal!

Post-partum	Chiro	PT	Massage	Expectation
0-2 wks				Breathing and Bonding with newborn
2-6 wks	4-6 wks Evaluation	4-6 wks Evaluation	Evaluation	Breathing and Babywearing
7-12 wks	Weekly	Weekly	Every 2-4 wks	Rehab and Rebuild
3-12 months	Weekly	Weekly		Restore and return to prior level of function and activity

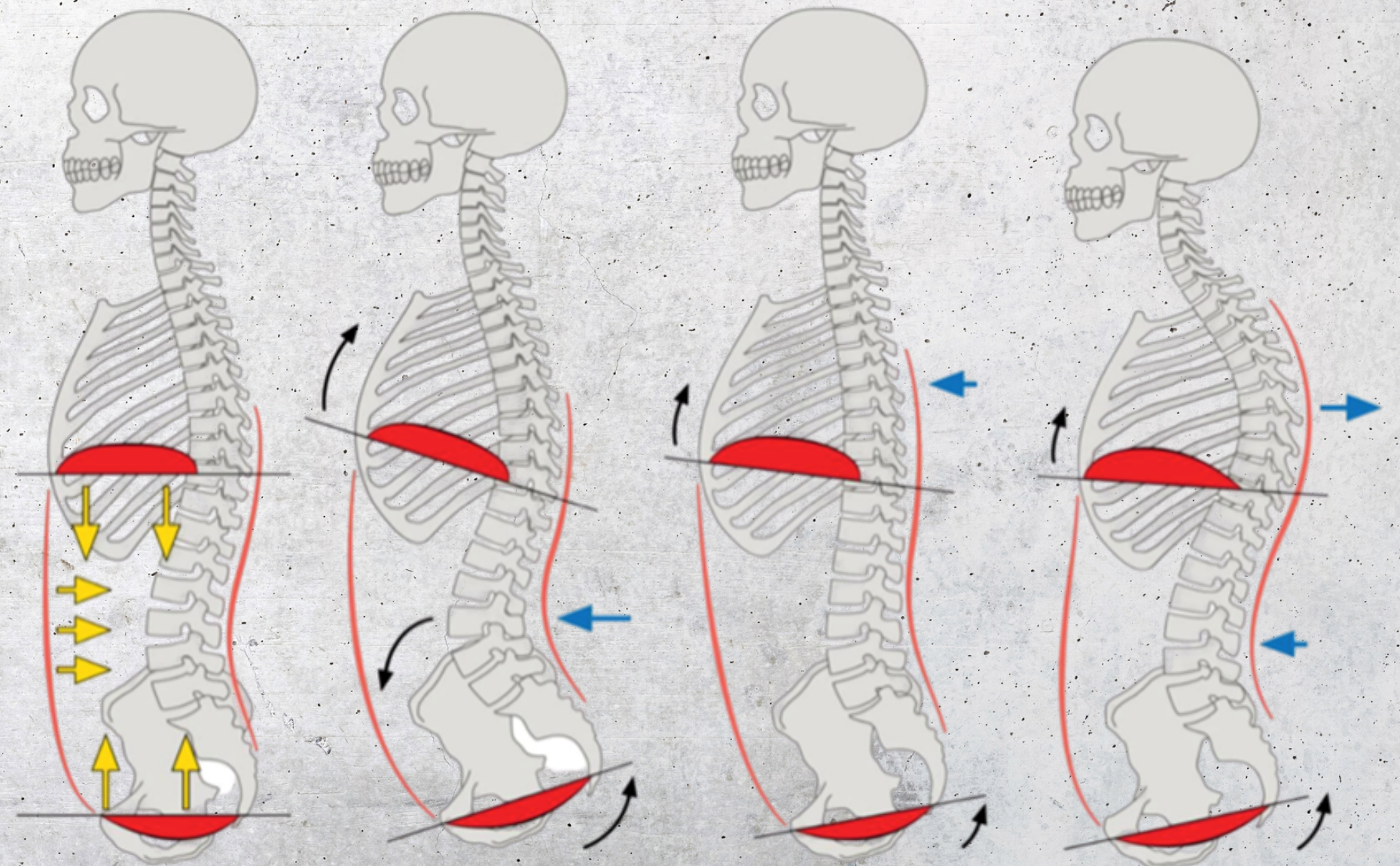
LET'S GET
MOVING!

