

Pelvic Floor Dialogues

So I pee a little when I laugh. That's normal right?

How has my body changed "down there" since I had my baby?

Everyone talks about Kegels. Do they really work? How much is enough?

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Vigorous Exercise and PFDs

Two recent studies looked at the impact of vigorous exercise on the pelvic floors of women. One study focused on CrossFit; the other on jogging.

CrossFit. Participants who worked out at least three times per week and lifted from 90 to 220 pound weights participated in this study. The researchers found that CrossFit can impact the pelvic floor. Among women under 40 years of age, a higher percentage who regularly participated in CrossFit experience the accidental leakage of urine, or [urinary incontinence](#) (UI).

However, the other two categories pelvic floor disorders were reported at the same level as the general population. These include:

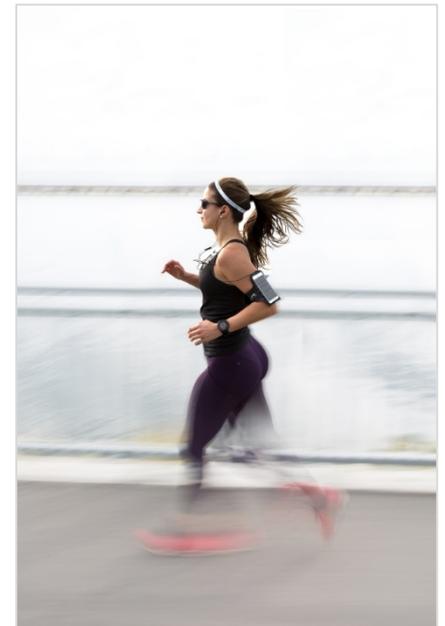
- [Pelvic organ prolapse](#) (POP), or the dropping of the pelvic organs caused by the loss of normal support of the vagina.
- [Accidental bowel leakage](#) (ABL), the leakage of stool or gas without your control.

Running. Unintentional shifting of the pelvic floor can increase your risk for pelvic floor disorders, including UI, POP, and ABL. This study looked at the impact of the bouncing movements associated with jogging on the pelvic floor. Women who struggle with UI and those without UI participated in the study.

The researchers measured how much the pelvic floor muscles became displaced during running. And, indeed, in both groups of women, the pelvic floor muscles shifted.

Vigorous exercise has many benefits. However, those benefits can be associated with health risks. Learn more about the risks to your pelvic floor:

- Learn more about [pelvic floor disorders](#) (PFDs)
- [How to talk with your health care provider](#) about PFDs



Sex, Pain, and Interstitial Cystitis

Okay, let's go there. Let's talk about S – E – X. Let's talk about that desire to get laid, the wonderful feeling of arousal and that orgasmic YES, YES, YES! Now imagine, you have a chronic pain in your pelvic area and how that can squash that desire.

Women with interstitial cystitis/bladder pain syndrome (IC/BPS) struggle with that reality. In addition to bladder pain and symptoms of urgency and frequency, IC can cause chronic pelvic pain.

Researchers presented the findings of a study that many women struggling with IC/BPS already knew—IC/BPS can impact a woman's sexuality. At the [American Urological Association](#) meeting in Chicago, 16,000 health care providers learned that women with IC/BPS often experience sexual dysfunction during episodes of pelvic pain. Plus, they found that psychological factors associated with living in chronic pain can further impact the sex life of women with IC/BPS.

If you have IC/BPS and it is impacting your sex life, talk with your health care provider. Find out what can be done to help control your symptoms and improve your sex life. Learn more about IC/BPS:

- Download a [free fact sheet](#) about IC/BPS
- Watch an interview with Dr. Iglesia about [sexual dysfunction](#)
- Read more about [intimacy and IC/BPS](#)



