

A Lifetime of Pelvic Health: Beyond Kegels

PART I HOW FIT IS YOUR PELVIC FLOOR? LET'S EXPLORE!

Things You Need to Know About the Pelvic Floor

- Benefits of a Healthy Pelvic Floor (PF)
- Support for the organs, spine, and pelvic girdle
- Bowel & Bladder Sphincters, Sexual Functions

Meet your Pelvic Neighbors

- Bowel, bladder, vagina, uterus, prostate, penis

Engaging the 4 Parts of the Core the Four B's- your cannister!

- Bottom (pelvic floor muscles)
- Breathing
- Belly
- Back

Meet Your Pelvic Floor!

- The Front and Back Passages of the Pelvic Floor Surface Layer
- Pelvic Floor Deep Layer with hip muscles nearby

Types of Pelvic Floor Muscle Contractions

- Faucet – Fast Contractions “sprinters”
- Dam – Holding/Endurance Contractions “marathoners”

Healthy Balance of the PF Muscles within the Core

- Underactive muscles
- Overactive muscles
- Strength, endurance, relax, release and coordination the PF muscles

Underactive Muscles can Lead to

- Leakage of bladder or bowel
- Organs not supported (prolapse)
- Decreased sexual appreciation
- Lower back, pelvis and hip aches and pains

Overactive Muscles can Lead to

- General pelvic or bladder pain or pressure
- Difficulty Emptying (bladder and bowel)
- Incomplete emptying or pain with emptying
- Painful intercourse or difficulty with orgasm
- Bladder urgency (gotta go) and frequency
- Lower back and hip aches and pains

Posture - Neutral spine, Neutral pelvis

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PF with Normal Breathing

- Inhale - PF moves downward with the assistance of the breath
- Exhale - PF moves back into the space like a Trampoline bouncing back

How is Your Pelvic Floor Health?

- Don't Delay Treatment
- Review of Problems

Summary

- **The 3 S's** Support, Sphincter, Sexual
- Core Connection
- How the PF works Front and Back, Surface and Deep, Quick and Holding

Links to Resources

Talk to Your Healthcare Provider

- | | |
|-------------------------|--------------------------------------|
| • NAFC.org | National Organization for Continence |
| • Pelvicpain.org/public | Int. Pelvic Pain Society |
| • Issm.info/pubic | Int. Society for Sexual Medicine |

KatheWallace.com/Rancho

[Pelvic Floor Anatomy Video](#) Australian Continence Foundation

Find a PT

<https://aptapelvichealth.org/ptlocator/>

<https://pelvicguru.com/directory/>

<https://pelvicrehab.com/>

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PART 2

HOW DO I KEGEL? LET ME COUNT THE WAYS!

Four Factors for PF Fitness

- Knowing the muscles
- Breathing for activation and release of PF
- Self-assessing your pelvic floor
- Endurance Contractions

Anatomy Review The Front and Back Passages, Surface and Deep Layers of the Pelvic Floor

- Overactive or underactive PF muscles?
- Cues for Activation and Release of the PF Muscles
- Bring your tailbone to your pubic bone
- Stop the flow of urine and gas

Breathing Diaphragm - PF with Normal Breathing

- Inhale- PF moves downward with the assistance of the breath
- Exhale - PF moves back into the space like a Trampoline bouncing back

Posture: Lying Down Neutral spine, Neutral pelvis, rib cage neutral

PF Self Assessment – Endurance muscles

- Release to baseline, Check in with the PF
- Endurance – close, lift, hold. How long can you hold a contraction? _____ seconds
- How many times can you repeat a holding contraction (rest 5 seconds in between) before the muscles fatigue? ____ Stop counting at 10 repetitions and 10 seconds

Long Term Goals and Exercise Strength Training

- Lifting contractions
- 10 second contraction
- 30+ repetitions overload the muscles
- 8 + weeks training
- **Functional use**

Practice Feeling the PF in Various Positions: Sitting on a washcloth or ball, Side lying, Hands & Knees, Knees to Chest, Childs Pose, Happy Baby, Standing in neutral posture
What position do you feel/release your PF the most? _____

Can't Feel the Muscles? Exercise the Team Muscles (more practice lecture 3)

