

## PELVIC FLOOR AWARENESS IN POSTPARTUM WOMEN: A PROSPECTIVE OBSERVATIONAL STUDY.

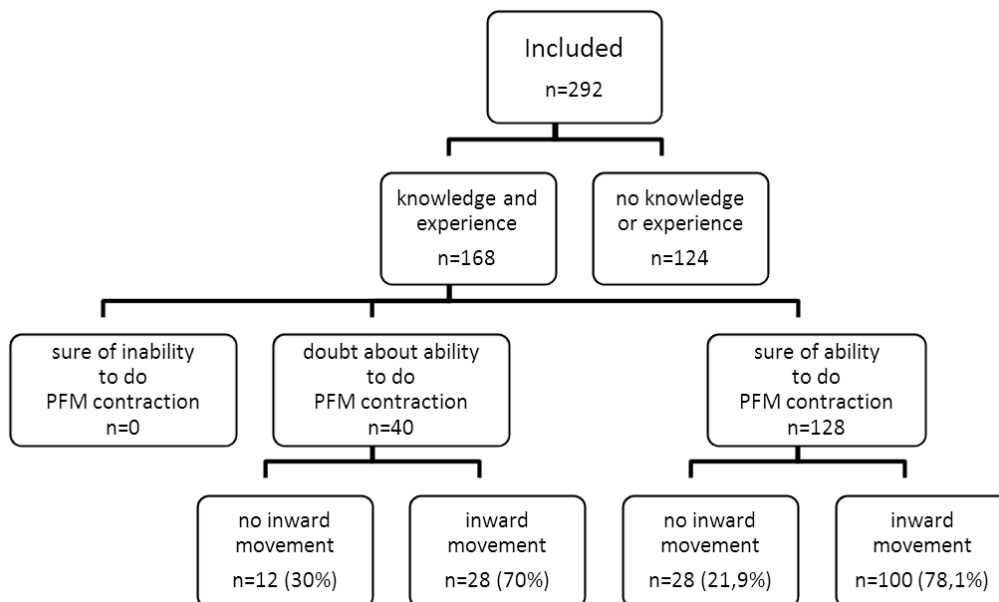
### Hypothesis / aims of study

Pregnancy and delivery are main risk factors for developing pelvic floor muscle (PFM) dysfunction. PFM training has been shown to have prevention power but proper use of PFM is mandatory for a successful outcome. Little is known about pelvic floor awareness in postpartum women. We evaluated this by comparing the visual observation of the pelvic floor contraction by an observer with the subjective impression reported by the women about the contraction they were convinced to have performed correctly before.

### Study design, materials and methods

Local ethics committee approval was obtained prior to start. The study population of 292 women (median age= 30 years old) were drawn from patients who had delivered at our hospital between June 2008 and February 2012. Questionnaire and subsequent observation was performed During the routine first postpartum visit by a specialized physiotherapist (median 2 days  $\pm$  1,4 SE postpartum). Patients were asked about their knowledge of the pelvic floor and previous experience with pelvic floor exercises. All women that answered positive on these two questions (n=128) were asked to evaluate their PFM contraction. Subsequently, they were asked to take the gynaecological position and perform such contraction. Visual observation was done by the observer. An inward movement of the perineum was accepted as sign of pelvic floor contraction.<sup>1</sup> Depending on the eventual movement seen we asked the patients to perform three PFM contractions in a row to facilitate the observation. In 20 patients evaluation was done simultaneously by two independent observers to determine the inter-observers variability ( $\kappa=0.91$ ). All data were analyzed with SPSS version 20.0.

### Results



### Interpretation of results

21,9 % (n= 28/128) did not show any inward movement of the perineum while they were sure of being able to do a contraction of their PFM. In the total population 93 women (31.8%) were not able to perform a pelvic floor contraction on the first postpartum visit by the physiotherapist. This percentage is similar to that found by Bø K et al.<sup>2</sup>

### Concluding message

Our findings show that the feeling of doing a correct PFM contraction is not a good indicator for a true correct performance in at least 1/5 of postpartum women in our study. Therefore it is important to verify the patient's information by doing a short observation before starting any PFM training.

In our study we only used visual observation for the assessment of a contraction for the reason that vaginal palpation is not suitable at this stage postpartum.

### References

1. Messelink B, Benson T, Berghmans B et al. Standardization of Terminology of Pelvic Floor Muscle Function and Dysfunction: Report From the Pelvic Floor Clinical Assessment Group of the International Continence Society. *Neurourology and Urodynamics*; 2005 p. 374-380

2. Bo K, Larsen S, Oseid S et al 1988 Knowledge about and ability to correct pelvic floor muscle exercises in women with urinary stress incontinence. Neurourology and urodynamics 7;261-262

Disclosures

**Funding:** no grant **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** Ethics committee antwerp university hospital **Helsinki:** Yes **Informed Consent:** Yes