



**ST. MICHAEL'S  
HOSPITAL**  
Dún Laoghaire

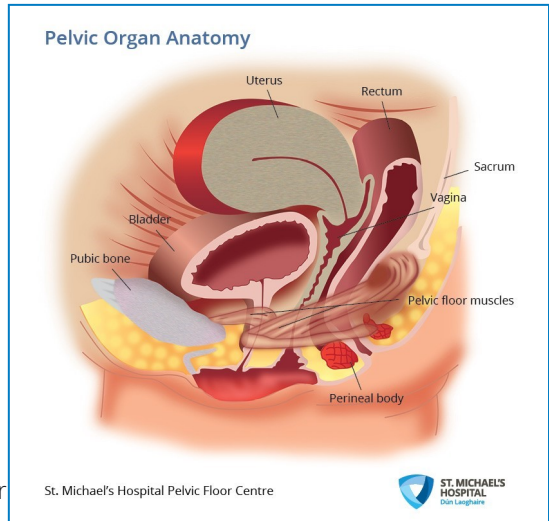
Pelvic Floor Centre

# Introduction to the Pelvic Floor Centre



# Introduction to the Pelvic Floor Centre and pelvic floor dysfunction

The Pelvic Floor Centre is a specialist centre providing a multidisciplinary approach to the management of pelvic floor dysfunction. It was started in 2013 in St. Michael's Hospital, Dun Laoghaire. The team includes a clinical nurse specialist, specialist pelvic health physiotherapists, a peroneal specialist, a consultant urogynaecologist and a consultant colorectal surgeon, along with other support team members.



The pelvic floor muscles are a complex group of muscles, shaped like a hammock, that support the bladder, bowel and in women, the uterus.

This muscular 'floor' helps to hold the organs in place and to maintain continence of bladder and bowel. It plays an important role in sexual function. The pelvic organs are also supported by a network of ligaments, blood vessels and nerves.

Pelvic floor dysfunction is the inability to control the pelvic floor muscles and their function, and can result in any of or a combination of the following symptoms -

- Pelvic Organ Prolapse
- Urinary dysfunction, including stress incontinence, overactive bladder or urge incontinence
- Bowel dysfunctions, such as faecal incontinence or incomplete emptying of a bowel motion
- Sexual dysfunction

Other factors can also contribute to pelvic floor dysfunction and may need the input of a number of specialists, to optimise diagnosis, management and treatment. That is why the team approach in the Pelvic Floor Centre is so important.

## Referral to the Pelvic Floor Centre

Referral to the Pelvic Floor Centre is through your General Practitioner (GP). If you are having one or more of the above symptoms, discuss them with your GP and see if referral to the Pelvic Floor Centre is appropriate or if there are things that you can start to do yourself to manage your symptoms from the information available on this website.

Once your referral has been received, you will receive a phone call from our clinical nurse specialist, who will take a detailed history and guide your next steps, as are appropriate. This may involve aspects of our 'Pelvic Floor Centre education programme', referral to a specialist physiotherapist, further testing or onward referral to the Pelvic Floor Centre consultants, - Ms. Ann Hanly, Consultant Colorectal Surgeon, Dr. Myra Fitzpatrick, Associate Specialist, or Dr. Gerry Agnew, Consultant Urogynaecologist.

Many patients referred can manage their symptoms conservatively with relevant education and specialist physiotherapy. You will only be referred to our team of medical consultants if required.

## **Pelvic floor dysfunction – diagnosing and testing**

The diagnosis of any pelvic floor dysfunction begins with a detailed history of current symptoms, and previous medical and obstetric history. One of the specialist team will conduct a detailed standardised examination of the pelvic floor, if appropriate. This is always completed with the informed consent of the patient and may involve a vaginal and/or rectal examination.

Other specialised tests that are available at the Pelvic Floor Centre are:

- Urodynamics testing
- Endoanal ultrasound
- Colonoscopy
- Defaecating Proctogram
- Anal manometry

- Nerve Conduction tests
- Transit tests

Some of these tests take place in St. Michael's hospital while others are in St. Vincent's University hospital. Waiting times for testing procedures can vary.

## **Treatment options**

As stated, pelvic floor dysfunction can be complex and may require a combination of treatments in order to fully manage the problem. As an active team member, it is vitally important that the patient engages with the education programme, is compliant and motivated to optimise his/ her progress.

Management/ treatment options can include the following —

### **Pelvic Floor Centre education programme**

A comprehensive series of videos advising on how to 'Get started taking Control' of bladder, bowel or prolapse symptoms.

### **Dietary advice**

Dietary recommendations may be given to help manage specific bladder and bowel irritants or to promote a regular bowel.

### **Specialist pelvic health physiotherapy**

Highly trained physiotherapists assess and offer a range of appropriate treatments, including Biofeedback and Real Time Ultrasound.

## Medications

Some medications can help with bladder urgency, bowel control and general pelvic floor health.

## Pessaries

A vaginal pessary is a device inserted into the vagina to support the walls of the vagina. These are used in some patients with mild to moderate pelvic organ prolapse. Specific pessaries are available to help women who leak urine with activity e.g. jogging.

## Anal irrigation

Referral for anal irrigation may be appropriate for those patients with symptoms of incomplete or infrequent bowel emptying.

## Sacral Nerve Stimulation (SNS) or Posterior Tibial Nerve Stimulation (PTNS) Neuromodulation

May be beneficial for bladder and bowel urgency and control.

## Surgery

A range of surgical procedures can be performed by the specialist consultants at the clinic.

Please see section on 'Your next steps' for further information.

## Cancellation policy

If you need to cancel your appointment, please do so with as much advance notice as possible so that we can offer it to another patient. Unfortunately, due to our waiting lists, patients who do not attend for their appointment without a call to cancel are considered a 'NO SHOW' and will be discharged back to their referring doctor.

This leaflet is intended to answer some of the commonly asked questions about the Pelvic Floor Centre and pelvic floor dysfunction. This leaflet should be considered as introductory information only.

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