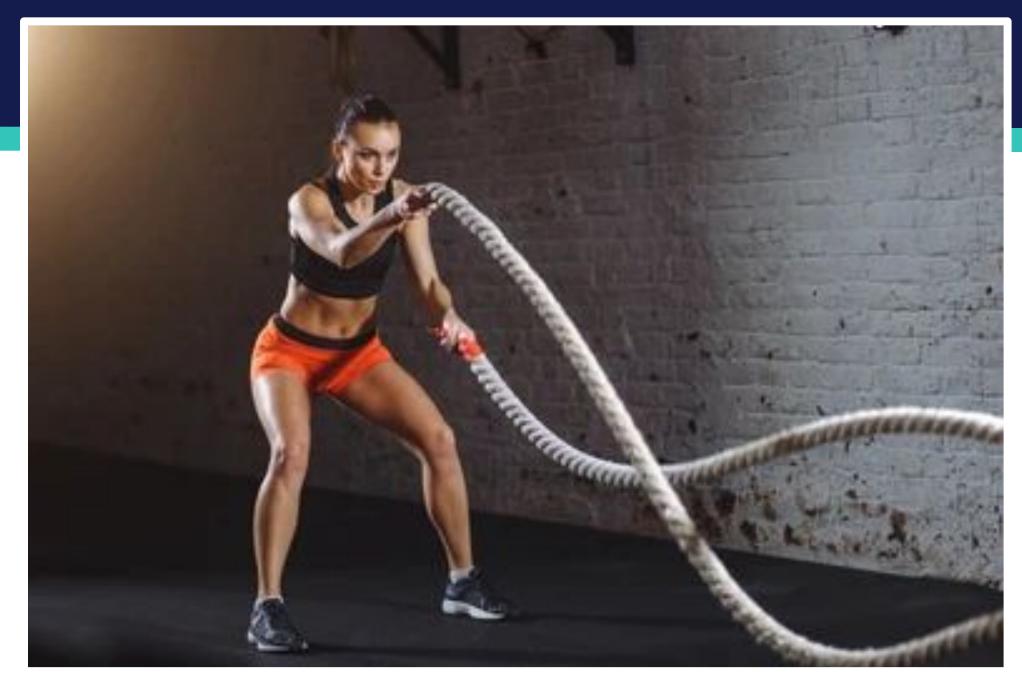
# FEMALE ATHLETES: Your Pelvic Floor for a Strong Core

Aly Walford, MScPT October 2022

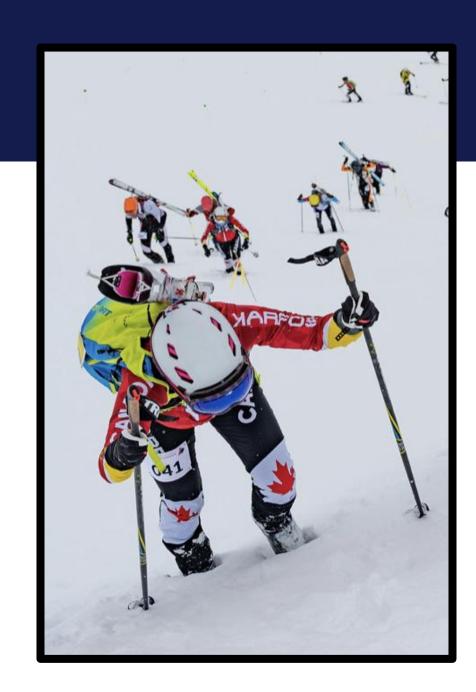






#### Introduction

- Physiotherapist at Banff Sport Medicine
- Member of the Canadian National Ski Mountaineering Team



- Pelvic Health Courses:
  - UroSante Levels 1 & 2 (Treating Female Urinary Incontinence & Dyspareunia)
  - Piston Science with Julie Wiebe
  - Treating & Training the Female Athlete / Runner with Julie Wiebe
  - Downtraining for Pelvic PTs with Nicole Cozean
  - Pelvic PT Essentials with Nicole Cozean





