

PHYSICAL THERAPY FOR PELVIC ORGAN PROLAPSE

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Compliance Statement: approved by Mayo Clinic IRB; complied with subject protection

Abstract :

Background and purpose: An estimated one out of every three women suffers from a pelvic floor disorder, to include urinary or defecatory dysfunctions, or pelvic organ prolapse (POP). Evidence supports physical therapy for urinary incontinence and fecal incontinence. However, there is a paucity research for physical therapy treatment of POP. Women with POP may experience a decreased quality of life (QOL) when symptoms preclude a woman's ability to pursue activities of daily living. Therefore, the purpose of this case series is to observe the outcomes in two groups of women with symptomatic POP. The intervention group received physical therapy examination, education on pelvic floor muscle training (PFMT), and four sessions of physical therapy for coordination training. The minimal intervention group received examination and education in PFMT only.

Study Design: Case Series Methods and materials: 5 pre-menopausal female participants with POP were randomized into 2 groups: PFMT group (minimal intervention) and PFMT with coordination in functional activities group (treatment group). Outcome measures used at baseline and at a 12 week follow up include QOL measures: Pelvic Floor Distress Inventory (PFDI-20), Pelvic Floor Impact Questionnaire (PFIQ-7), and Pelvic Organ Prolapse/Urinary Incontinence Sexual Function Questionnaire (PSIQ-12).

Analysis: We analyzed pre- and post- treatment changes in the questionnaires across all subjects enrolled.

Results: All participants in the treatment group showed clinically significant improvement in scores on all QOL measures at follow-up.

Conclusions: Participants in the treatment group demonstrated improved scores on QOL measures after 12 weeks of physical therapy intervention. **Implications:** There continues to be a need for high quality research on physical therapy interventions for women with POP.