- Deep abdominal called the Transversus, Inner thighs and buttocks with the PF

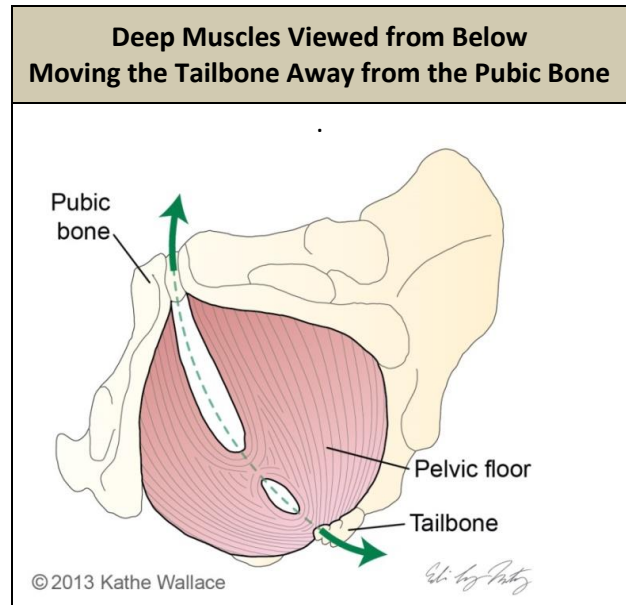
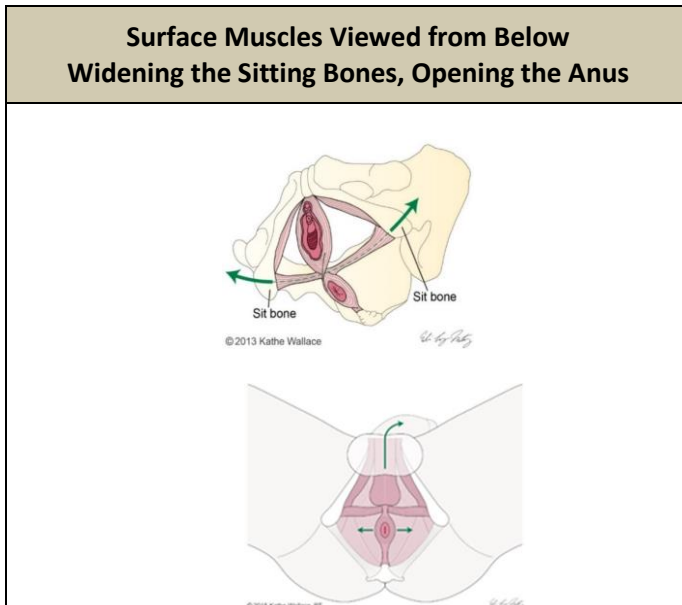
RESOURCES:

PelvicFloorFirst.org.au Continence Foundation of Australia
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PELVIC FLOOR RELEASE



Pelvic Floor Activation Exercise - Kegel		
Find these muscles to start this exercise	How do I complete this exercise?	Specific dosage
<p>Surface Muscles</p> <p>© 2014 Kathe Wallace, PT</p> <p>Deep Muscles</p> <p>© 2014 Kathe Wallace, PT</p>	<p>The surface muscles close the openings. These muscles close the vaginal lips, nod the clitoris, shut off the urine flow and “wink” or pucker the anus.</p> <p>Lift the deep internal muscles up and in. Imagine you are bringing the tailbone towards the pubic bone and lifting the entire floor from the back to the front (like an elevator ascending upward).</p>	<p>Positioning for exercise is started in lying or hands and knees position. Progress to sitting and standing.</p> <p>Begin with a few repetitions at a time, holding for up to 5 seconds or your known starting endurance.</p> <p>The long-term goal is 24- 30 repetitions per day holding each exercise for 10 seconds.</p> <p>Also incorporate a precontraction of the pelvic floor with your other daily exercises.</p>

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PART 3 SIMPLE SELF-CARE FOR BOWEL AND BLADDER CONTROL & PF MUSCLE TEAM

Normal Bladder Habits/Facts

- Holds ~ 2 cups
- Empty 5-8 times in 24 hours (intake and weather may alter)
- Should be able to wait 2 hours between voids
- No pushing or straining to empty- sit on the toilet

Bladder Irritants & Water Intake

- Caffeine, Alcohol, Carbonation, Artificial Sweetener, Chocolate, Acid foods
- Water Intake- 6-8 glasses light yellow urine color, not thirsty

Stress Incontinence - Leaks with Sneeze, Cough ++

- Posture with activity
- Pre contraction of the PF or the “Knack”
- Overactive or Underactive Muscle?

Urge Control Problems Overactive Bladder Urge Incontinence

- Strong Urge to Go followed by a leak
- Triggers and Bathroom Mapping

PF Fast Contractions - “Sprinters”

- Contract and release. See how many times you can do it in a row . Stop at 10.
- Your fast muscle activation is _____ repetitions.

