



# Pelvic Health for Yoga Students

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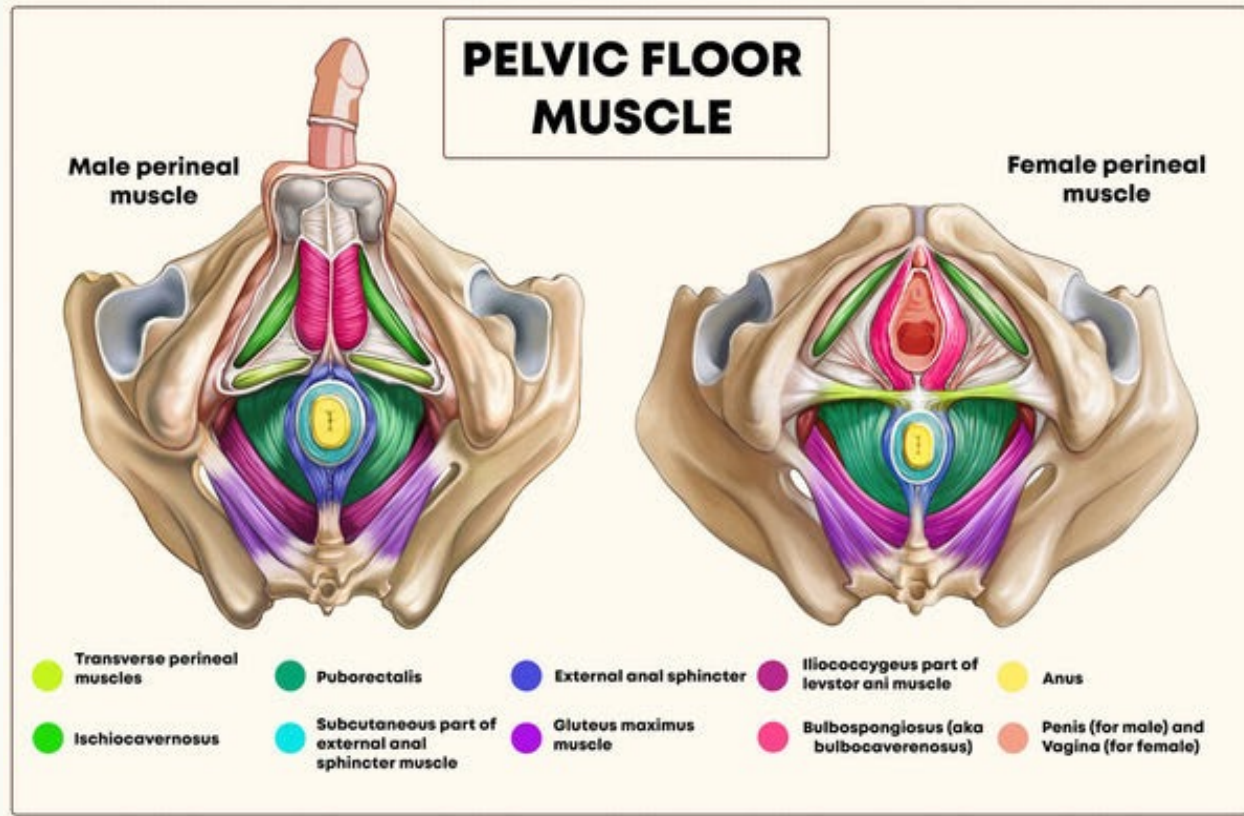
Austin, TX, USA

# Outline

- What is the pelvic floor?
- Pelvic floor dysfunction
- Strategies for supporting pelvic floor health—  
What to do
- Q&A

