Physiotherapy
Perspective

Sarah Wolujewicz
Clinical Service Lead,
Women's & Men's Health Physiotherapy
Aims of physiotherapy

• Physiotherapy helps:
  • people affected by injury, illness or disability
  • restore MOVEMENT
  • restore FUNCTION
  • manage PAIN

(Chartered Society of Physiotherapy, 2017)
Subjective assessment: ‘Claire’

- Similar to musculoskeletal physiotherapy assessment
- History - trigger? when? how changed? previous treatment?
- Pain – aggravating & easing factors?
  2. Coccyx / back pain (fall 6 months ago)
Subjective assessment: ‘Claire’

- Other questions:
  - Bladder & bowel function - NAD
  - Gynaecological history - NAD
  - Obstetric history - 3 children
  - PMH – flashbacks, anxiety
  - Medications
  - Social history
  - Attitude & beliefs
Objective assessment: ‘Claire’

Vaginal examination - **LOOK**
- breathing pattern
- pelvic floor muscle (PFM) function - contraction & full relaxation
- Levator hiatus
- Skin changes

“Just get on with the examination”
Objective assessment:
‘Claire’

- Vaginal examination – **FEEL**
- External palpation - superficial PFM
- Internal palpation - deep PFM
  - Tender 4-7 o’clock in vestibule
  - Tender PFM bilaterally, hard
  - Unable to contract or relax
Objective assessment: ‘Claire’

- Musculoskeletal examination - lumbar spine, hip, sacroiliac joint, coccyx
- Abdominal examination
- Fascial assessment – thighs, abdomen
- Beighton score (hypermobility)
Analysis: ‘Claire’

• PFM overactivity +/- coccyx dysfunction
• Likely central sensitisation
Claire’s Goal

“To have sex with no pain”

Make it SMART (SPECIFIC, MEASURABLE, ACHIEVEABLE, REALISTIC, TIMED)
Physiotherapy Treatment: ‘Claire’

- Where to start? - physical vs psychological?

Guarding → Muscle spasm
Reduced arousal
Pain
Avoidance
Reduced desire
Physiotherapy Treatment: ‘Claire’

- **Educate & empower** – pain, ‘normal’
  sex, pleasure, self exploration
- General & PFM relaxation –
  visualisation, mindfulness, hobbies,
  lifestyle
- Breathing techniques
- Self massage (using hands, ball,
  partner) / desensitisation
  - External
  - Internal
Treatment: ‘Claire’

- PFM stretches – local / global
- Lubricant advice
- Vaginal trainers / sex toys
- Acupuncture?
- Musculoskeletal involvement?
  - manual therapy
  - exercises - stretching / strengthening
  - address hypermobility
Physiotherapy: Does it work?

- Research limited
- Clinical data collection (August 2016 – present)
  - 124 patients
  - 52 completed treatment
- Subjective rate of improvement (%):
  - Average = 69%
  - Mode = 50%
  - Min = 0%
  - Max = 100%
Physiotherapy: Does it work?

- Other outcome measures (17 patients):
  - VAS – 53% improved
  - Vulvodynia Pain Score – 82% improved
- Number of appointments = average 4
- Duration of physiotherapy = average 31 weeks
Physiotherapy: Does it work?

YES
Take home message

"Think physiotherapy"

Refer to your local women's health physiotherapy service

Chartered Society of Physiotherapy - http://www.csp.org.uk/

Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) - http://pogp.csp.org.uk/
Thank you

Email - physio4women@gmail.com