

Pelvic Muscle Rehabilitation

Pelvic muscle rehabilitation and feedback has helped many people combat the ill effects from involuntary muscle tension, related pain, and disuse atrophy.

The patient's goal is to learn to control involuntary functions such as heart rate, blood pressure, breathing, skin temperature, and muscle tension. The therapist teaches the patient how to affect a particular function specific to a problem through mental or physical exercises (e.g. tense neck muscles).

During the pelvic examination, we examine the strength and tone of the pelvic floor muscles. The pelvic floor muscles play an important role in continence and maintaining your pelvic organs in the normal position. During times of increased stress, like coughing or exercise, these muscles contract around the urethra and prevent urinary leakage. If these muscles, or the nerves supplying the muscles, are damaged or weakened, the mechanism maintaining continence fails.

Many women can learn to strengthen their pelvic floor muscles. Just like lifting weights for upper and lower body muscles, repetitive exercise can increase the ability of pelvic floor muscle to function properly. For many women, properly performed kegel exercises can cure or improve urinary incontinence and mild symptoms of vaginal prolapse. This often decreases the need for surgery. Post surgical candidates also often decrease the chances of subsequent failure and repeat surgery.

Pelvic muscle rehabilitation for patients with pelvic floor disorders combines the most effective non-surgical treatment modalities in an effort to restore normal tone and function to the muscles of the pelvic floor. Pelvic muscle rehabilitation may provide an additional element of reflex bladder inhibition. Pelvic muscle rehabilitation is based on all behaviors, including physiologic events that are a function of interacting sets of factors:

Pelvic muscle rehabilitation treatment aims to improve continence by altering antecedent or consequent stimuli, or both. Pelvic muscle rehabilitation is a planned treatment program with these key components:

1. EMG muscle evaluation
2. Pelvic floor muscle exercise program

During pelvic floor rehabilitation, we work one-on-one with our therapist to help locate and isolate your pelvic floor muscles. Together we will use computer-assisted visual aids and a variety of exercise devices to normalize the function of pelvic floor muscles. The initial consultation is usually one hour. Based on this evaluation and the progress made, further rehabilitation sessions may be recommended.

When we identify extremely weak muscles we may recommend pelvic floor rehabilitation. Continued pelvic floor exercises are extremely important after surgery for prolapse or incontinence, and should become a lifelong habit. Surgery may be only part of the solution as strong pelvic floor muscles can aid in preventing a recurrence of urinary leakage problems.

The goal of pelvic muscle training is to isolate the pelvic floor muscle, specifically the levator ani. The pelvic floor muscles comprise a striated, skeletal muscle group that is under voluntary control and is important in maintaining urinary and fecal continence as well as in providing support to the pelvic organs.

John J. Zavaleta, M.D.
Medical Director

John J. Zavaleta, R.Ph., M.D.
Diplomate American Board
Of Obstetrics & Gynecology
Board Certified

John R. Hanson, M.D.
Gonzalo Garcia, M.D., Board Certified
Annie Saldaña, PA-C, MPAS