Pelvic Floor Spasm: Hidden Cause of Chronic Pelvic Pain and Other Pelvic Problems

Did you know that a large number of seemingly diverse female ailments can be traced to one common problem - pelvic floor spasm? Maladies such as pelvic pain or genital pain, pain with sex, bladder control problems, and bowel dysfunction are often related to over-tense pelvic floor muscles, and the sufferer is unaware of this being the root cause of her problems. Millions of women endure a lifetime of pain and suffering because of this "hidden" disorder. The good news is this problem can be treated without medications, side effects, or surgery. Following is a partial list of conditions often associated with pelvic floor spasm:

Bladder Pain, Painful Bladder Syndrome
Interstitial Cystitis
Chronic Pelvic Pain
Pain with Intercourse (Vaginismus, Vulvodynia)
Burning Pain of External Genitals
Urinary Incontinence
Urinary Frequency
Fecal Incontinence
Constipation or Difficulty Emptying Bowel

What is the Pelvic Floor?

The pelvic floor is a group of muscles that attach to the front, back, and sides of the pelvic bone and sacrum. Like a hammock, these muscles support organs of the pelvis, including the bladder, uterus, and rectum. These muscles also wrap around the urethra, vagina, and rectum. Contracting and relaxing pelvic floor muscles helps to control bowel and bladder function, and these muscles must relax during sexual intercourse. Abnormal tension or spasm of the pelvic floor can cause a multitude of problems.

What is Pelvic Floor Spasm?

Pelvic floor spasm is involuntary contractions of the pelvic floor muscles, and this may occur continuously or intermittently. Because of complex workings in the central nervous system and pelvis, a woman does not usually have awareness that her "pelvic floor" is in spasm. She is only aware of the manifestations: pain in her pelvis, pain in her lower body or genitals, bladder dysfunction (incontinence or frequency/urgency), or bowel dysfunction (constipation, urgency, incontinence). Pelvic floor spasm may be triggered initially by a bladder or vaginal infection, vaginal injury (such as childbirth), pelvic surgery, endometriosis or other inflammatory condition. The problem can also be related to a history of trauma or abuse. Often a certain cause is unknown.

The Perpetual Nature of the Problem

To better understand the nature of this problem, consider the following illustration. Endometriosis is a chronic inflammatory condition that causes pain in the pelvis when uterine lining tissue abnormally exists as implants in the pelvic cavity outside of the uterus (on ovaries or inner pelvic walls, for example). Because of the close proximity of the pelvic floor muscles to the internal pelvic cavity (where the pain originates in this case), nerve pain signals can also be transmitted to the pelvic floor muscles, causing them to contract or spasm. In turn, this spasm may give rise to additional abnormal nerve signals, leading to diverse problems such as those listed above. Removal of the uterus and ovaries (considered curative treatment for endometriosis) takes away the primary insult that causes pain in this example, but the pelvic floor may still be in spasm because of persistent abnormal nerve signals, thus perpetuating pain and dysfunction. Only when pelvic floor spasm is addressed can the problems finally be conquered.

A second illustration shows how even a childhood or early adult condition or event can lead to later problems with pelvic floor

spasm. If, for example, the primary insult is a direct vaginal injury or painful sexual experience, the pelvic floor muscles will contract as a protective mechanism. Later, contraction of the pelvic floor may happen without the trigger, due to a phenomenon called nerve sensitization, which occurs when the central nervous system sends abnormal signals to the pelvic muscles to contract. Over time it becomes impossible to relax or control pelvic floor muscles, and this may manifest as chronic pelvic pain, bladder and/or bowel dysfunction. The pain can extend beyond the vagina and involve any of the organs and muscles in the pelvic area, even extending to the low back, hips, and legs.

It is not unusual for someone with a childhood history of elimination problems (bowel or bladder) to have a lifetime of dysfunction or pain arising from pelvic floor spasm. The trigger may not even be remembered by the adult, but may have set up chronic pelvic floor spasm resulting in pelvic problems later in life.

Since the phenomenon described here is caused by a "confused" nervous system, surgery cannot repair it. Pharmaceuticals can dampen pain or muscle spasm, but they bring a host of side effects, including addiction. No one wants to be dependent on these medications for a lifetime. Fortunately there is effective therapy to re-train the pelvic floor nerves and muscles, so they will work together normally.

How do you know if you have pelvic floor spasm?

Several common conditions are often associated with pelvic floor spasm. Scrolling down, you may find specific symptoms you recognize. These are problems that may point to pelvic floor spasm as a cause or perpetuating factor.

