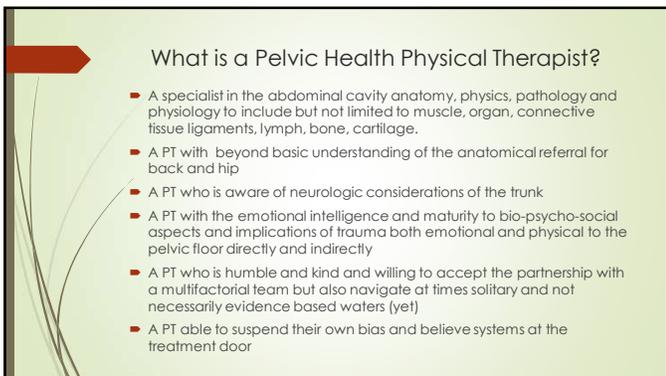


Introduction to Pelvic Health Physical Therapy

Beth Genday PT MHS

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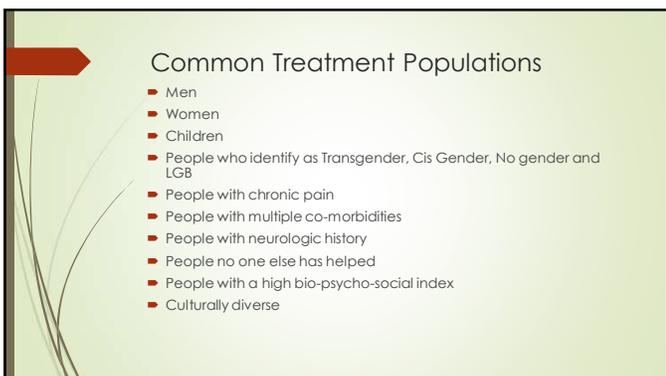


What is a Pelvic Health Physical Therapist?

- A specialist in the abdominal cavity anatomy, physics, pathology and physiology to include but not limited to muscle, organ, connective tissue ligaments, lymph, bone, cartilage.
- A PT with beyond basic understanding of the anatomical referral for back and hip
- A PT who is aware of neurologic considerations of the trunk
- A PT with the emotional intelligence and maturity to bio-psycho-social aspects and implications of trauma both emotional and physical to the pelvic floor directly and indirectly
- A PT who is humble and kind and willing to accept the partnership with a multifactorial team but also navigate at times solitary and not necessarily evidence based waters (yet)
- A PT able to suspend their own bias and believe systems at the treatment door

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2



Common Treatment Populations

- Men
- Women
- Children
- People who identify as Transgender, Cis Gender, No gender and LGB
- People with chronic pain
- People with multiple co-morbidities
- People with neurologic history
- People no one else has helped
- People with a high bio-psycho-social index
- Culturally diverse

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3

Referral Sources

- OB/Gyn
- Urology
- Gastro-Intestinal
- Oncology
- Primary care
- Urogynecology
- Ortho
- Fellow PTs
- Self referral

4

Conditions Typically Treated

- Urinary and Fecal Incontinence
- Dysfunctional Voiding
- Frequent UTIs
- Urgency
- Urinary Retention
- Constipation
- Pelvic pain
- Interstitial Cystitis
- Erectile dysfunction
- Oncology
- Abdominal pain
- Hip/Groin pain
- SI pain
- Pre-Partum
- Post – Partum
- Fertility
- Diastasis Recti
- Endometriosis
- Pudendal neuralgia
- Coccyx pain

5

Education

Herman and Wallace

- <https://hermanwallace.com/>
- OT, PT and other medical health professions
- PRCP: Pelvic Rehabilitation Practitioner Certification
- Preferred Provider List
- <https://hermanwallace.com/pelvic-rehabilitation-practitioner-certification/comparison-chart>

APTA Section on Women's Health

- <https://www.womenshealthapta.org/>
- PT, PTA and SPT
- ABPTS: American Board of Physical Therapy Specialist
- Women's Health Board Certified Specialist (WCS)
- <https://www.womenshealthapta.org/wcs/>
- Preferred provider list

6

Global support systems

- International pelvic pain society
- International Continence society
- Residency opportunities
- Pelvic PT Huddle (FB)
- Institute for Birth Healing Community (FB)
- Global Pelvic Physio (FB)
- Pelvic Guru Academy for Health Professionals (FB)
- OB PT (FB)
- Canadian Pelvic Health Physiotherapy Group (FB)