#### Outline

- Anatomy
- Alignment
- Breathing
- Common Pelvic Health Complaints With Exercise
- Interesting Research
- Pelvic Health Physio
- Running & Impact
- Key Points





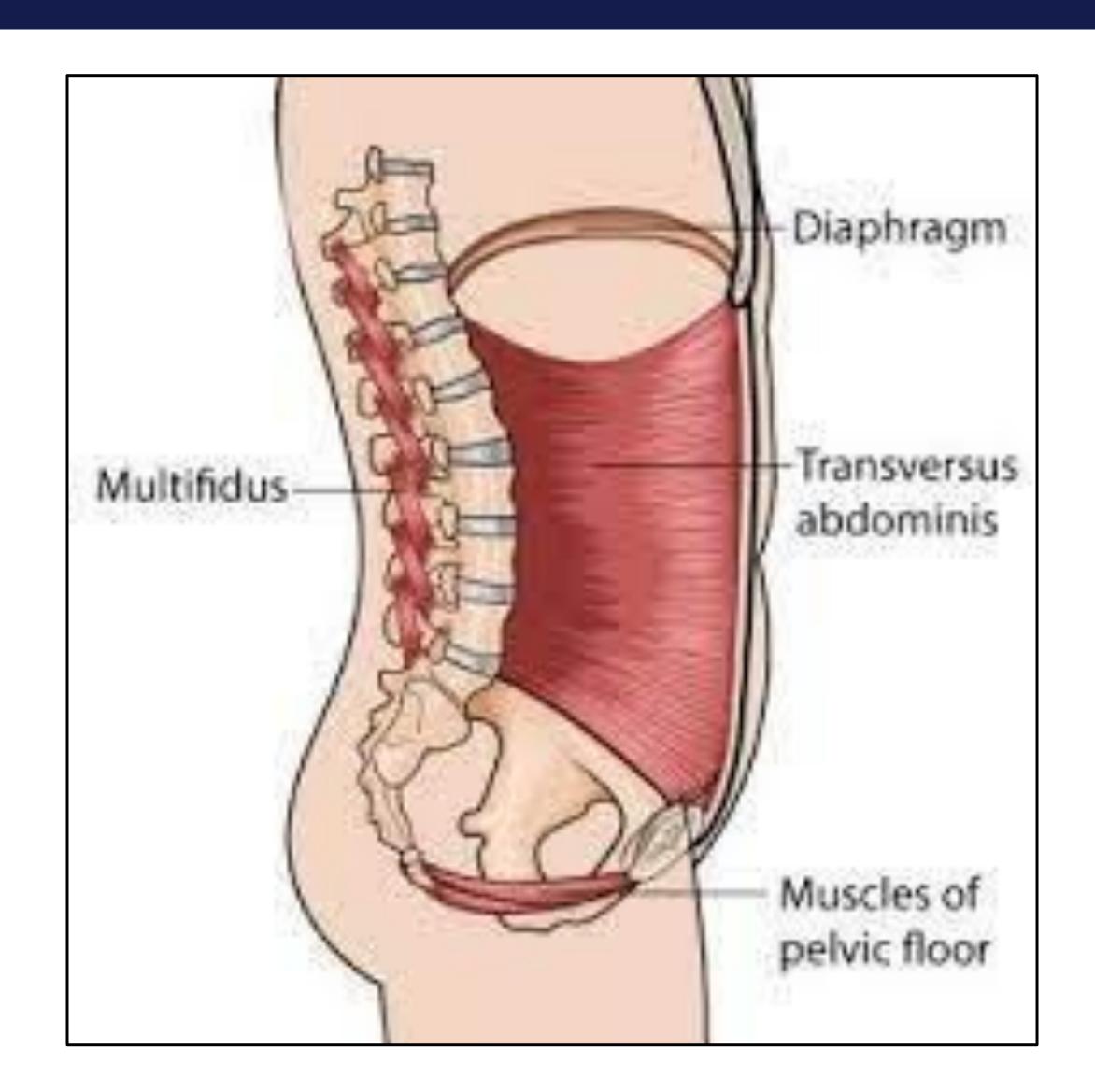
#### Goal

- Leave today with more awareness of:
  - 1. Your pelvic floor muscles and how they interact with the rest of your deep "inner core"
  - 2. How your alignment may be affecting how well you can feel (1)
  - 3. How you might use (1) & (2) during exercise