Pain with Intercourse, Vaginismus, and Vulvodynia

Pain with intercourse can often be treated as simply as using a good quality lubricant during intercourse. However, if painful sex is related to pelvic floor spasm, it is more complicated. To have a pleasurable sexual experience, a woman must be able to relax the pelvic floor muscles. This is impossible if one has pelvic floor muscle spasm or pain. Two very different pain conditions can be related to pelvic floor spasm. Vaginismus is involuntary contraction of the vaginal muscles, preventing vaginal penetration or causing pain during intercourse. Vulvodynia is characterized by burning pain of the external genital skin. In this condition, hyperactivity of pain receptors causes even soft touch to feel painful. Pain might be constant, or only present when the area receives pressure or rubbing. It can be debilitating.

Overactive Bladder, Incontinence, and Frequency

Overactive Bladder is characterized by unexpected contractions of the bladder muscle that can lead to leaking, called urge incontinence. There is often a strong need to go to the bathroom but an inability to get there in time. Sufferers often lose urine when they hear running water or put their key in the door. Whether leaking is present or not, overactive bladder often causes urinary frequency throughout the day and during the night.

Bladder Pain, Urethral Pain, and Interstitial Cystitis

Painful Bladder Syndrome, sometimes called Interstitial Cystitis, is a disorder of the bladder characterized by urinary frequency, frequent nighttime voiding, and bladder pain. Sufferers may feel as if they have a constant urinary tract infection, but urine cultures show no infection. The condition is also often associated with pain during intercourse.

Bowel Emptying Problems, Constipation, Urgency

When the pelvic floor has been in chronic spasm, one can eventually lose control of bowel emptying, leading to constipation and/or fecal incontinence. There may be a sense of urgency when it's time to empty the bowel, but difficulty making it to the bathroom in time. Or, there may a problem of inability to relax the pelvic floor to allow a bowel movement. These seem like opposite problems, but they can have the same root cause: pelvic floor spasm.

Pelvic Health Consultation: Evaluation and Treatment for Intimate Physical Issues

Pelvic floor muscle spasm and pain can be improved or eliminated with non-invasive treatments offered at Women's Wellness Center by compassionate professionals who understand the sensitive nature of these issues. Treatment can be life changing for women who suffer these problems.

A <u>Pelvic Health Consultation</u> can help determine if your problem may be caused by pelvic floor spasm. Consultation involves a specialized brief pelvic examination to determine if pelvic floor spasm is present. The doctor will be looking for trigger points of your pain by gently pressing on tissues around the vaginal opening. The pelvic floor muscles themselves can be examined through a vaginal exam, with the doctor applying gentle pressure to detect tight contraction bands, or tenderness of pelvic floor muscles, which are indicators of pelvic floor spasm. The utmost compassion and care is given – there is no need to

fear this examination. Pelvic ultrasound may be performed to determine if anatomic abnormality is contributing to the problem. If significant bladder problems are present, a specialized evaluation may be scheduled to assess bladder function. Once the scope of the problem is understood, a plan of care is recommended.

Therapy is multi-faceted

Depending on your personal and health history, and pelvic floor evaluation, a plan of care will be developed specifically for you. Your plan may include any of the following; each offered here as part of a multi-disciplinary approach.

- Pelvic Floor Therapy with Stimulation (Collectively referred to here as PFT) is the chief strategy that works to relieve problems associated with pelvic floor spasm. This typically involves a course of treatment with weekly office sessions over 8-12 weeks. Some patients, particularly those who have had longstanding pain problems, may need additional sessions to experience full benefit. Often patients will benefit from one or more additional therapies (listed below), to completely address their problems and experience optimal relief and healing. Pelvic Floor Therapy sessions are comprised of the following components:
 - O Pelvic Floor Training Through Monitored Exercise. Sophisticated instrumentation is used to measure muscle contractions and determine if the correct muscle is being contracted during exercises. Using this information, an exercise plan is developed with specific muscle strengthening instruction. This gives you the ability to regain control of your pelvic floor muscles.
 - O Pelvic Floor Stimulation. Mild electrical stimulation of muscles aids in muscle re-education and strengthening for a variety of conditions. Depending on the condition, therapy is aimed to assist in rehabilitating weak pelvic floor muscles for urinary or fecal incontinence. Stimulation may also be used to calm involuntary bladder muscle contraction in the case of overactive bladder. Or, if you suffer pelvic floor dysfunction/pain from muscle spasm, therapy is directed to reduce muscle spasm.
- <u>Bladder Retraining.</u> Once pelvic floor strength and neurologic response is improved, the bladder can be "retrained" to hold a larger volume of urine so bathroom visits are not as frequent during the day or night.
- <u>Dietary Changes.</u> Symptoms of some pelvic floor disorders can be improved with simple dietary modifications. All of our patients receive education on these conservative self-directed strategies.
- <u>Treatment to Relieve Constipation.</u> For any pelvic floor spasm condition, it is important to be certain that constipation is under control, as it can interfere with success of therapy.
- <u>Acupuncture</u>. This ancient method of healing can be used to interrupt and relax muscle spasm. In our center, you can meet with our acupuncture specialist to discuss how this modality might help you.
- <u>Massage Therapy.</u> Regularly scheduled massage for the pelvis or for overall body relaxation can augment your healing program. When prescribed for specific ailments, specialized massage at Women's Wellness Center is often covered by health insurance.
- <u>Medication</u>. There are some effective medications for treating pelvic floor disorders. These are non-addicting medications that work to dampen pathologic neurologic pathways or to reduce muscle spasm. Though side effects can sometimes be problematic, there are cases where medications are helpful as a primary or adjunct treatment.
- <u>Vaginal Estrogen</u>. The vagina and bladder both need estrogen to be happy. For women with low estrogen levels, such as those in mid-life, or younger ones experiencing breast-feeding related hormonal changes, it is often helpful to use a low dose vaginal estrogen treatment. These products localize estrogen to the vagina and adjacent bladder, optimizing the tissue's ability to be healed. Systemic absorption is negligible, so there should be no side effects.
- <u>Counseling</u>. It is not uncommon for sufferers of pelvic floor spasm and pain to have emotional scars from a history of physical, sexual, or psychological trauma, which can interfere with treatment success if not dealt with. To work through these obstacles, professional mental health counseling is sometimes recommended in addition to one or more of the above treatment strategies.

