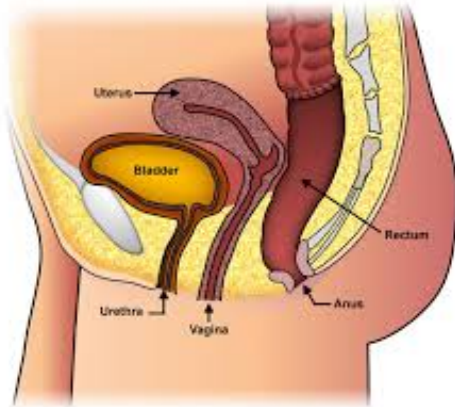


What is a prolapse?



Your pelvic organs are your bladder, uterus and rectum. A prolapse is a “slipping of the pelvic organs”. As you can see in this picture of a healthy pelvis. The bladder, uterus and rectum are held up in the pelvic cavity by fascia and ligaments, and supported underneath by the pelvic floor muscles.

These support tissues can be torn and stretched. The muscles may be weakened or dysfunctional. When these structures are damaged a ‘drooping’ or ‘slipping’ of the pelvic organs into the vagina can occur. This is called a prolapse.

How do I know if I have a prolapse?

There are a few signs that you may have a prolapse. These depend on the type of prolapse and the amount of pelvic organ support that has been lost. Early on you may not know that you have a prolapse. However when a prolapse sags down you may notice:

- A heavy feeling or dragging in your vagina.
- Something coming down or a lump in your vagina.
- A Vaginal Bulge
- Pain or less feeling during sex.
- Your bladder may not empty as it should.
- Your urine stream may be weak.
- You may get frequent or recurrent urinary tract infections.
- Pelvic Pressure (lower abdomen)
- Low back ache

These signs may be worse at the end of the day and you may feel better after lying down.

What causes prolapse?

Childbirth is the main cause of prolapse. The baby can damage the support tissues on the way down the birth canal. They may also stretch and tear the pelvic floor muscles during birth.

Other things that can lead to the pelvic organs descending causing prolapse are:

- a history of chronic respiratory symptoms, or chronic constipation.
- a history of regular heavy lifting or an elite / high level athlete.
- being overweight

What are the different types of prolapse?

The bladder can bulge into the front wall of the vagina, called a cystocele.
The uterus may descend down into the vagina, called a uterine prolapse.
The rectum may bulge into the back wall of the vagina, called a rectocele.
There can be more than one bulge into the vagina.
A prolapse is graded depending on the degree of descent.

Who is likely to get a prolapse?

Prolapse is common and tends to run in families.
It is more likely after menopause.
Being overweight can put extra load on the support structures of the pelvic organs.
Half of all women after having a baby have some sort of POP however many don't have symptoms that require them to seek help.
POP can occur in women who have not had a baby if they frequently heavy lift, strain on the toilet or have a persistent cough.
Even after surgery to mend prolapse 1 in 3 women will prolapse again.
Post- hysterectomy women can also prolapse when the top of the vagina (the vault) can prolapse.

What can I do to prevent or manage a prolapse?

It is much better to prevent a prolapse than try to fix it.
Prolapse is due to weak pelvic tissues and muscles. It is important to keep your pelvic floor muscles strong no matter what your age. A Pelvic Floor or Womens Health Physio can assist you in planning an appropriate training programme. They can also help you if you have already had a prolapse.

What is Pelvic Floor Physio?

A Pelvic Floor or Women's Health Physio is qualified to assess the integrity of the pelvic floor and the structures inside the pelvic cavity.
Your initial assessment will involve a subjective assessment and then a physical assessment. If consented by you this may include an internal assessment. During this assessment the physio will be able to determine the type and grade of any prolapse as well as the integrity of the pelvic floor muscles and other structures. It is a short assessment and the physio will talk you through the whole process. You will be made to feel comfortable and can end the assessment at any point. It doesn't take long and is very helpful in treating these conditions and allows appropriate prescription of pelvic floor muscle training if it is required.
Following your assessment you and the physio will be able to discuss an appropriate form of treatment and goal planning with you.

What are some things I can do to help prevent prolapse or relieve my prolapse symptoms?

PELVIC FLOOR MUSCLE TRAINING.

This works best when the exercises have been prescribed specifically for you. A Pelvic Floor or Women's Health Physio will be able to direct you on how best to do these exercises and check you are doing are them correctly.

- See 'Pelvic Floor Exercises' handout and video on my website www.positivelyyou.co.nz

KEEP YOUR BLADDER AND BOWEL FUNCTION REGULAR AND HEALTHY.

- Stay hydrated
- Eat a healthy diet
- Avoid straining to pass a bowel motion
- Go to the toilet when you need to use your bowels rather than holding on.

TOP TIPS:

1. Carry a water bottle with you to encourage regular drinking.
2. Eat lots of leafy greens and vegetables as they are high in fiber and will help keep stools soft and regular.
3. Adopt a good toileting position as pictured. This allows the puborectalis muscle to relax around the rectum. This position combined with a healthy diet should enable you to pass a bowel motion without straining.



- Lean forward
- Elbows resting on knees
- Knees elevated above hips
- Relax, Breathe

PUT YOUR FEET UP.

You may notice that your symptoms feel better in the morning or after you have had a rest. When we are on our feet all day the effects of gravity and our body weight bear down on our pelvic organs and their support structures. A prolapse will often appear worse at the end of the day. They can also feel worse after long periods of standing and walking.

TOP TIP:

1. Take some time throughout the day to lay down and rest your pelvic floor and the structures supporting the pelvic organs. Try and do this before you feel your symptoms.

STAY ACTIVE.

Fear and activity avoidance can be detrimental. Talk with your Women's health or pelvic floor physio about appropriate exercise and what is best for you.

Everybody is different, and they will be able to guide you in the right direction. Life with prolapse does not mean that you can't do the things that you love! It is about managing your symptoms and enabling you with the strategies you need to continue.

CARE WITH LIFTING AND CARRYING.

Any moments that cause us to bear down on the pelvic support structures can increase our symptoms of prolapse. Learning strategies to lift and carry without putting extra strain on the pelvic region is important.

In most cases breathing can assist a lift. A slight engagement of pelvic floor muscles can also be helpful with lifting.

Having your pelvis and spine in an optimal position will assist in your ability to do these things more comfortably.

PESSARIES AND SURGERY.

A pessary is a small device measured and fitted into the vagina to help with internal support.

Surgery can be done to repair torn or stretched ligaments and tissues. The idea of surgery is repair torn or damaged ligaments and tissues. It is important that you are very diligent with your management after surgery to avoid prolapsing again.

The above information is a guide for those dealing with prolapse. For the best advice for you see make an appointment to see me wendy@positivelyyou.co.nz.

This advice is not intended to replace information given to you by your health professional.