Postpartum & Physical Therapy

- Trauma to pelvic floor muscles & pudendal nerve
  - Pudendal latency: 12-16 weeks postpartum
    - Longer lasting = in need of treatment
  - Urinary incontinence prevalence
    - 42% during pregnancy
    - 59% immediately postpartum
    - 38% eight weeks postpartum
    - 33-63% twelve weeks postpartum
    - 33% nine months postpartum
- Need to relearn postures, positions & movement patterns
- Restore pelvic floor & abdominal wall
- Address scar tissue
- Safe return to activities of daily living
- Return to intimacy: addressing pelvic pain & pain with intercourse
- Constipation
- Diastasis recti

**Individualized Pelvic Floor PT Techniques:**

- Exercises
- Manual therapy
- Modalities
  - Biofeedback (Surface EMG)

**What does the Pelvic Floor Do?**

- Provides organ support
- Controls continence
- Sexual function
- Works with abdominals & diaphragm
- Must work at optimal length & tension
- Non-optimal performance = dysfunction
- Treated with multidisciplinary team

**Risk Factors for Prolapse**

- Parity
- Vaginal delivery
- BMI
- Constipation
- Incontinence

**Symptoms of Prolapse**

- LBP
- Aching
- Pressure
- Heaviness
- Leakage

**Statistics**

- 95% with LBP have some form of pelvic floor dysfunction
- 41% have pelvic organ prolapse
- 35% with constipation also have incontinence