Urge Suppression Techniques

- Stop activity – “I am in control of my bladder”
- Contract the pelvic floor muscles- try either a hold or 4 quick contractions
- Deep breathing – positive self-thoughts
- Use distraction techniques!
- Walk slowly to the bathroom – don’t run

Bowel Facts – Constipation

- Consistency of the Stool - Bristol Stool chart. Aim for type 4
- How frequently you go? Average range 3 times a week or 3 times per day
- Straining and Poor Muscle Coordination - can’t release/ emptying against tight muscles

The Pelvic Floor and the Bowel to Hold or not to Hold

- Respond to the bowel urges try not to delay
- To get to the toilet for a BM should be able to hold 15 min

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Proper Toileting Pointers & Posture

- Lean forward, elbows on knees, stool under feet
- Breathe in, imagine your belly to your thighs, gentle bearing down while blowing

Tips for Good Bowel & Bladder Health Dietary Considerations

- Fluid intake
- Fiber intake
- Weight Loss - especially with Type II Diabetes
- Eliminate Smoking

Pelvic Floor Contraction

- Breathe in, Contract PF as you blow out
- Helpful Cues for PF
- Feel a slight abdominal tension
- Continue to Breathe without breath holding

The Pelvic Floor Muscle Team

- #1 Deep abdominal muscles – Transversus
- #2 Inner thigh muscles (Adductors) Ball Squeeze
- #3 Hip rotators and buttocks - Bridge and Hip Rotator Exercise

How much is too much PF?

- If your muscles are overactive- work on release first! No need to hold constantly.
- Specific Exercises - Not 100% effort 60% - 80% effort will see improvement.

Functional Exercises - Practice

- Balance
- Sit to stand
- Squat or lunge
- Fitness activities

Summary

- Approximately 80% of bladder and bowel problems improve with self-care strategies
- Learning to use or release your pelvic floor takes time – practice with everyday activities

Links to Resources

- NAFC.org National Organization for Continence
- Continence.org.au Continence Foundation of Australia

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More info @ [KatheWallace.com/Rancho](https://www.kathewallace.com/Rancho)

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PART 4 SEXUALITY AND THE PELVIC FLOOR

Sexuality

- Sexual activity is for everyone
- Non painful and pleasurable
- Know your body! Know your anatomy!
- Biological vs Biopsychosocial Challenges

Pelvic Floor (PF) –Piece of the Sexuality Puzzle

- **PF Sexual Functions**
 - Overactive and Underactive Muscles
 - “Control and Surrender”
 - The pelvic floor muscles and breathing for sexuality

Pelvic Floor and Anatomy

- The vagina is a tube connecting to the uterus, VULVA is the region
- The PF muscles attach to the clitoris
- Clitoris has a head (Glans), a hood, shaft and legs, Paired Vestibular Bulbs (erectile tissue).
- Crus Clitoris: the “leg-like” extension (plural is crura)

Female PF Sexual Functions

- The PF muscles contract the vaginal walls for sexual sensation
- Stronger PF Muscles (PFM) correlate with orgasmic appreciation
- The PFM generate involuntary rhythmic contractions during an orgasm.
- Muscles attach to the clitoris and assist in clitoral erection
- Exercise can cause sexual arousal/lubrication

Male PF Sexual Functions

- Contributes to penis rigidity
- Ejaculation control
- Muscles attach to the penis
- Orgasmic appreciation
- Increase in circulation, keeps the blood flow and the tissues healthy

Overactive Pelvic Floor -Sexuality Symptoms PF can contribute to

- Vulvar-vaginal Pain
- Penis Pain - Chronic Prostatitis and Premature Ejaculation
- “Ovaries” hurt; “testicles” hurt
- Painful sexual activity poor lubrication
- Inability to orgasm

Underactive Pelvic Floor - Sexuality Symptoms PF can contribute to

- Poor sexual appreciation
- Aggravation of prolapse or incontinence
- Premature Ejaculation or Erectile Dysfunction

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Pelvic Floor Contraction

- Breathe in, Contract PF as you blow out
- Feel a slight abdominal tension
- Continue to Breathe without breath holding

Cues for Activation and Release of the PF Muscles

- Stop the flow of urine and gas
- Bring your tailbone to your pubic bone/release

Female

- Close/open the vaginal lips, nod the clitoris
- Lift/drop the organs up with your muscles

Male

- Move the penis into and out of the body -Turtle
- Tighten the anus or release it

Breathing is an intrinsic part of the sexual experience

Sexual Arousal State

Desire

Arousal

Plateau

Orgasm

Resolution

Breathing Techniques

Diaphragm Breathing or Engaging Breathing with PF contraction

Rate increases –Engaging Breathing

Focus on breath and body

Vocal Breathing – PF Muscles Contract

Sigh and Relax the PF Muscles

Breathing & PF Together - Circular Breathing

- Inhale breath moves to the tailbone, PF relaxes to receive
- Exhale breath moves up as the PF contracts to give
- Concentrate on the circle of breath and PF

Rocking with Breathing, PF and Hips

- Legs move like butterfly wings - Rocking adds the hips to the circle breath
- Breathe in letting your belly fill like a balloon, arch your back and keep your PF relaxed
- Breathe out and flatten your back while contracting the PF
- Add leg and hip motions, knees apart with inhale and closes as you exhale

Engaging Breathing – Focused breathing for arousal

- Breathing to draw energy into the seven body chakras
- Circular Breathing at each level
- PF brings breath up to each chakra as you blow out

Summary of PF and Sexuality

- Know your anatomy and how to use it!
- Control and Surrender, Receive and Give
- Breathing to enhance sexual appreciation

Links to Resources

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