

Post-natal Times

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Your simple guide to prolapse

Everything you need to know about prolapse from Jenny Deeming our women's health expert.

Did you know that:

- 1 in 3 women have a prolapse post birth
- Prolapse can be improved through pelvic floor strength training
- Loss of oestrogen during menopause and other changes as we age can weaken the pelvic floor leading to an increased risk of prolapse
- Having a prolapse doesn't mean you need surgery.

What is a prolapse?

Pelvic Organ Prolapse is a common condition that sounds scarier than it is. The pelvic floor muscles act like a hammock holding up your pelvic organs and it is common for the pelvic floor muscles and connective tissue to be weak, stretched or torn after birth. This can leave the hammock 'hanging low', giving you a feeling of heaviness and dragging 'down there'.

How do you know if you've got a prolapse?

Signs include:

- Pressure coming down or in your vagina
- Not being able to wear a tampon
- Discomfort or pain in and around your vagina
- Trouble urinating or having bowel movements or the feeling of not fully emptying.

How is it diagnosed?

Your GP, gynaecologist or women's health physiotherapist can diagnose a prolapse through taking a medical history and performing a pelvic examination. The prolapse is graded on a scale of 1-4.

Treatments

To stop a prolapse from getting worse there are a number of lifestyle and behaviour changes you can make. These include:

1. Check your diet to prevent constipation and straining with bowel movements (this puts added strain on your pelvic floor).
2. Avoid extreme weightlifting and repeated lifting (until your pelvic floor has been assessed for strength and endurance).



3. Keep weight within a normal range and stop smoking (smoking doubles the risk of pelvic floor problems).

4. Pelvic floor exercises can be really effective for mild symptoms of prolapse.

Re-strengthening the pelvic floor will help to lift the hammock to better support the pelvic organs.

Our women's health physiotherapist can assess this and provide you with a tailored rehab programme – [contact us](#) if you would like to know more.

5. Pessary. These are inserted into the vagina to help lift the bladder or vaginal walls which stops the bulge coming down.

6. Finally, there is prolapse surgery. There are several types of surgery depending on where the prolapse is which can improve the pelvic floor anatomy.

To make an appointment to see our women's health physiotherapist, call 01428 647647 or email therapy@holycross.org.uk.



To plank or not to plank

The plank exercise is one of the most commonly known exercises for our 'core'. But should it be used after giving birth?

The plank is a fantastic exercise but you need to build up to it because it is a high-level exercise which requires the correct technique to prevent you from doing more harm than good.

Key things to check:

- Is there any doming going on at your belly button? This needs to stay flat throughout the exercise.
- Are you holding your breath? This will cause more internal pressure hence pressing down on your pelvic floor.
- Are you using your pelvic floor at the same time? By drawing in your pelvic floor, you will prevent yourself from 'bearing down' on the pelvic floor when you really want to be drawing up and in.
- Is your body position correct? Don't let your bottom rise up above shoulder height and ensure the back remains flat (no arching).

Our women's health physio can check all of these areas to ensure you are completing the exercise correctly. If you can't control the points above you will need an easier core exercise to start. Your core muscles need to be built up gradually, just like every other muscle in your body.

Not sure where to look for advice?

The Pelvic Obstetric and Gynaecological Physiotherapist's (POGP) website is a great source of information for all things related to women's health.

Whether you have low back or pelvic pain during pregnancy, are suffering with post-natal problems including tummy separation, incontinence and prolapse or are looking to return to sport but not sure where to start – the website gives great free advice and education.

Check it out at www.thepogp.co.uk or contact us for help and advice.

Four top tips for C-section recovery

1. Keep an eye on your scar – any redness, soreness or oozing needs to be checked for infection. Keep the wound clean and dry as it heals.
2. Focus on your posture as your scar heals – sitting and standing tall will prevent the scar from feeling tight as it heals.
3. You still need to do your pelvic floor exercises – the weight of your baby in the womb puts a considerable strain on the pelvic floor and needs some work to regain its strength.
4. Once the scar has healed you can start massaging it to encourage flexibility. Using oil or cream move the scar up and down, sideways and in circular movements to free up the scar tissue.

For further advice or scar tissue massage, contact our Women's Health Physiotherapist.



About Jenny

Jenny Deeming

is a qualified physio and specialises in women's health.

She is an accredited Mummy MOT practitioner and runs a Pilates class aimed at post-natal women. Jenny holds women's health clinics for the diagnosis and treatment of a range of post-natal conditions.

Contact us to book a Mummy MOT, an initial assessment with Jenny or to take part in the Pilates class. You can also follow us on Instagram @the_physiotherapy_centre or Facebook @holycrossphysio/