

ACPWH CONFERENCE 2010

Can pelvic floor muscle training prevent and treat pelvic organ prolapse?

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Abstract

To date, four randomized controlled trials (RCTs) have evaluated the effect of pelvic floor muscle (PFM) strength training on pelvic organ prolapse (Hagen *et al.* 2006). Statistically significant improvements in both symptoms and stage of prolapse were shown in these studies. The first full-scale RCT evaluating the effect on grade of prolapse, position of organs and symptoms was conducted by the present author's group. This study also measured morphological changes using three-dimensional ultrasonography. The results demonstrated statistically significant reductions in the levator hiatus area and muscle length, increased thickness of the PFM, and lifting of the bladder and rectal ampulla (Brækken *et al.* 2010a, b). These results are promising, but further high-quality studies are needed in this new area of research. The general principles of PFM strength training are: specific training of the targeted muscle group; three sets of between eight and 12 exercises close to maximum contraction per day, three or four times per week; and conducting the exercises for 6 months. Effective PFM training regimens have involved supervised training once a week in addition to home training on all other days, and have been done after thorough individual instruction and assessment of the patient's ability to perform a correct contraction. Supervised training can be done in groups or individually.

Keywords: pelvic floor muscles, pelvic organ prolapse, randomized controlled trial, training.

References

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