# What is the Pelvic Floor?

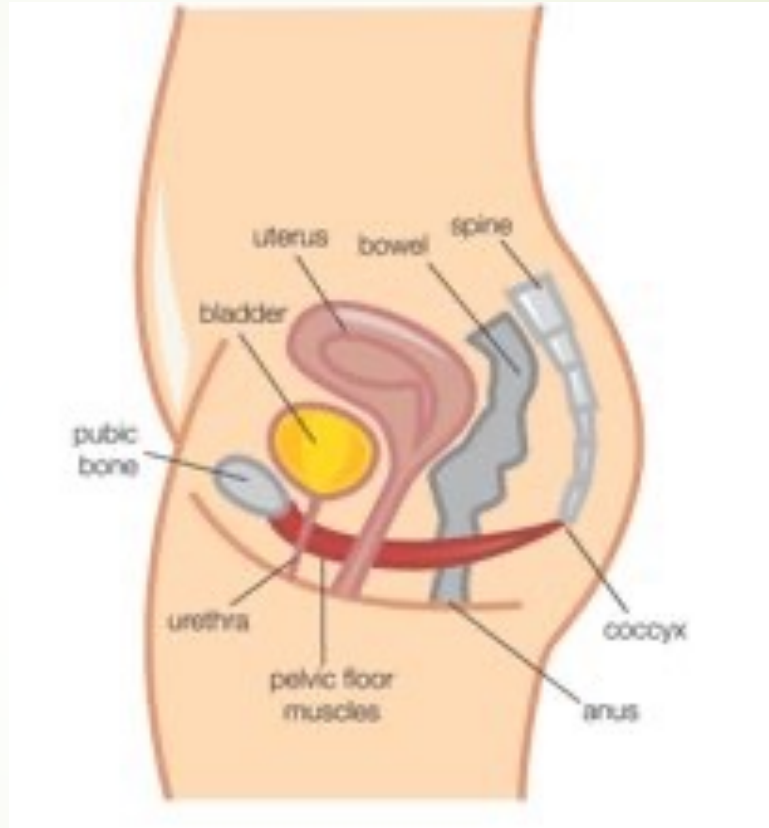
- ➡ 2 layers of voluntary muscles
- ➡ Male vs Female
  - ➡ same muscles, different layout
- ➡ How to activate\*



# What is the Pelvic Floor?

## ➤ 5 Functions:

- Support Organs
- Sphincteric
- Part of the Core\*
- Sexual
- Breathing\*



# Pelvic Floor Dysfunction

- What does it mean?
  - Problems with any of the 5 functions of the pelvic floor
  - Can lead to leakage or urgency, constipation, pelvic or low back pain and/or prolapse
- What causes it?
  - Childbirth
  - Menopause
  - Aging and/or muscle atrophy
  - Pelvic surgery
  - Sexual trauma
  - Incongruencies in core and hip muscle activation
  - Hypermobility