BREATHING AND CORE

Breathing and the core work together for stability and during dynamic exercise. Proper intra-abdominal pressure allows us to stand in the most optimal position and transfer load efficiently, preventing improper positioning and causing pain, tightness, and/or weakness!

Diaphragmatic Breathing

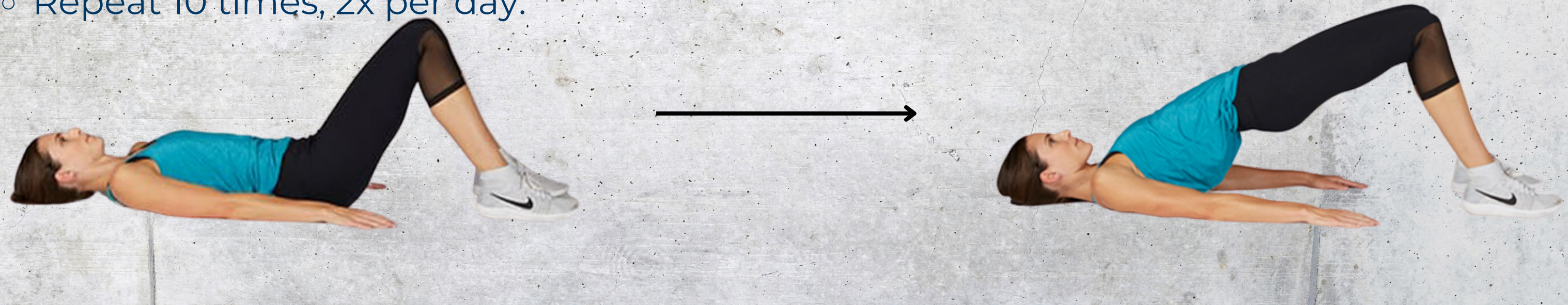
- Lie on your back with knees bent and feet shoulder width apart
- Place one hand on your stomach and one on your chest.
- Gently Breathe into your stomach and limit motion of your chest.
- Gently breathe out and repeat



BRIDGES

Bridges are a great exercise to help strengthen the core, glutes, low back, and pelvic floor musculature. They help to improve posture, decrease back, leg, knee, and pelvic pain, and improve coordination and stability!

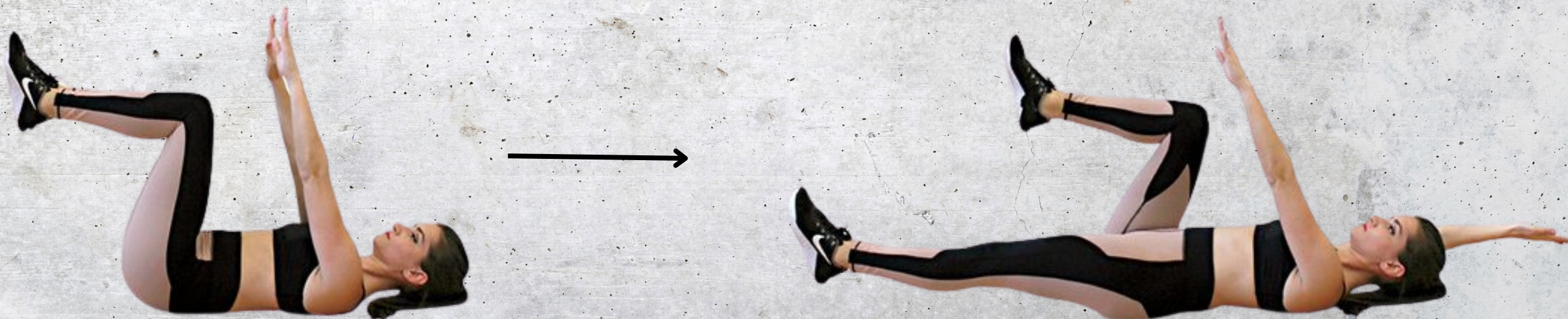
- Begin lying on your back with knees bent and feet shoulder width apart.
- Brace your core and contract pelvic floor musculature, dig heels into the ground and gently lift your hips off the ground
- Pause, then gently set hips back down to the floor
- Repeat 10 times, 2x per day.



