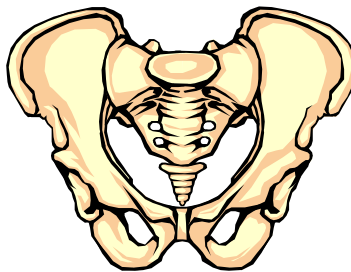


# Recognize Pelvic Floor Dysfunction



Over 25 million Americans suffer from some type of pelvic floor dysfunction each year. While it is out of my scope of practice to diagnose pelvic floor dysfunction, answering these questions will help you determine if you need to talk with your allied health professional and if an exercise program can help you.

- How often do you urinate during the day? (every 2-4 hours or 6-8 times per day is normal)
- Do you get up at night to go to the bathroom? If yes, how many times? (zero to once per night is considered normal)
- Do you ever have accidental leakage of urine during activities such as coughing, sneezing, laughing, running, exercising or lifting?
- Do you have accidental leakage of urine associated with a strong urge to urinate or do you have trouble reaching the toilet in time.
- Do you have a lot of “just in case” toileting?
- Do you have trouble controlling gas?
- Have you ever lost bowel control?
- If you are sexually active, do you have pain during or after intercourse?
- Do you have pain before, during or after urination or bowel movements?



If your answer is “Yes” to some, or a lot, of these questions, I encourage you to talk about your symptoms with your health care provider. Some examples of health care providers are: Urogynecologists— they have additional training and experience on female pelvic organs and the muscles and connective tissue that support the organs. Gynecologists, Obstetricians, obstetrician/gynecologists, physical therapists, women’s health physical therapists, fellows of applied functional science, etc.

What is Pelvic Core Neuromuscular System (PCNS)? Well, for today lets think of it as a floor to a house. Let me explain further. Our core is a condition, not a location. By that I mean it is a layering of muscle and it is up to these muscles to hold and stabilize using strength and stamina or “hold up the house.” So if the core (or this layering of muscle is weak) the house caves in. To further clarify, the respiratory diaphragm is the roof of the house, the abdominal layers support the front of the house, the back and hip muscles support the back wall, the pelvic floor make up the floor and strong inner thighs make a great foundation to hold this involution of the muscle/ house.

The primary role of PCNS is to integrate proximal stability which allows for distal mobility. The muscle structure mentioned above house the crossroads for top-down to bottom up , three dimensional driven movements. It is through this common core that three-dimensional, functional, triplanar movements happen.

## MIND / BODY: BALANCE

www.mindbodybalance.com  
(by appointment only)

Phone: (734) 777-5927  
E-mail: kim@mindbodybalance.com

***We Inspire Our Clients  
to Movement!***

# Introductory Pilates Package

## \$250 for 5 sessions!



Besides the obvious, there are some anatomical differences between men and women when you look at the big picture of PCNS. Even though the statistics are higher for women, both men and women can experience PCNS dysfunction. 1 in 3 women suffer with some form of pelvic floor dysfunction. For women, weak or imbalanced pelvic core muscles can lead to incontinency, back pain, pelvic floor muscles laxity, and decreased sexual appreciation. For men, weak pelvic floor muscles can cause urinary stress, incontinence, overactive bladder, erectile dysfunction, back and hip pain, decreased sexual response, etc.

Orthopedic issues, low-back pain, sacroiliac joint dysfunction, sciatica, thoracic pain, knee pain, ACL deficiencies, ankle sprains can all be influenced by dysfunction in the PCNS. Many men and women don't realize that the issues they are facing are abnormal and that treatment is available. It is my hope that you become aware of PCNS and take steps with your health care professional and exercise specialist to improve your quality of health.



### Here are some exercises that may help:

(always check with your health care provider before starting any exercise program.)

- *Lay on your back with knees bent, toes facing forward, lift the hips toward the sky and roll the knees inward, return to start, lift the hips toward the sky, roll the knees outward, repeat these sequences with toes facing inward and toes facing outward*
- *From a seated position, feet on the floor- hip distance apart, toes facing forward, roll the knees inward and roll the knees outward*
- *From a standing position, feet-hip distance apart and toes facing forward, roll the knees inward and roll knees outward*
- *Stand with feet- hip distance apart and toes facing forward. Perform a mini squat and rotate your pelvis clockwise and then counter clock wise. Repeat this sequence with your toes facing inward and then with your toes facing outward*

We all have pelvic floor muscles; if we didn't, our internal organs would fall out. The strength of these muscles could be reduced for several reasons: injury, obesity, pregnancy, aging, gravity, sedentary, etc. It is very important to regain control of the pelvic floor muscles and there is NO AGE LIMIT to starting. In the Pilates Sequence, we focus on these muscles and re-educate other core stability muscles (which form an internal corset) making a strong house. Pilates addresses all of the muscles involved in PCNS as it is an entire body workout that develops uniform usage.

Sources: Paving the way for a healthy pelvic floor by Christina M. Christie and Rich Colosi in May 2009 IDEA Fitness Journal; Cray G and Tiberio 2005 Seminar: Chain reaction transformation The Gray Institute; Kibler W.B. Press J and Sciascia 2006 The role of core stability in athletic function Sports Medicine; Inner Pelvic Floor by Christina Christie November 2008 IDEA Fitness Journal

### **MIND / BODY: BALANCE**

www.mindbodybalance.com  
(by appointment only)

Phone: (734) 777-5927  
E-mail: kim@mindbodybalance.com

***We Inspire Our Clients  
to Movement!***