# Common Pelvic Floor Dysfunctions\*

Urinary  
urgency and  
frequency

Urinary  
incontinence

Prolapse

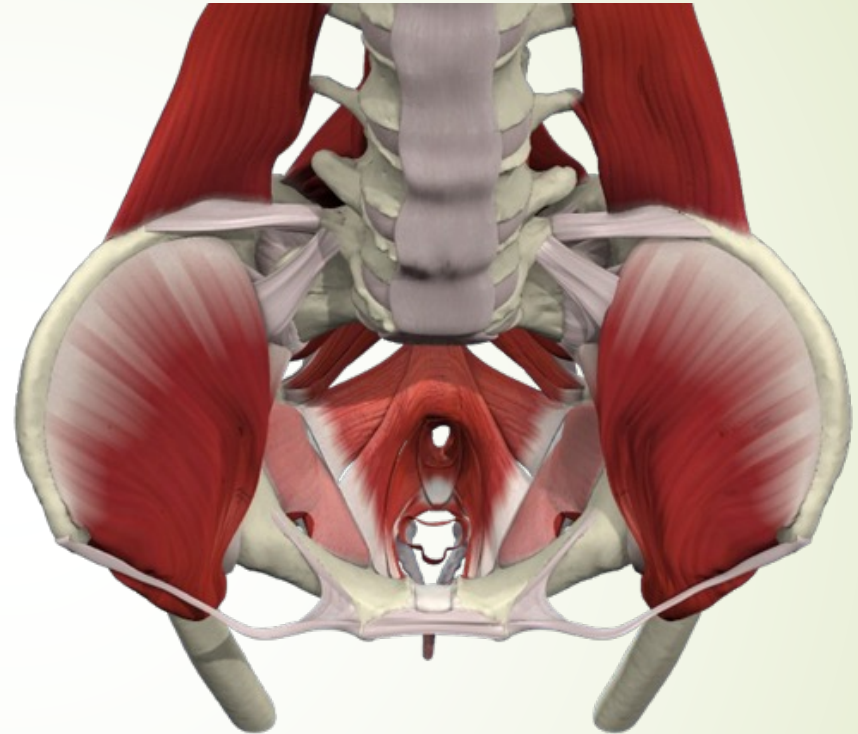
Constipation  
and Fecal  
Incontinence

Pelvic pain  
and painful  
intercourse



# Core Muscle Activation- Pelvic Floor Component

- Move with the diaphragm
- Co-contract with the deep abdominals
- When working correctly—they contract and relax in response to movement to maintain continence
  - Inactivity weakens them
- Yoga helps to strengthen symmetrically with functional breathing that supports the pelvic floor



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## Core Muscle Activation- Deep Abdominal Component

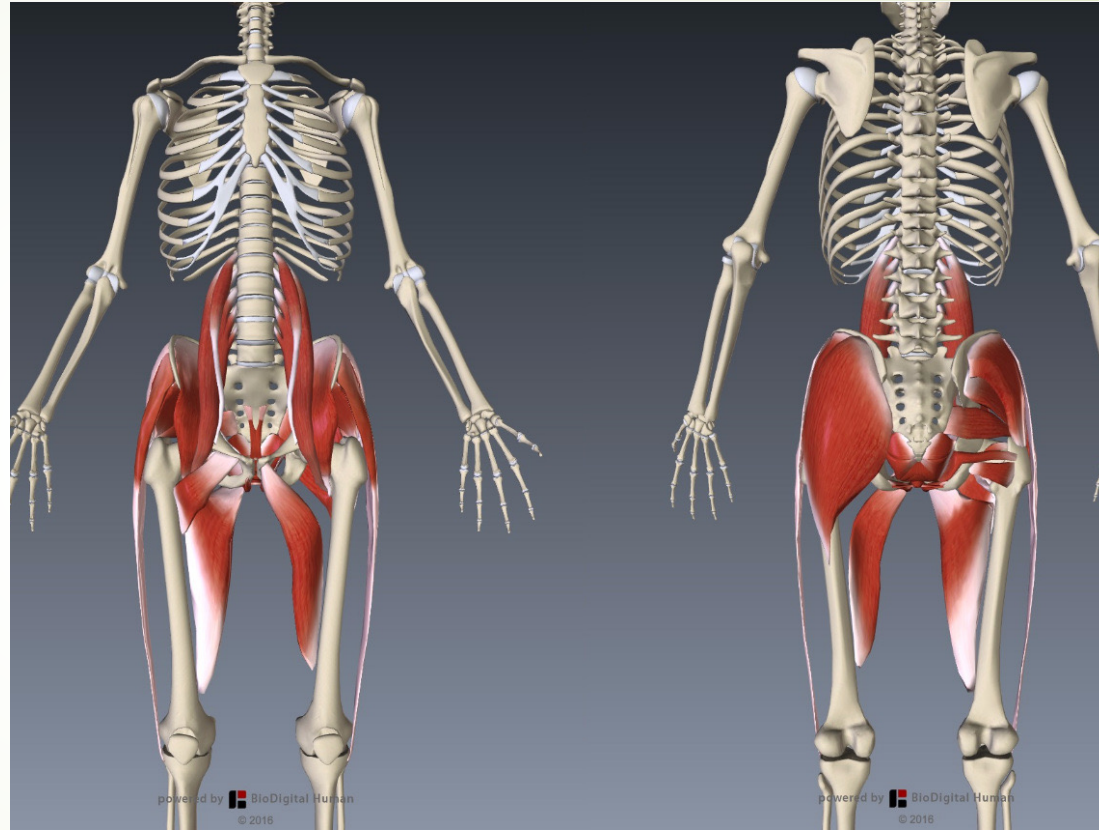
- ▶ Overuse of superficial abdominal or back muscles correlates with weakness in deep abdominals and/or pelvic floor
- ▶ May lead to pain or other pelvic floor dysfunctions





