

Your Pelvic Health and the Menopause

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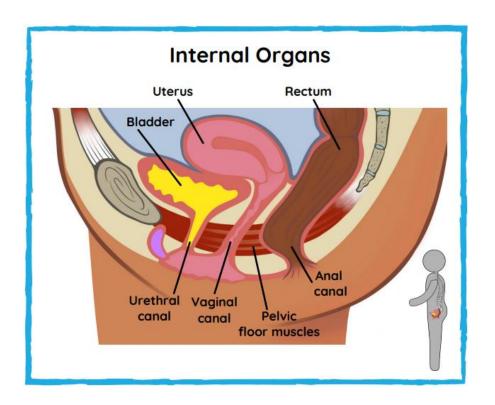
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Pelvic Health Overview

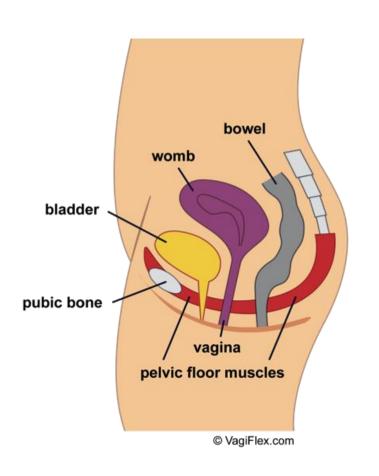


- The Menopause can be a risk factor for worsening pelvic health disorders
- Genitourinary
 Syndrome of the
 Menopause (GSM)
- As we age the structure and function of our urinary and genital systems changes
- The pelvic organs and their supportive musculature are "Oestrogen responsive"
- Collagen production controlled by Oestrogens

Pelvic Health Overview



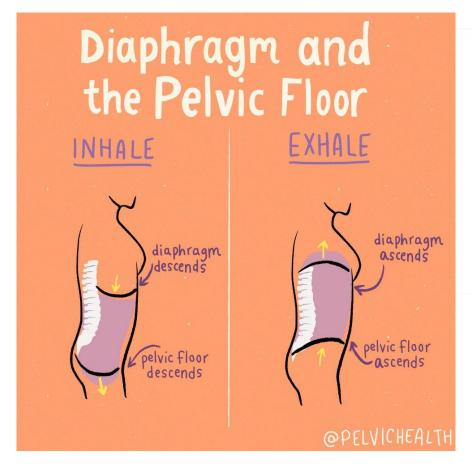
What even is my Pelvic Floor?!!

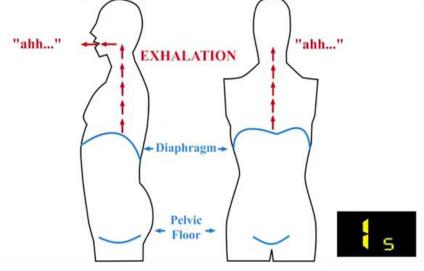


- The pelvic floor muscles are the layer of muscles that support the pelvic organs and span the bottom of the pelvis
- Strong pelvic floor muscles give us better control of our bladder and bowels and support the pelvic organs
- Effects of menopause = thinner, less elastic, less supported

I'm a physio... audience exercise participation is mandatory!









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Bladder Function...

- Between 3 and 6 million people in the UK suffer from some degree of urinary incontinence
- Due to the effects of pregnancy, childbirth and <u>menopause</u>, women are FIVE times more likely to suffer from incontinence than men
- Yet only 1 in 5 women seek help

Bladder Function...



- Although very common, it is not normal
- Shouldn't be considered "inevitable"
- Treatment is often very effective and relatively simple

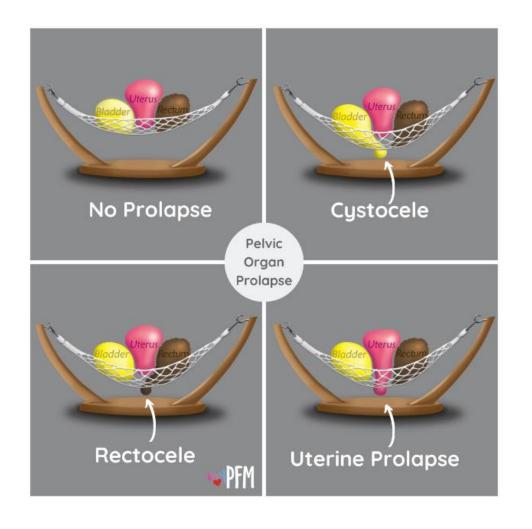
 Bladder problems are not "the price you pay" for being a woman!!!

Bladder Function..



- Two main types of leakage:
- Stress Incontinence Common during perimenopause. LOTS of evidence supporting PFM strengthening to reduce.
- 2. Urge Incontinence Sometimes associated with "over active bladder" – topical Oestrogens have been shown to provide some benefit here along with PFM training

Pevic Organ Prolapse... Sherwood Forest Hospitals NHS Foundation Trust







What can you do?...

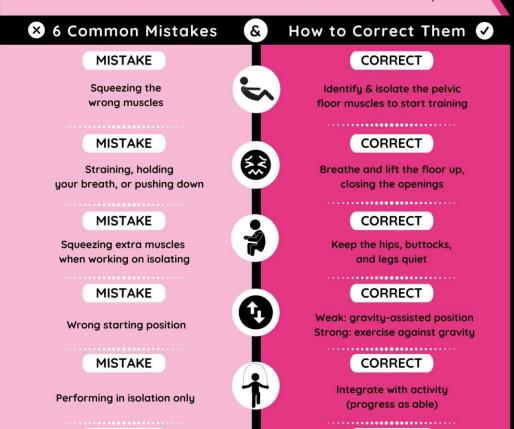
- The evidence is clear... some simple lifestyle changes and pelvic floor muscle strengthening can prevent or improve the symptoms of Genitourinary Syndrome of Menopause
- NICE guidance and a strong evidence base support early referral to a Pelvic Health Physiotherapist or Continence Advisory Service for mild-moderate continence issues/prolapse

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Help!... Give these a go...

- Reduce caffeine intake (max per day!)
- Ensure you're drinking enough (1.5 2 litres/day)
- Avoid high impact exercise with SUI/POP until seen physio – weight bearing exercise doesn't have to mean jumping!
- Avoid "just-in-case" urination
- Try some simple bladder retraining "when did I last go?"
- Avoid constipation
- Most important: Pelvic Floor Exercises!

PELVIC FLOOR MUSCLE TRAINING







MISTAKE

Practicing quick flicks only





CORRECT
Practice strong quick squeezes,

endurance holds, gentle butterfly holds, and letting go completely





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Pelvic Floor Exercises...

- Lots of options electrical stimulation, biofeedback, weights/cones
- Always start with the basics (free!)
- Remembering is half the battle Squeezy App
- Start today... Start Simple...

3x per day 5x 5 second hold. 5x "quick flicks"

References & Sites...



- www.mypfm.com
- www.squeezyapp.com
- Menopause | POGP (thepogp.co.uk)
- www.pelvicpain.org.au

Baruch Y, Torella M, De Bastiani S, Meschia M, Candiani M, Colacurci N, Salvatore S. Pre-versus Post-Menopausal Onset of Overactive Bladder and the Response to Vaginal Estrogen Therapy: A Prospective Study. *Medicina*. 2023; 59(2):245.

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MALINAUSKAS, A. P. *et al.* Efficacy of pelvic floor physiotherapy intervention for stress urinary incontinence in postmenopausal women: systematic review. **Archives of Gynecology & Obstetrics**, [s. l.], v. 308, n. 1, p. 13–24, 2023.

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