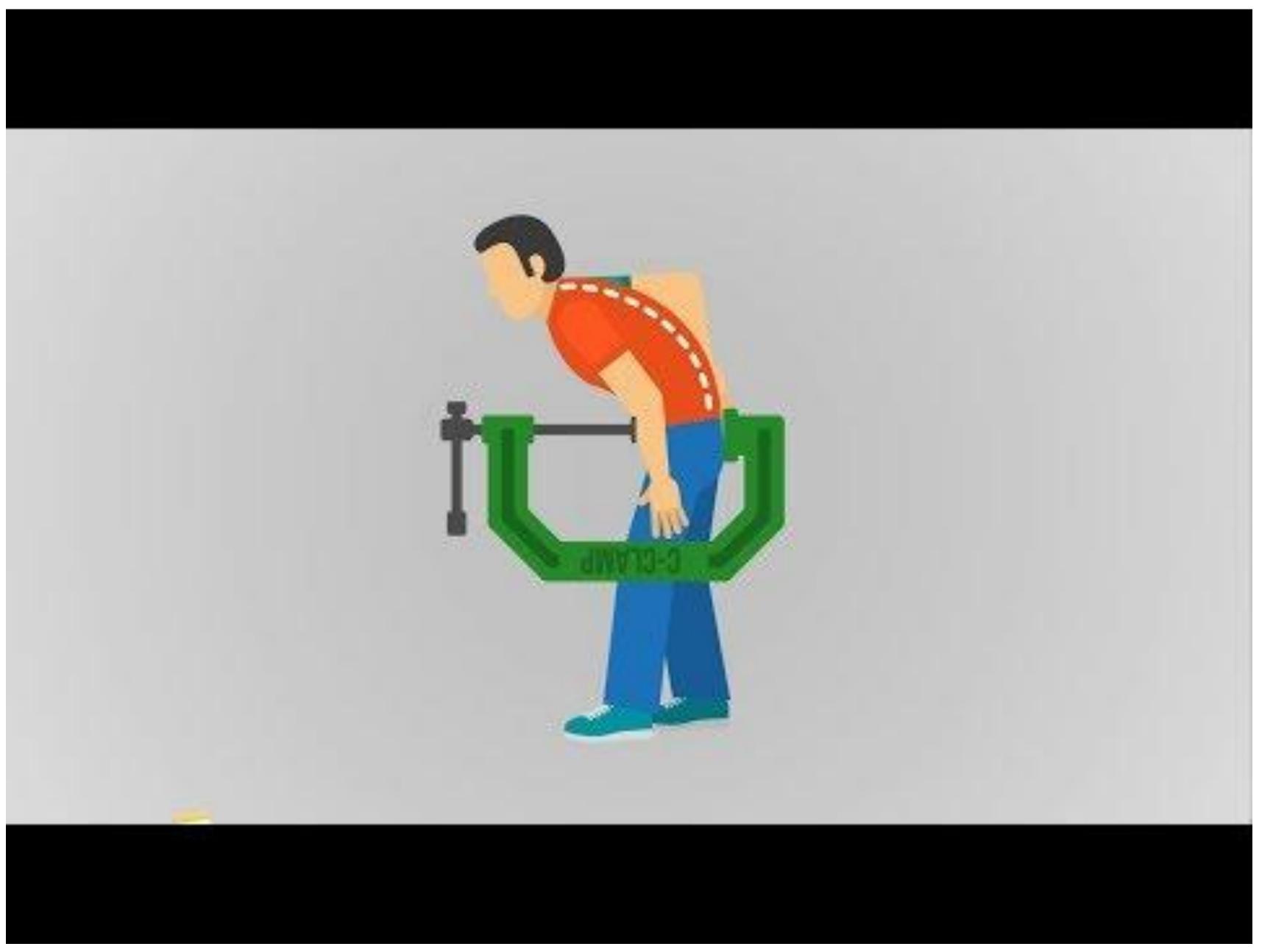


# Anatomy













# Alignment

- Feel for weight distribution, PF, breath
- Feel TA, feel PF
- Ski Jump
- Ski Jump + feel again

Alignment optimizes teamwork!