# Core Muscle Activation-Hip Component

- Incongruencies between left and right leg OR between inner and outer hip muscles
- may lead to pelvic floor overuse or disuse
- May lead to pelvic pain or weakness
- May lead to hip, knee, foot and ankle issues



# Hypermobility

- Common in yoga
- Underdiagnosed
- Laxity in ligaments & other soft tissues, therefore in the joints
  - Can lead to osteoarthritis
  - Can lead to pelvic floor dysfunction, hip, pelvic or low back pain
- Stabilize and strengthen around the joints
- Pay attention to asymmetries



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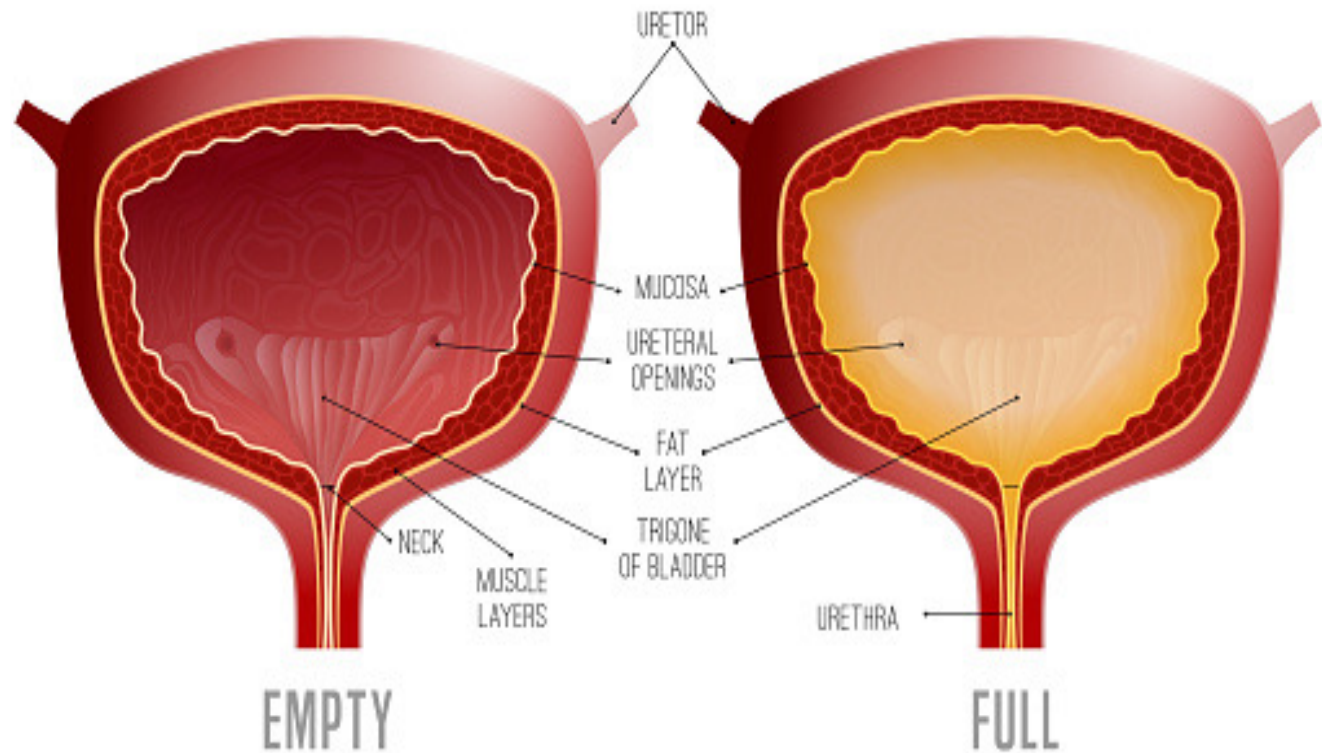
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# Urinary Urgency and Frequency

