Promoting pelvic floor safe exercise
Did you know that almost every exercise your client does affects their pelvic floor?

Some exercises can actually harm these muscles, leading to bladder or bowel control problems that can significantly impact their lives. Harmful exercises may not only cause problems to start, but can worsen existing problems.

Bladder or bowel weakness (incontinence) is a common problem, affecting 4.8 million Australians. Women experience these problems more than men, with one in every three women who have ever had a baby reporting some degree of urinary incontinence.
Sixty per cent of people with bladder or bowel control problems don’t seek help from a health professional. The right help can significantly improve, and in many cases cure, these problems. As a fitness professional, you are ideally placed to identify people with, or at risk of, pelvic floor problems, refer them to a continence professional and support them with a pelvic floor safe exercise program. This will help your clients remain active and stay in control.

This resource has been developed for fitness professionals, and explains:

• the role of the pelvic floor
• clients who are at high risk of pelvic floor problems
• the signs and symptoms that could indicate a pelvic floor problem
• exercises that can potentially harm the pelvic floor
• pelvic floor safe exercises, and
• where you and your clients can access additional information and advice.
The pelvic floor

Pelvic floor muscles form the base of the group of muscles referred to as the ‘core’. These muscles work with the transversus abdominis (deep abdominal) and multifidus (deep back) muscles and diaphragm, to stabilise and support the spine as they maintain pressure within the abdomen (diagram 1).

The pelvic floor muscles support the bladder and bowel in men, and the bladder, bowel and uterus in women (diagram 2). They also help maintain bladder and bowel control and play an important role in sexual sensation and function.
‘At risk’ clients
Some people are more at risk of pelvic floor problems than others. People that are considered high risk include:

• pregnant women
• women who have recently, or ever, had a baby
• women who are going through, or have gone through, menopause
• women who have undergone gynaecological surgery such as a hysterectomy
• men who have undergone surgery for prostate cancer, and
• elite athletes such as runners or gymnasts.

"Everyone has a pelvic floor, but not everyone can rely on it."

Other factors that can predispose people to problems include:

• a history of back pain
• previous injury to the pelvic region (e.g. a fall or pelvic radiotherapy)
• ongoing constipation and straining to empty the bowels
• a chronic cough or sneeze, including those linked to asthma, smoking or hayfever
• being overweight, obese or having a body mass index (BMI) over 25, and
• regular heavy lifting (e.g. at work or the gym).

If you have a client with ongoing back, pelvic or abdominal pain, be aware that this pain can affect how their pelvic floor works, and increase their risk of pelvic floor problems.

It is important to consider a pelvic floor safe exercise program for these clients.
Pelvic floor problems

People with pelvic floor problems may experience a range of bladder or bowel symptoms. Common signs or symptoms include:

• accidentally leaking urine when they exercise, play sport, laugh, cough or sneeze
• needing to get to the toilet in a hurry or not making it there in time
• constantly needing to go to the toilet
• finding it difficult to empty their bladder or bowel
• accidentally losing control of their bowel
• accidentally passing wind
• a prolapse
  - in women, this may be felt as a bulge in the vagina or a feeling of heaviness, discomfort, pulling, dragging or dropping
  - in men, this may be felt as a bulge in the rectum or a feeling of needing to use their bowels but not actually needing to go
• pain in their pelvic area
• painful sex, or
• poor sensation or leaking during sex.
Not all bladder or bowel control problems are a result of pelvic floor problems. There are other issues that can cause these problems. Refer your client to a continence professional to determine the cause of their symptoms and to help them get back in control.
Pelvic floor safe exercises

Some exercises place more stress on the pelvic floor than others, especially for people at risk of pelvic floor problems. There are a wide range of pelvic floor safe cardio and resistance exercises that you can recommend for these clients. These help to protect their pelvic floor from excess pressure when they exercise.

As a general rule:

- avoid prescribing high impact or high intensity exercises that place downward pressure on their pelvic floor, and
- instruct them to monitor their pelvic floor whilst exercising to make sure their pelvic floor isn’t dropping or pushing down.

The following are examples of pelvic floor safe cardio and resistance exercises, and exercises to avoid:

### Pelvic floor safe cardio exercises
- walking
- swimming
- seated cycling
- cross trainer (low resistance)
- low intensity water aerobics
- walking in the water, and
- low impact exercise classes.

### Cardio exercises to avoid
- running
- jumping
- star jumps
- skipping
- boxing
- high impact exercise classes that involve jumping and running, and
- sports involving stop-start running and rapid direction change (e.g. tennis, netball, basketball, hockey, touch football).
Pelvic floor safe resistance exercises

- seated exercises (e.g. shoulder press, rows, bicep curls, knee extensions)
- dumbbell triceps extensions (lying or one arm and leg propped on bench)
- dumbbell exercises on a Swiss ball
- shallow and narrow leg squats
- shallow Swiss ball wall squats
- prone leg curl
- shallow forward lunges
- dumbbell row
- pec deck
- supine bench/Swiss ball press
- wall push ups, and
- floor bridge.

Resistance exercises to avoid

- abdominal exercises (e.g. sit ups, curl ups, crunches, double leg lifts, exercises on machines)
- medicine ball rotations
- deep lunges or side lunges
- wide legged or deep squats
- jump squats
- lifting or pressing heavy weights
- lat pull down with heavy weights
- leg press machine with heavy weights
- dead lifts
- high bench step up step down
- exercises with both feet off the ground (e.g. chin ups, tricep dips)
- full push ups, and
- any exercise where there is direct downward pressure on the pelvic floor.

Please note: whilst these exercises are pelvic floor safe, you will also need to consider the number of repetitions, weight lifted, number of sets, length of rest and your client’s fatigue level - which also impact the force on their pelvic floor.
There are also ways to modify a client’s exercise program to better protect their pelvic floor. Simple ways to do this include instructing your client to:

- sit on a Swiss ball to support their pelvic floor while using hand held weights
- use seated equipment with adjustable weights
- use lighter weights
- breathe out with effort (e.g. when they pull, push, lift or lower weights)
- reduce the level of their abdominal muscle exercise programs
- reduce the depth of squats and lunges – only go as deep as they are able to control their pelvic floor
- keep their legs closer together during exercise
- keep a relaxed upright posture during exercise, and
- slow down and focus on what is happening to their pelvic floor muscles when they exercise.

Remember that any client with a pelvic floor problem should be referred to a continence professional to help them get back in control.

“Clients who experience, or are at risk of, pelvic floor problems, shouldn’t stop exercising. Instead, they should be prescribed a pelvic floor safe exercise program.”
Referring your client

If you have a client who experiences, or is at risk of, pelvic floor problems, refer them to:

• their doctor
• a continence professional, or
• the National Continence Helpline on 1800 33 00 66.

Continence professionals include continence and women’s health physiotherapists, pelvic floor physiotherapists or continence nurses. These professionals can support your clients with the assessment, treatment and management of bladder or bowel control problems.

The National Continence Helpline is a free service staffed by a team of continence nurses. The helpline operates from 8am to 8pm AEST and is a great first step for clients who don’t feel comfortable discussing their bladder or bowel control problems.
To find out more visit www.pelvicfloorfirst.org.au or call 1800 33 00 66.

You will find:

- further information about the pelvic floor, including how to identify and exercise these muscles
- useful tips on how to make sure your client’s exercise program is pelvic floor safe
- free brochures for your clients or colleagues
- details of continence professionals, and
- information about CEC and PDP accredited courses on this topic.