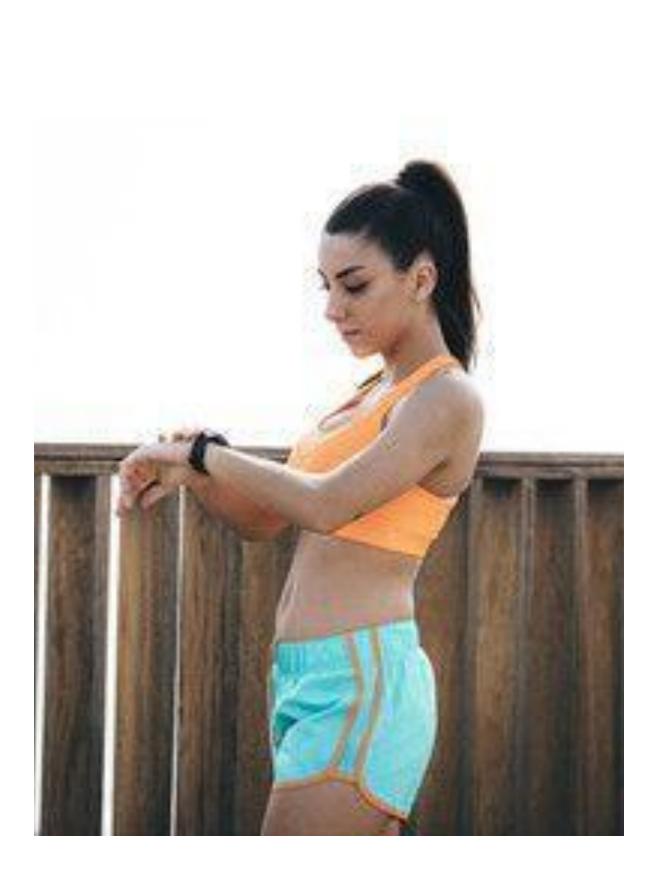
## Breathing

- How alignment affects breathing
  - Slump / Bell rung down
  - Military / Bell rung up
- Gripping in upper abs
- Blow before you go
- Breath holding (when is it a helpful strategy & how?)