- ▶ Bladder norms:
  - ▶ Drinking about  $\frac{1}{2}$  body weight in ounces of water/day
  - ▶ Urinating about 8x/day or every 2-4 hours
  - ▶ Getting up 0-1x/night after menopause
  - ▶ Feeling an urge, then being able to wait awhile before urinating, getting to toilet without leakage or fear of leakage

# HUMAN BLADDER ANATOMY



# What to do



Reducing bladder irritants

Pelvic floor normalization at rest

Bladder retraining and urge deferment \*



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# Urinary Leakage

- Urge Incontinence

- Leakage with urge to urinate

- When the muscle around the bladder squeezes harder than the pelvic floor muscles can counter

- Stress Incontinence

- Leakage with exercise, coughing, other movements

- Mixed Incontinence

# What to do



Bladder retraining and urge deferment

Pelvic floor strengthening and coordination-  
-yoga

Core and hip strengthening—yoga

Balance activates ankles and PFM—yoga

"the knack" \*

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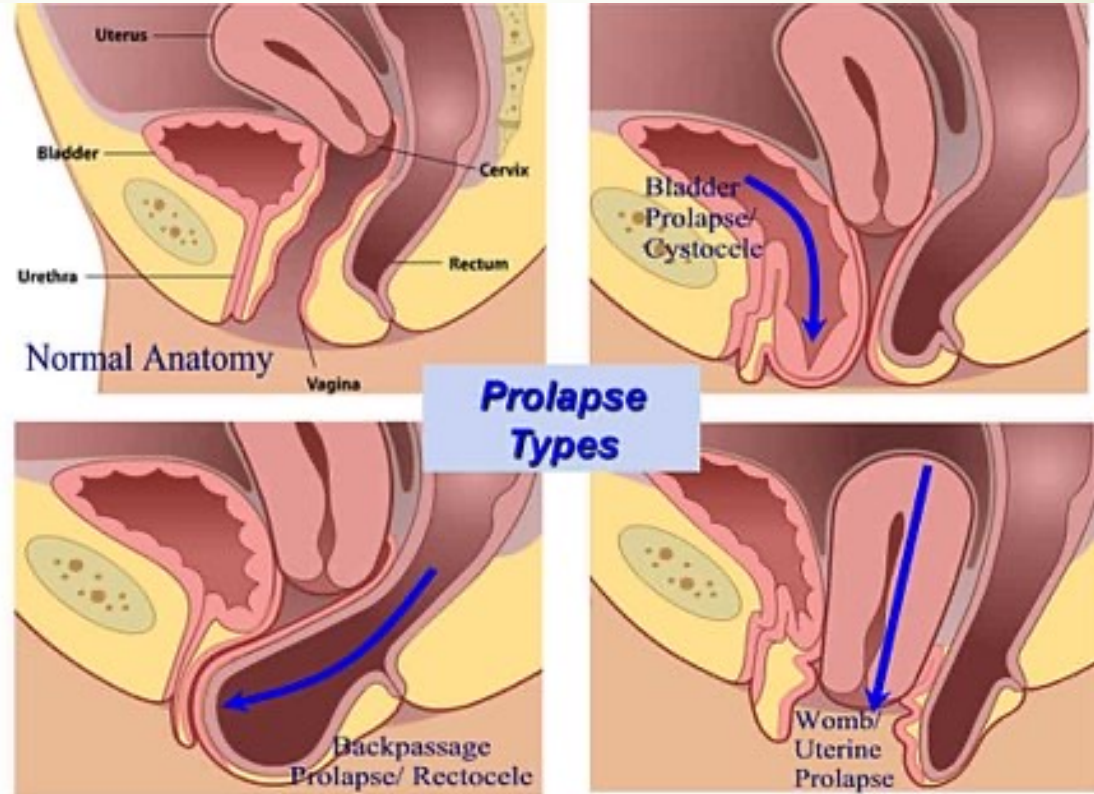
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# Prolapse



# What to do



Pelvic floor muscle strengthening  
(with or without a pessary)

"Hypopressives"-VINIYOGA!