Identify and Address Perpetuating Factors

In addition to the specific treatments noted above, anyone who has pelvic floor spasm must look carefully to see if any habits or disorders may be exacerbating the problem.

<u>Systemic Perpetuating Factors</u>. If not properly addressed, sleep disorders, hypothyroidism, and malnutrition (especially Vitamin D and B complex deficiency) can interfere with treatment of pelvic floor spasm. Our goal is to identify and correct these problems to optimize treatment success.

<u>Mechanical Perpetuating Factors</u>. Occupational factors such as holding urine for long periods, or postural factors such as prolonged sitting, immobility, or long distance driving can exacerbate pelvic floor spasm.

<u>Emotional Perpetuating Factors</u>. Chronic stress or anxiety can interfere with a good treatment outcome. Elimination of stress and anxiety is not always possible, but patients can often modify their lifestyle to reduce these problems, once they understand the impact on their health and wellness.

Periodic Tune Ups

Given focus and attention with treatment over a few weeks of time, pelvic floor spasm problems can be greatly improved or totally eliminated. However, since pelvic floor spasm problems are often longstanding before treatment, they may have a tendency to flare up periodically after therapy. It is sometimes recommended to schedule maintenance therapy at certain intervals, depending on the individual circumstances. This keeps the problem in check so the pelvis stays in good condition.

What We Do Best

At Women's Wellness Center, we focus on integrative, compassionate, and thorough care in a supportive environment, providing education and non-invasive therapies that have shown good success in treating these conditions.

What We Don't Do

We do not prescribe narcotics, sleeping pills, muscle relaxants, or anti-anxiety pills, all of which can be highly addicting, and act to mask symptoms without treating the root cause. We aim for a cure.

Don't Let Embarrassment Stop You From Receiving Help!

Women often suffer in silence with these problems. Take the advice of our patients (their comments below). Don't allow fear and embarrassment to prevent you from getting the help you need. Join those who have regained their confidence and freedom!

Patient Testimonials

A sufferer of pelvic pain and urinary incontinence:

"Before treatment I'd laugh if someone suggested jumping jacks. Now I have zero leakage issues and can exercise all I want!"

A woman who presented with pelvic pain and fecal incontinence

"I had no idea that PFT was even a 'thing!' I am so much better and feel healthier after treatment. Also, it was not as embarrassing as I thought it would be! Dianna (pelvic therapy technician) was a gem! I never felt embarrassed. I would recommend this therapy to others."

A woman who presented with daily bladder leakage:

"PFT was very effective for me. Coming to Women's Wellness Center was the best thing I ever did. Everyone was amazing and answered all of my questions. They are wonderful at listening, which is so rare at most doctors' offices. I honestly feel like they care about me."

A woman who suffered with urinary urgency and frequency:

"Before I came to Women's Wellness Center, I was urinating upwards of 12 times a day and 3 times a night. My primary care doctor didn't listen to my concerns and wrote this off as being symptoms of perimenopause. I sought a second opinion at Women's Wellness and was so relieved to find a doctor who listened to me, was sympathetic, and offered hope that these issues could be treated. I have always felt completely at ease at Women's Wellness Center dealing with a problem that some would consider embarrassing to discuss. Throughout the testing and treatments, everyone at Women's Wellness Center has been very sympathetic, understanding, and extremely patient. I've learned a lot about what I can do to make my symptoms better, and I'm now enjoying life without that constant urge driving me crazy. Dianna (pelvic therapy technician) is awesome. She has been instrumental in making my life much more livable."

To Schedule an Appointment

If you are interested in a consultation to explore whether pelvic floor spasm may be a cause of your pelvic pain or pelvic organ dysfunction, call 573-449-9355 and ask for a Pelvic Health Consultation.