# Alignment













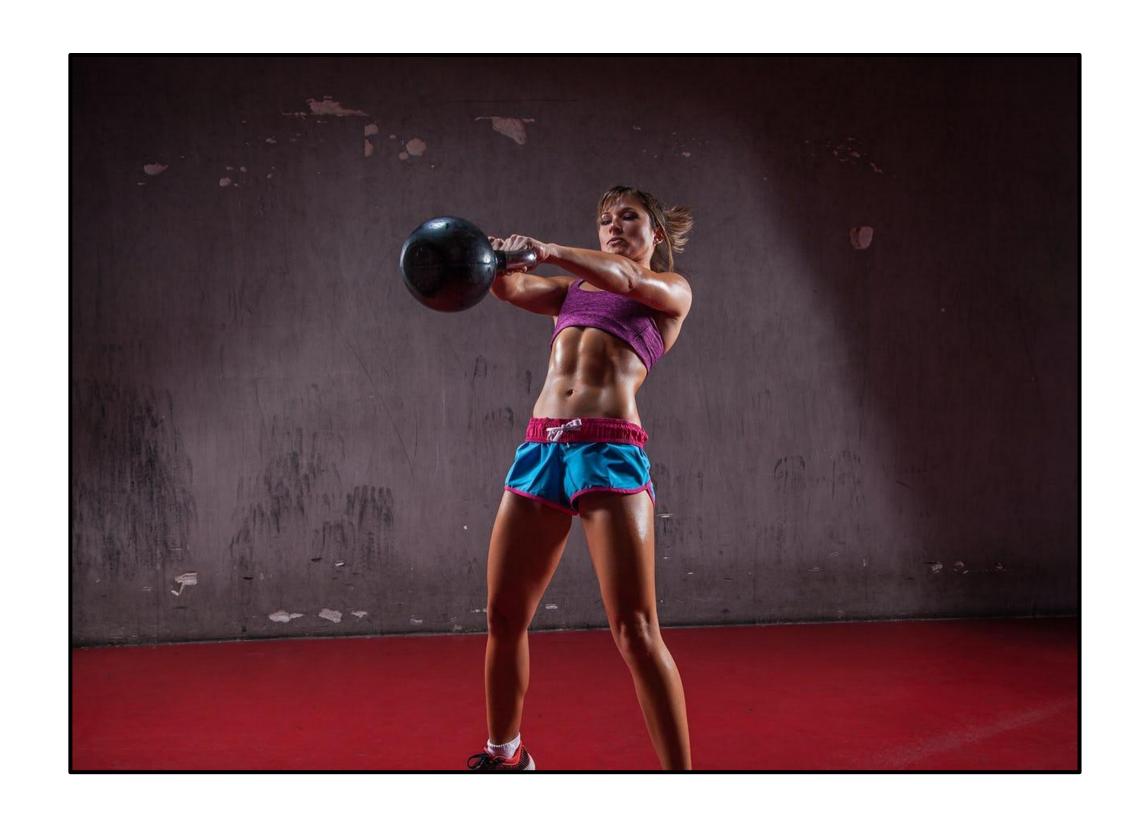


#### Functional Movements

- Stand on one leg
- Squat on both legs
- Squat on one leg
- Hop on both legs
- Hop on one leg







