



Your guide to

Physiotherapy for Pelvic Pain



Specialist Pelvic Pain Physiotherapists commonly treat:

- Ø Persistent/Chronic pelvic pain
- Ø Endometriosis
- Ø Bladder pain syndrome or interstitial cystitis
- Ø Vulvodynia (vulval pain)
- Ø Dyspareunia (painful sex)
- Ø Vaginismus
- Ø Pudendal neuralgia
- Ø Urinary incontinence
- Ø Faecal incontinence
- Ø Pelvic organ prolapse
- Ø Post-operative pain

Physiotherapy for Pelvic Pain

Chronic or persistent pelvic pain is pain felt anywhere inside or outside the lower abdomen or pelvis that lasts more than 3-6 months. This includes pain felt anywhere between your belly button and your buttocks.

It is common for women living with persistent pelvic pain to experience pain in more than one area of their pelvis. This is sometimes described as “overlapping pain syndromes”, where those living with pelvic pain experience several different painful conditions at once. This can include endometriosis, bladder pain syndrome, vulvodynia, and irritable bowel syndrome.

The cause of pelvic pain symptoms is often multifactorial, with more than one single contributing factor. And this means we need to look at treating it as a process of doing lots of different things to help each factor. If our nervous system is particularly “wound up” or on edge this can be one of these contributing factors. We see changes in our nervous system when we live with persistent pain, which connect these seemingly separate conditions.

Physiotherapy for Pelvic Pain

Our nerves and muscle have a strong response to danger (or perceived danger), and this is one of the reasons that pelvic pain, and overlapping pelvic pain syndromes, often have a strong relationship with our “fight, flight or freeze” response when we feel under threat.

It is for these reasons that treatment for persistent pelvic pain needs to look not just at your pelvis, but at you as a whole person in your environment. Our pain experience is affected by our biological, psychological, and social health. Sometimes it’s best to have a team of experts surrounding you from different medical fields to make sure that you are fully supported in all aspects of your health. Taking the first step is the most important thing in starting you pelvic pain recovery, and is usually by seeing your GP who can provide an initial assessment and arrange any investigations that may be necessary.

International guidelines recommend that the best care for persistent pelvic pain is achieved when healthcare professionals work together across medical specialities. Physiotherapy is recommended in the treatment of pelvic pain, and aims to reduce symptoms of pain, improve function (e.g., bladder, bowel, or sexual function) and improve your quality of life.





An important part of Physiotherapy for persistent pelvic pain, is that the treatment itself should not be painful. Whilst our priority is to always ensure that you are comfortable with any treatment suggested, we also want to avoid provoking that powerful “fight, flight or freeze” response which can cause an uncomfortable cycle of pain and spasm. Your care will be individualised, with your priorities and goals shaping your treatment plan.

To be able to understand what has been happening to you your physiotherapist will ask you questions about when it began, what your symptoms are and how they affect your life, and then specific questions about your bladder and bowel function and sexual health. These questions all allow your physiotherapist to build a picture of how you are feeling, what is happening to your muscles, nerves and organs, and also options for where to begin in changing your symptoms.



Specialist Pelvic Pain Physiotherapists provide individualised assessment and treatments, but recommended treatments include:

- Giving you enough information to fully understand your symptoms and what you can do to influence them.
- Pain reduction strategies.
- Bladder training (this may be either bladder retraining or bladder drill).
- Fluid and diet advice (to support healthy bladder and bowel habits)
- Tips for bowel function (from poo consistency to emptying strategies to reduce pain and straining).
- Tips to support sexual function.
- Pelvic floor muscle exercise therapy (this may include pelvic floor muscle relaxation or coordination exercises).
- Pelvic floor muscle manual therapy (this may be something that you try at home with advice and guidance).
- Desensitization strategies (this may be to reduce the sensitivity of a particular area to touch or pressure)
- Psychologically supportive strategies.
- Graded exposure to previously painful activities.
- Supporting your return to meaningful movement or exercise.
- Building a self-management toolkit to support your self-care and to provide a flare up toolkit.

The information provided here is for information only. We would recommend that you discuss your pelvic pain with a healthcare professional. A Pelvic Pain Specialist Physiotherapist can provide an individualised assessment to discuss a treatment plan tailored to your individual needs.

Further Resources:

Pelvic, Obstetric & Gynaecological Physiotherapy (UK)

https://thepogp.co.uk/patient_information/womens_health/persistent_pelvic_pain.aspx

Pelvic Pain Foundation of Australia (AUS)

<https://www.pelvicpain.org.au/>



THE
PELVIC PAIN
NETWORK

www.pelvicpainnetwork.co.uk