Pelvic Floor Disorders

A pelvic floor disorder can make life extremely challenging. The only way to regain control over your life is to have the disorder treated by qualified medical professionals.

At Huntington Colorectal Surgeons, we are a highly-trained and board-certified team of colorectal specialists with extensive experience treating pelvic floor disorders. Our customized treatments will correct the damage to your pelvic floor and strengthen it.

Feel free to speak to us for more information.

What is the pelvic floor?

The pelvic floor is the thick band of connective tissues that act as a foundation to support the pelvic organs, including the bladder, the rectum, the vagina, the uterus, and the cervix. It is shaped like a hammock.

The pelvic floor contains openings – two in men (for the anus & urethra) and a third in women (for the vagina). These openings are usually closed with another band of tissues, such as the sphincters.

The tissues in the pelvic floor are just like the tissues in the arms and legs – they can be controlled consciously by the individual. However, for the most part, they remain quite tight and sturdy, supporting the pelvic organs.

Types of pelvic floor disorders

Sometimes, the pelvic floor becomes weak or damaged and cannot support the pelvic organs or anorectal processes. When this happens, you have an onset of conditions that are called pelvic floor disorders.

There are three main types of pelvic floor disorders:

• Bowel control problems

The pelvic floor supports a portion of the bowel. If there is something wrong with the pelvic floor, you'll notice problems in the bowel as well, such as:

- Fecal incontinence Inability to control gas or stool.
- Obstructive defecation Inability to pass stool for extended periods due to a bowel obstruction.

• Bladder control problems

The bladder is supported by the pelvic floor. If the tissues are weak, you'll experience:

- Urgency incontinence when the bladder is overactive and uncontrollable.
- Stress incontinence when any pressure (from sneezing or coughing) causes uncontrolled bladder movement.

• Pelvic organ prolapse

This is a condition where the pelvic floor is so weak that it is unable to hold the organs in place. As a result, the organs slip and move downward towards the vagina. Rectal prolapse is an example.

Why does the pelvic floor become weak?

The pelvic floor weakens due to several reasons:

- Genetics
- Age
- Muscle atrophy
- Obesity
- Pregnancy & childbirth
- Pelvic surgery
- Radiation & chemotherapy
- Extensive lifting of weights

Our experts at Huntington Colorectal Surgeons will conduct a comprehensive evaluation of your medical health and identify the cause and nature of the pelvic floor disorder. Contact us to schedule a consultation.

Signs of pelvic floor disorders

You should seek medical help if:

- You experience pain in the pelvis.
- You have discomfort when urinating or defecating.
- You experience painful sex or have sexual dysfunction.
- You notice signs of fecal or urinary incontinence.
- You have a very "heavy" feeling as though something is bearing down on your vagina.
- You experience very frequent bouts of urinary tract infection.
- You have pelvic floor dysfunction when you are unable to consciously control your pelvic floor during a bowel movement.

Treatments for pelvic floor disorders

To diagnose your condition, our specialists will conduct a manual examination to identify the presence of any muscle knots, muscle spasms, and any bulging near the vagina. A perineometer may be used to check the strength and frequency of the contractions of the pelvic floor.

Once the pelvic floor disorder has been diagnosed, we will recommend one of the following treatments:

- Medications to stop muscle spasms.
- A customized exercise routine to strengthen the pelvic floor.
- Warm water treatment (such as warm baths to improve circulation in the pelvic floor and improve the condition of the tissues).

Surgery is usually the last option and is often only used in the case of pelvic organ prolapse. We conduct a robot-assisted minimally-invasive surgery to pull the descended organs back into place. This surgery is a short and safe procedure, done under complete sedation. The downtime is between 7 to 10 days, after which you will have to follow the prescribed diet and exercise regime we provide, to prevent your pelvic floor from weakening in the future.