7

Academic Strengths

- Passion for anatomy especially trunk and shoulder/pelvic girdle
- Interest and passion for non-musculoskeletal anatomy and interplay between systems
- Strength in multi-parts and multi systems
- Physiology, Anatomy, Cardio-pulmonary
- Postural Guru

8

Soft Skills

- Patience
- Manual Skills
- Listening skills
- Multi-dimensional communication skills
- Strong sense of self
- Strong boundary ability
- Life coach experience a plus

9

Empathy



10

Practicing Empathy

- Take their perspective as their truth
- Avoid judgements: provide viable options
- Feel with people
- Do not get stuck or drag them into your dark space

11

Evaluation

- Diaphragm and breathing mechanics
- Lumbar spine and hip, thoracic spine
- Understand tone: normal and abnormal
- Posture
- Lifestyle patterns: drinking, eating, bowel bladder and sexual habits
- Surgical history
- Trauma history
- Internal assessment

12

Internal Assessment and Treatment

- Yes, you do Internal assessments and YES, someone does everything on you first and sometimes more than once



**EXCLUE ME...
WHAT ARE YOU DOING?**

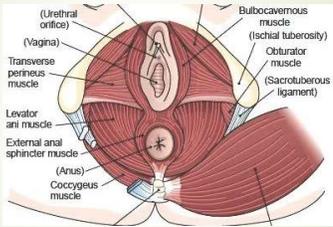
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Internal assessment

- Looking at the muscles
- Watching the function of the muscles: Concentric and eccentric
- Testing the sensation and reflexes of the muscles
- Measuring inconsistencies: Prolapse, atrophy,
- Measuring Strength (Power, Endurance, Repetition and Fast Twitch)
- Palpation of trigger points
- Mobility of osseous structure
- Pulse and if needed nerve assessment (Tinel)

14

Pelvic Floor Muscles



15



Treatment: Not Just Internal Stuff

- Diaphragmatic pelvic floor piston activity
- Muscle activation and uptraining/downtraining (eccentric/concentric control)
- Hip, Thoracic, Lumbar/Costal mobilization
- Strong manual skills
- Visceral mobilization
- Exercise prescription: Requires strong knowledge of muscle activation, muscle cooperation in closed and open chain, postural stability
- Neuro-muscular re-education (includes but not limited to machine based biofeedback)
- Dilators, wands: be prepared to instruct in use

16



Pelvis, Sex, Psychology and Pharmacy

- Whole new set of medications and side effects. Know them
- Google is not your friend. Be better than Google. Talk with pharmacists and dietitians. Know the research behind herbs, "natural" products, probiotics and fiber, fads versus fact.
- Connecting with and having access to sex therapists and counselors that specialize in abuse and trauma is very essential in holistic care.
- When it comes to pain and sex we are the muscle experts. That is where I stay with my patients but I do talk about it and more importantly let them talk about sex.
- Know what the referral sources can do and what the process is for their skill sets. Know where you fit in the picture and be aggressive in communication.

17



Outcome Tools: Get Paid

- PFDIQ-20
- PFDIQ-7
- CRAD
- UDI 6
- IIQ 7
- VQ
- GROC

18

SNS Expert

- SNS overdrive has significant effects on the diaphragm which is critical in pelvic floor muscular function
- SNS controls storage for urine and bowel
- SNS overdrive affects sexual function
- SNS overdrive is a factor in uncontrolled inflammatory response

19

The Psycho Social of Bio-psycho-social

- What percentage of women with pelvic pain have a history of abuse?
- What percentage of women with endometriosis have a history of abuse?
- What percentage of elderly women with urinary issues have a history of abuse?
- Is history of abuse something a Pelvic Health PT needs to consider and why?
- Do I ask about this and if so how and when and what do I do with it?

20

Pediatric Pelvic Health

- Common diagnosis include incontinence that is not age appropriate (fecal and urinary) Constipation, tethered cord
- No internal assessment or treatment
- Often ordered for biofeedback (use of perianal or suprapubic electrodes)
- Assessment of the diaphragm and truncal stability is essential to success
- ACE scores and influences
- SNS overdrive and anecdotal influences including ADHD, eczema, sleep apnea
- Requires much creative thinking, analysis of patterns and ability to be the tallest person in the room (including the child and parents)
- Any pediatric PT should take a pediatric pelvic floor course

21

Not Sure? That's OK



22

To Protect Yourself Know Yourself

- Get a mentor
- Get a counselor if needed
- Watch for Superhero, Savior complex: it leads to negativity and burn out



23

WELCOME
TO THE FAMILY



24