DEADBUG

- Begin lying on your back with knees bent and feet planted shoulder width apart
- Tense your core muscles like someone is going to come up and punch you and slowly lift your legs into the air, keeping them bent at a 90-degree angle.
- Continue to breathe and tense your core as you bring your arms outstretched in front of you. This is the starting position!
- Slowly, move the arm and leg opposite to each other towards the mat/ground, then bring back to the starting position.
- Repeat on the other side, making sure to keep your core tense with intra-abdominal pressure.

NOTE: If you do not maintain intra-abdominal pressure, your spine will slowly start to extend and may cause pain!



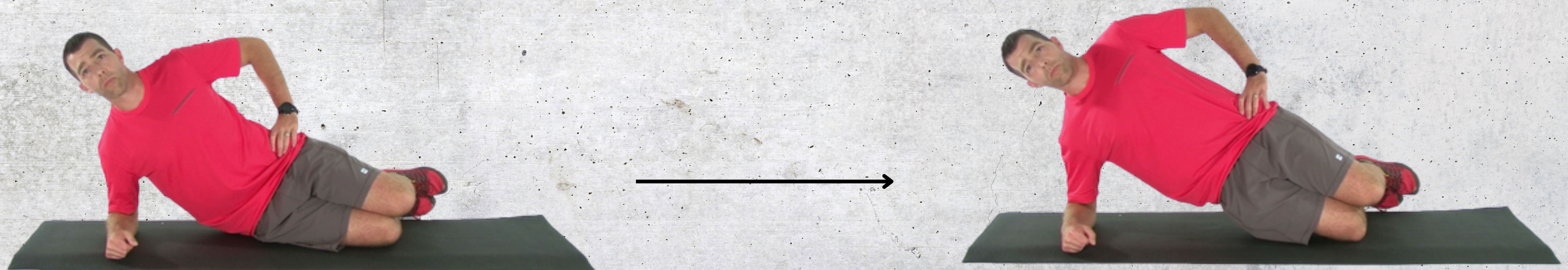
BIRDDOG

- Begin on your hands and knees in a quadruped position. This is your starting position!
- Tense your core muscles then slowly lift your hand and leg that are opposite to one another
- Slowly reach with hand out in front of you and feet trying to hit an imaginary wall behind you.
- Slowly return to your starting position, maintaining intra-abdominal pressure
- Repeat with opposite hand and foot.



SIDE BRIDGE

- Begin on your side with your legs bent to 90 degrees and upper body supported through your elbow. Place your free hand on your opposite shoulder or hip.
- Push the ground away through your forearm and bottom knee to activate your core and glutes.
- Prop yourself up onto your elbow and hinge your hips forward like you would in a squat.
- Hold that position at the top.
- Return back to the starting position with a slow controlled descent.



SHIN BOX STRETCH

Also known as a hip 90/90 stretch, this helps to open the hips up, stretching the hip joint capsule, the glute medius, and the glute minimus. This stretch helps to increase hip mobility and improve posture, while also decreasing pain and risk of future injury.

- Sitting on the floor, place one leg in front of you with hip and knee flexed at 90 degrees and other leg behind you.
- Staying tall, lean the chest forward over the knee feeling a stretch in the hip of the leg that is forward
- Hold for 20-30 seconds, then repeat with the opposite leg forward.
- Repeat 3 times on each leg.



SHIN BOX GET UP

- Sitting on the floor, place one leg in front of you and other leg behind you with hip and knee flexed/bent at 90 degrees.
- Staying tall, activate your glutes and push your front knee into the ground to drive your hips up.
- Hold for 1-2 seconds then slowly sit back down making sure not to plop onto the ground rather activate your glutes (you may feel some cramping)
- Repeat 10 times
- Repeat with opposite leg forward