Strengthen deep abs and hips

Decrease intra-abdominal  
pressure (habit changes)



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# Constipation and Fecal Incontinence

- Constipation:

- common with insufficient fiber, hypermobility, pain medication
- commonly associated with diarrhea

- Fecal incontinence

- Fecal staining or full loss of bowels
- Worse with diarrhea
  - Harder for pelvic floor to hold it back

# What to do

Pelvic floor muscle coordination and strengthening

Education: gastrocolic reflex, toileting positioning, scheduled voiding

Bowel massage, apanasana, a quick belly dance

Possible referral to nutritionist



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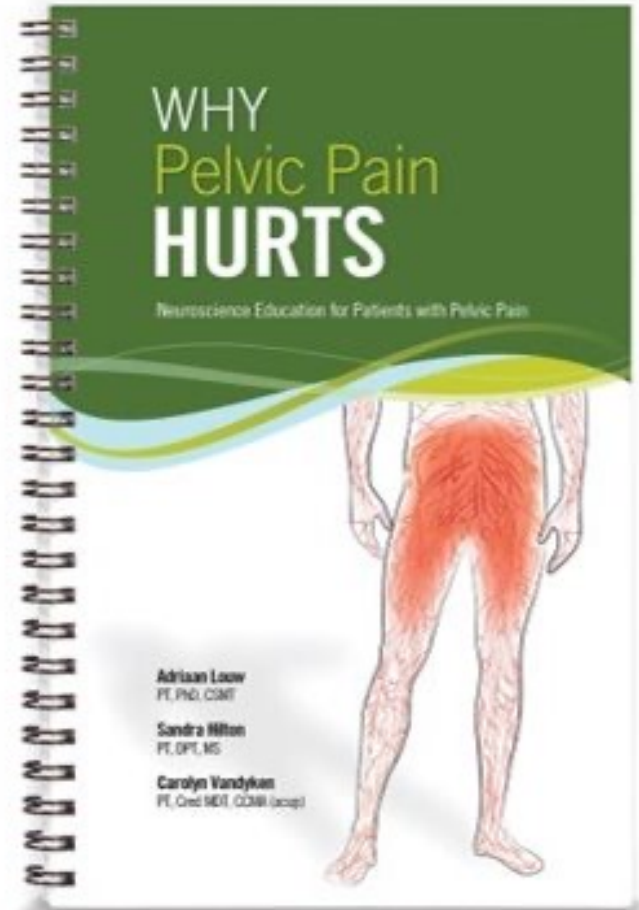
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# Pelvic Pain and Painful Intercourse

- Hypertonic pelvic floor muscles
- Can occur to any gender
- May cause
  - pain with arousal and/or orgasm, painful penetration, difficulties emptying bladder or bowels
- Caused by
  - trauma, menopause, weak deep abdominals, shallow breathing, stress, low back pain



# Side-Note: Libido

- Pelvic pain often decreases one's desire for sex
- Why?
  - Some things turn on your desire for sex
  - Other things turn off your desire
    - Pain and fear of pain
    - Stress
    - Loss of/change to body parts that used to imply sexiness or sex
  - Blood flow—through coordination and strength of pelvic floor muscles you can improve spontaneous arousal



# What to do



Simply understanding why you're having pain can decrease your pain

Connecting with your pelvic floor

Decreasing stressors and stress

Vulvar moisturizers and lubrication

Techniques to soften and "open" the muscles (DB)

Manual techniques (pelvic wand and dilators)

Possible referral-mental health or pelvic physical therapy



Q and A

