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Can pelvic floor muscle training prevent and treat pelvic organ prolapse?

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Abstract
To date, four randomized controlled trials (RCTs) have evaluated the effect of pelvic floor muscle (PFM) strength training on pelvic organ prolapse (Hagen et al. 2006). Statistically significant improvements in both symptoms and stage of prolapse were shown in these studies. The first full-scale RCT evaluating the effect on grade of prolapse, position of organs and symptoms was conducted by the present author’s group. This study also measured morphological changes using three-dimensional ultrasonography. The results demonstrated statistically significant reductions in the levator hiatus area and muscle length, increased thickness of the PFMs, and lifting of the bladder and rectal ampulla (Brækken et al. 2010a, b). These results are promising, but further high-quality studies are needed in this new area of research. The general principles of PFM strength training are: specific training of the targeted muscle group; three sets of between eight and 12 exercises close to maximum contraction per day, three or four times per week; and conducting the exercises for 6 months. Effective PFM training regimens have involved supervised training once a week in addition to home training on all other days, and have been done after thorough individual instruction and assessment of the patient’s ability to perform a correct contraction. Supervised training can be done in groups or individually.

Keywords: pelvic floor muscles, pelvic organ prolapse, randomized controlled trial, training.

References

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