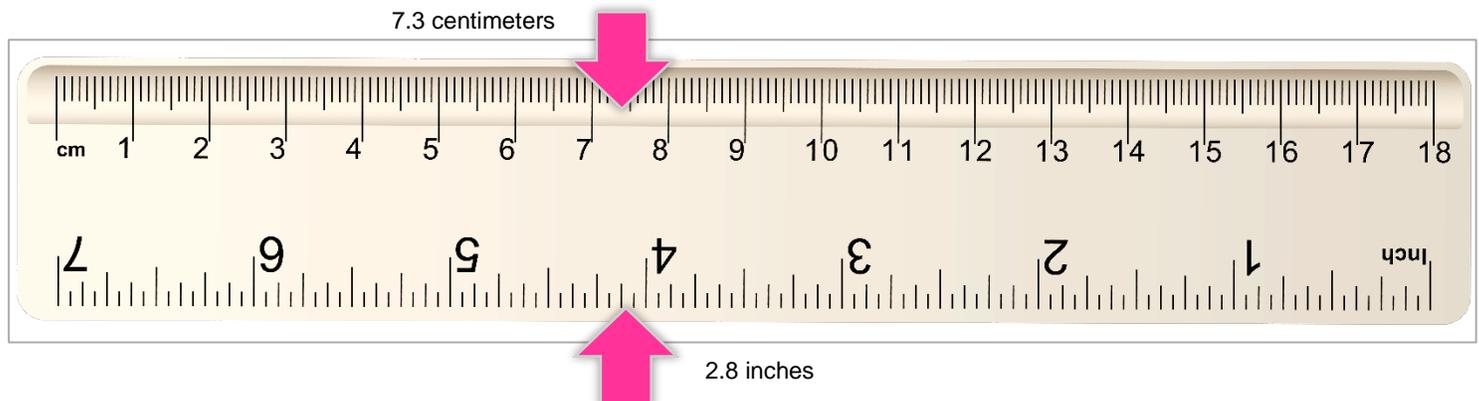
Prolapse Surgery vs. Vaginal Pessary: It's Your Choice

Pelvic organ prolapse (POP) is the dropping of the pelvic organs caused by the loss of normal support of the vagina. Two treatment options include having [POP surgery](#) or getting fitted for a [vaginal pessary](#).

A recent study of 350 women found that vaginal pessaries to control pelvic floor dysfunction were less apt to work in women who were overweight and among women who had shorter total vaginal lengths (TVL). Even so, it is almost always worth considering non-surgical options.

- A woman's body mass index (BMI) is calculated to determine whether she is overweight. Pessaries may not be the best option for women with BMIs that are greater than 25.7 kg/m².
- TVL, the depth of a woman's vagina, can change with age and other factors, such as estrogen status or whether she has had a hysterectomy. For example, hormonal changes associated with menopause may cause the TVL to shorten. Women with a TVL of less than 7.3 centimeters (2.8 inches) may not be good candidates for a pessary.

If you are diagnosed with POP, figuring out the best treatment options can be tricky. Talk with your health care provider. Ask about calculating your body mass index and total vaginal length. In the meantime, to learn more about POP surgery—watch a video with Dr. Noblett about POP [surgery and what to expect](#).



Honey, It's Your Doctor's Office



Urodynamic testing is a series of medical tests performed to identify potential lower urinary tract problems such as incontinence.

A survey of more than 300 people found that patients were on the fence about the urodynamic testing experience:

- Half of them were okay with the procedure.
- The other half reported anxiety about having to go through the procedure or said they found it physically uncomfortable.

A group of [Harvard University](#) docs decided to find out if a phone call the day before the procedure might help relieve that anxiety and yield a better experience. More than one hundred women participated in the study. Half of the group received a phone call, the other half did not. All of the participants completed surveys before and after urodynamic testing asking about their experience with the procedure.

The finding: There were *no* significant differences in anxiety levels between the women who got a pre-procedure touch base call and those who did not receive a phone call. However, the patients who received the phone calls reported being more satisfied with the overall experience.

- Download a free [fact sheet on Urodynamic Testing](#) in regular or large print format

Around the Web

- Pelvic health expert issues [warning against vaginal steaming](#) which can cause burns and explains how to prevent a prolapse
- From wet wipes to CBD oil... [8 things you should NOT put near your vagina](#)
- Incontinence? [Sling removes your fear](#) of sudden sneeze

The Rest of the Story

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