

Low Back Pain and Pelvic Floor Dysfunction

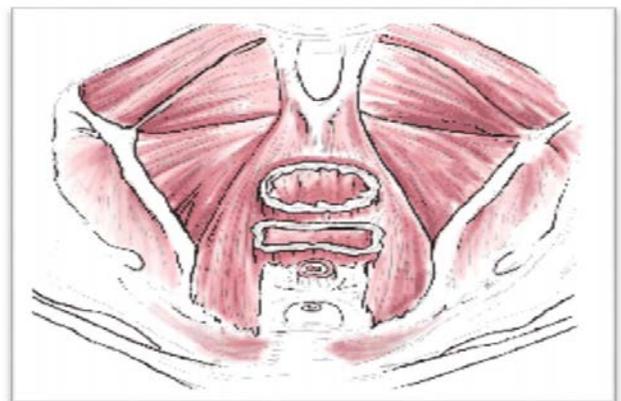
The current research shows:

- If you have low back pain (LBP), the pain may also be coming from your pelvic floor muscles
 - In a study of **200 women with low back pain, 78% had pelvic floor dysfunction (PFD)**
 - In a study of 1,636 patients
 - 63% of women with pelvic girdle pain (PGP) had PFD
 - **57% of women had combined LBP, PGP and PFD**
 - 36% of men with combined PGP and LBP had PFD
- **Low back pain guidelines often do not** take pelvic floor dysfunction into consideration
- **Types of Pelvic Floor Dysfunction**
 - **Tenderness on palpation of the pelvic floor muscles**
 - May also have **strong or uncontrollable urinary urges**
 - **Pelvic floor muscle weakness**
 - **Prolapse of bladder or rectum**
- Pelvic floor dysfunction can either be from **overactive** pelvic floor muscles, or **underactive** (weakened) pelvic floor muscles
 - Typically patients report **more symptoms with an OVERACTIVE** pelvic floor
- **Recent studies are bringing more awareness,** and encouraging doctors to look for PFD as an additional cause of low back pain
- **Questionnaires** are being made to try and **identify pelvic floor dysfunction** without doing an internal pelvic exam

- At this time, an **internal pelvic exam** is still the only way to determine **what TYPE of dysfunction** there is

Central Sensitization

- One thing low back pain and PFD have in common is called **central sensitization**
 - Central sensitization is when your body has an **increased response** to a pain signal, or **decreased ability** to turn off the pain signal
- Pain related to central sensitization **does NOT respond well** to treatments like electrotherapy, and surgery
- Central sensitization is **best treated by addressing lifestyle:** reducing stress, getting quality sleep, being physically active, and eating healthy
- Mindfulness based meditation and cognitive behavioral therapy and certain medication can also help



Female pelvic floor muscles

