

If you have any queries or concerns please contact the
physiotherapist on: **0191 2825484**
Monday – Friday 9.00am – 4.30pm

The Newcastle upon Tyne Hospitals 
NHS Foundation Trust

Exercise and Advice for Vaginal Prolapse

Patient Information Leaflet

**Therapy Services
Physiotherapy**

Compiled by: Julie Ellis and Emma Hargreaves
Physiotherapists

Revised: January 2013
Review Date: January 2016

This booklet will provide you with information and advice about vaginal prolapse which may help you in understanding the causes, symptoms and the types of prolapse. This booklet will also provide you with information on the non surgical management of vaginal prolapse and advice on how to ease your symptoms

What is a vaginal prolapse?

Vaginal prolapse is a common condition which although is not life threatening can cause discomfort and distress. Vaginal prolapse occurs when the pelvic floor muscles become weak or damaged and can no longer fully support the pelvic organs. There are different types of prolapse that occur and the three most common types are detailed later in this booklet.

Correct position for opening your bowels

Step one



Knees higher than hips

Step two



Lean forwards and put elbows on your knees

Step three



Bulge out your abdomen
Straighten your spine

Correct position



knees higher than hips
Lean forwards and put elbows on your knees
Bulge out your abdomen
Straighten your spine

General advice for vaginal prolapse

- Think about how you spend your day and what activities maybe making your symptoms worse. Try to minimise these activities and assess if this improves your symptoms.
- Try to maintain a good posture with your spine and neck long, shoulders relaxed and the pelvic floor lifted gently drawing your navel to your spine
- Avoid standing or walking for long periods and try to rest by leaning against a wall and if you have been busy try to rest with your feet up.
- Prevent constipation by increasing your fluids and eating a healthy, high fibre diet. It is important to avoid straining when passing a stool (see diagram on back page for correct position).
- Avoid heavy lifting at work or at home. If you do lift then always tighten you pelvic floor muscles.
- Avoid running, aerobics, and strong abdominal exercises – try swimming, yoga or pilates instead.
- Avoid squatting for example if gardening use a kneeling pad.
- Try to lose weight if you are overweight.

If after six months your prolapse symptoms have not improved then we would refer you back to the consultant who may insert a ring pessary to support the prolapse or advise that surgery may be the best option.

Causes of vaginal prolapse:

- Pregnancy and childbirth.
- Ageing and the menopause.
- Obesity.
- Chronic cough
- Chronic constipation.
- Repeated heavy lifting.
- Previous pelvic surgery.

Possible symptoms of vaginal prolapse:

Women may feel or see a bulge in the vagina which gives sensations of heaviness; discomfort; pressure; dragging or pain in the muscles around your vagina. For some it may be accompanied by low back pain that eases when lay down.

The symptoms may worsen if you have been very active; standing or walking for long periods of time or lifting heavy objects.

Some women notice that they have difficulty passing a stool or bladder symptoms such as stress incontinence, urinary frequency or urgency. Or may feel they have pain or lack of sensation during sexual intercourse.

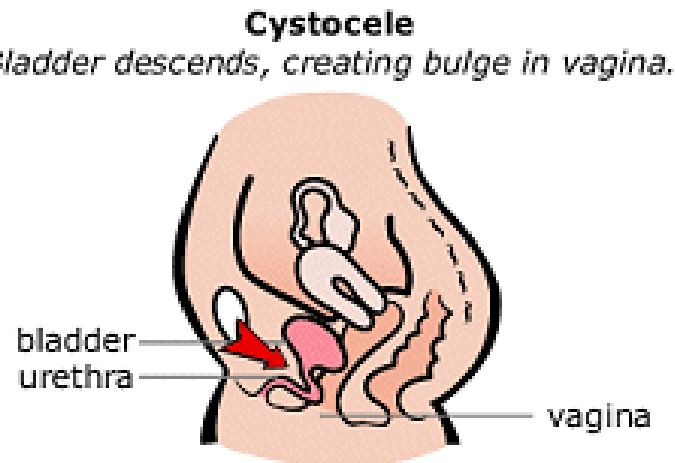
Types of prolapse

There are different types of prolapse that can occur. These are divided into three categories according to the part of the vagina they affect, front wall, back wall, or top of the vagina. In addition, each type can be classified as mild, moderate or severe.

It is not uncommon to have more than one type of prolapse. The three most common types of vaginal prolapse are:

Cystocele:

This occurs when the bladder collapses creating a bulge in the front of the vagina.

