



# Feeling 'not quite right' down below?

Get back to doing what you love

#WithYourPhysio

## What is prolapse?

Pelvic Organ Prolapse, or POP, occurs when the vaginal walls become weak or slip out of place. This can occur when the structures that support the vagina and pelvic organs are strained or overloaded. One or more of the following body parts can move downward into the lower part of the vagina:

- the bladder (front wall)
- the bowel (back wall)
- the cervix (or the top of the vagina if you have had a hysterectomy).

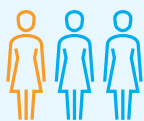
The movement and pressure of these structures downwards causes women to notice symptoms such as a sense of heaviness, dragging or a bulge in the vaginal area. Many women describe having a prolapse as a feeling of 'dropping down'. In some cases women can also present with difficulty emptying their bladder and/or bowel.

## Symptoms and causes

Common symptoms of prolapse may include:

- a bulging sensation in the vagina
- a sensation of pressure or a lump in the vagina
- needing to "splint" – or use your fingers – to help you empty your bladder or bowel
- low back ache

The risk of prolapse increases with advancing age, increasing bodyweight, type of delivery during childbirth and with multiple deliveries. All of these life events may affect the structures that have a role in supporting your pelvic organs. The pelvic organs are supported by your muscles (pelvic floor muscles) and the fascia/ligaments which hold everything together in the pelvis. When these tissues are put under pressure they may stretch, tear, soften or weaken and lose their ability to recoil, similar to a rubber band that has lost its elasticity.



Up to 1 in 3 women experience discomfort



Risk factors: advancing age, increased bodyweight, mode of childbirth delivery



Up to 1 in 3 women who have surgery for prolapse need a second surgery – physio can help improve your recovery



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## How can physio help?

Because prolapse affects each woman differently, it is important that you have an individual assessment and diagnosis. For some women, a strengthening program for their pelvic floor muscles is recommended, including the number of repetitions and how long to hold for. Your pelvic health physiotherapist will teach you how to do the exercises correctly, sometimes using special tools and equipment.

Your physiotherapist will also discuss your lifestyle and activities that may need to be altered to relieve symptoms or prevent your prolapse getting worse, including your current exercise routine, work needs and lifestyle goals. Some women may have a prolapse that has been detected by their GP, but they currently have no symptoms. It can still be helpful to see a pelvic health physiotherapist to help minimize any risk of this condition getting worse.

Managing how you empty your bladder and bowel may be part of your treatment. If your prolapse is making going to the toilet difficult, it is helpful to learn emptying techniques such as positioning, optimising muscle and breathing function, and possible use of aides or equipment.

Some aspects of sexual intercourse may be painful or uncomfortable as a result of prolapse. Pelvic health physiotherapists are experienced in working with sexual issues and can help to improve your experience by providing the best clinical advice and treatment. You should feel comfortable to discuss sexual symptoms with your physiotherapist if necessary.

Prolapse can also be managed by a support pessary. This is a silicone device that is inserted into the vagina to support and hold up the pelvic organs. It is like a bra for your pelvic organs, supporting you where you need it most.

A pessary is a relatively low cost and non-permanent solution to prolapse management, and in the right situation can be a satisfactory option. Some women only need it when they exercise or go to work; others like wearing it most days. Like all prolapse management techniques, it is about what works best for you and your lifestyle.

If surgery is deemed the most appropriate treatment, your physiotherapist can provide pre and post-surgery rehab to support your recovery. Approximately one in three women who have surgery for prolapse will need repeat surgery, so ensuring proper follow up with your pelvic health physiotherapist can reduce your risk factors.

There are many experienced physiotherapists in Australia who prescribe and fit pessaries, or it can be done by other medical professionals like gynaecologists. It is important to note that like any medical device there are some risks involved in using a pessary. You should discuss these with your physiotherapist before deciding.

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## What next?

### GO TO

[choose.physio/find-a-physio](https://www.choose.physio/find-a-physio)

To find your nearest women's, men's and pelvic health physiotherapist.

### CHOOSE

'Women's, Men's and Pelvic Health' option under special interest area in the 'refine your search' drop-down box.

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## Do you live with a chronic health condition?

Physiotherapists help you recover from injury, reduce pain and stiffness, increase mobility and prevent further injury. They listen to your needs to tailor a treatment specific to your condition.

You don't need a doctor's referral to see a physiotherapist, but in many cases physiotherapists, doctors and other health professionals will work together to plan and manage treatment for your specific condition.

Some of the many techniques physiotherapists use to treat and help you overcome your condition include exercise programs to improve mobility and strengthen muscles, joint and/or soft tissue manipulation and mobilisation to reduce pain and stiffness and muscle re-education to improve control.