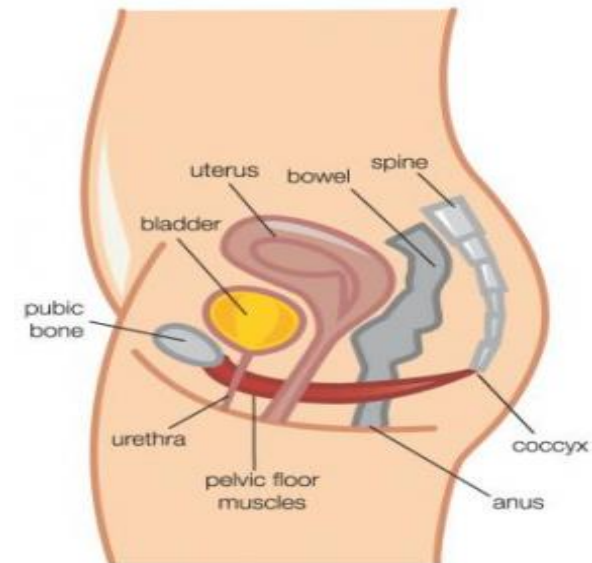


Treatment of Vaginal Prolapse:

Physiotherapists can teach you pelvic floor and abdominal exercises. We offer advice on lifestyle which could help reduce or relieve your symptoms.

Where are pelvic floor muscles?

Pelvic floor muscles are the supportive muscles that stretch from your pubic bone at the front of your pelvis to the base of your spine at the back. The pelvic floor muscles help to hold your bladder, womb and bowel in place, and to close your bladder outlet and back passage.



When your pelvic floor muscles are well toned they stop leakage of urine from your bladder and wind or faeces from the bowel and also support the pelvic organs. When you pass urine or stools the pelvic floor muscles relax and afterwards they tighten to restore control. They actively squeeze when you laugh or cough to avoid leaking.

How do I do pelvic floor exercises?

It is not always easy to locate your pelvic floor muscles. Exercising them should not show at all 'on the outside'. It is important that you should not pull in your tummy, tighten your buttocks excessively, or hold your breath.

Either sit comfortably upright with your feet touching the floor, legs slightly apart, or lie down with your knees bent and feet on the bed.

Tighten and pull up the muscles around your anus and vagina. This squeezes the muscle upwards and inwards. Imagine that you are trying to stop yourself from passing wind, and at the same time stopping your flow of urine mid-stream.

Your pelvic floor muscles need to have endurance so tighten your pelvic floor muscles hold tight for ten seconds, rest then repeat the exercise, up to ten times.

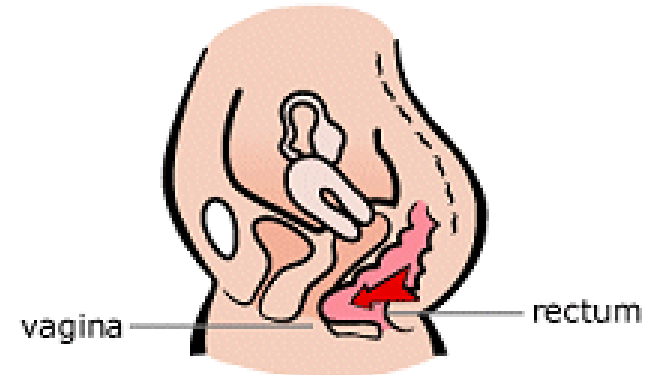
It is also important that your pelvic floor muscles are able to react quickly when you cough, sneeze or laugh so tighten your pelvic floor muscles as before, as quickly as you can, hold the contraction for one second before relaxing. Repeat this exercise up to ten times.

Repeat both of these exercises four times per day for six months, then once a day for the rest of your life. This will enable your pelvic floor to get stronger. It is easy to forget to do all your pelvic floor exercises so try and think of 'triggers' throughout the day to remind you, for example, watching your favourite television programme, boiling the kettle or use an alarm reminder on your phone. When you are confident that you are doing your exercises correctly you will be able to do them whilst walking, standing, lying or sitting.

Rectocele:

This occurs when the end of the large bowel, the rectum, bulges into the back wall of the vagina.

Rectocele
Rectum bulges into vagina.



Uterine Prolapse:

This occurs when the womb, called the uterus, drops down into the vagina.

Uterine Prolapse
Uterus descends into the vagina.