#### Blow Before You Go!

#### Alignment in Action

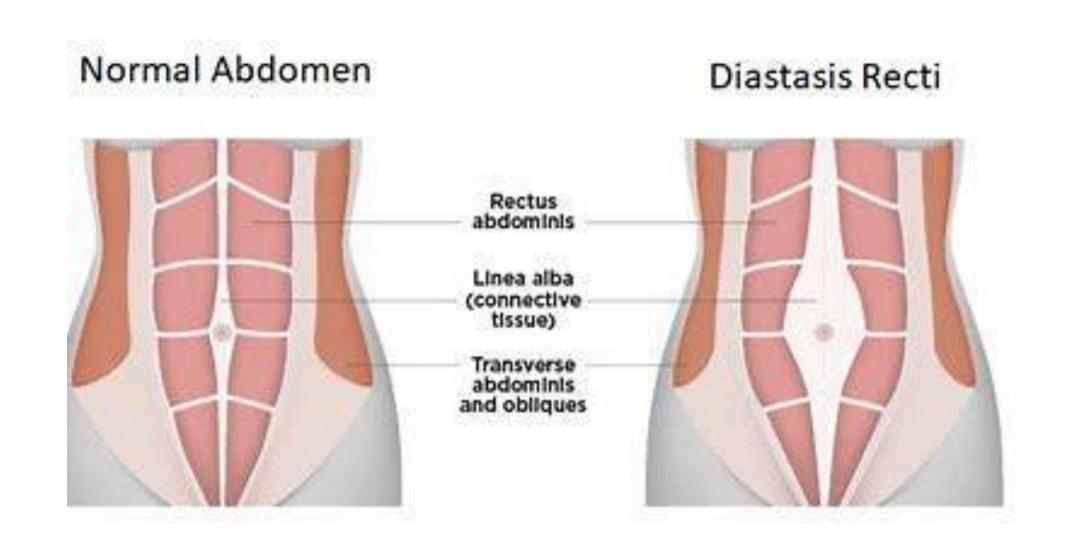


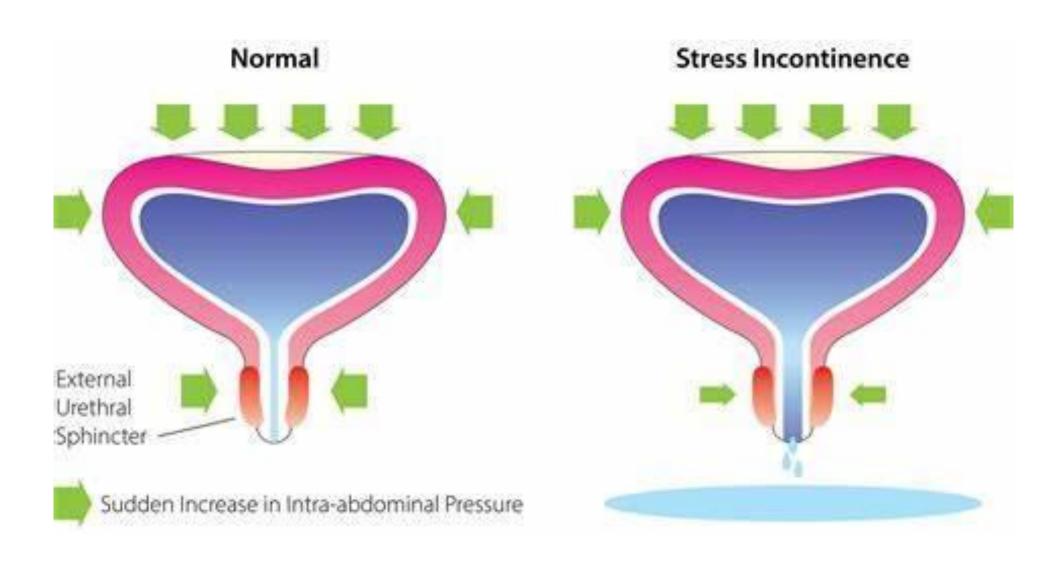




# Common Pelvic Health Complaints

- Leaking (Stress Urinary Incontinence SUI)
- "Mommy Tummy" (Diastasis Rectus Abdominus DRA)



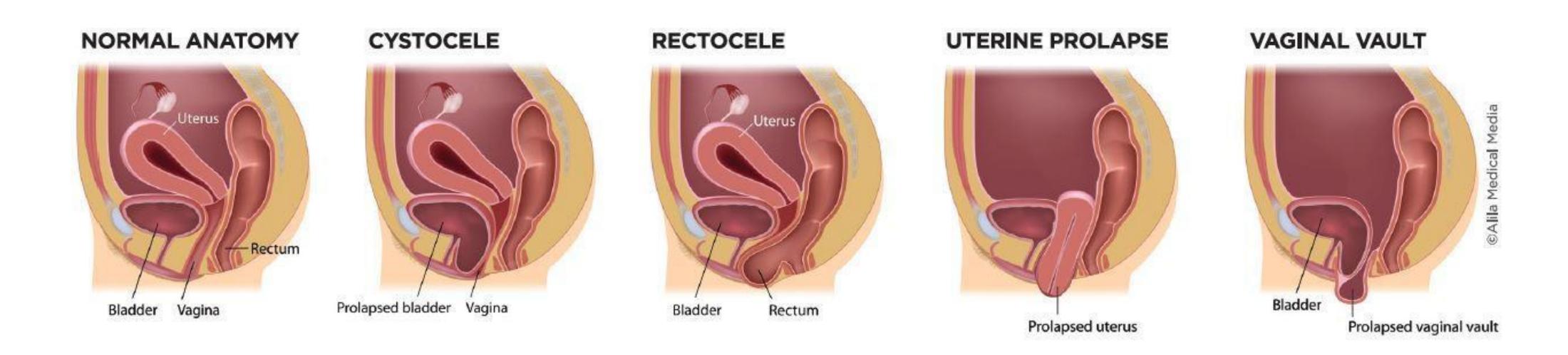






# Common Pelvic Health Complaints

Pelvic Organ Prolapse (POP)







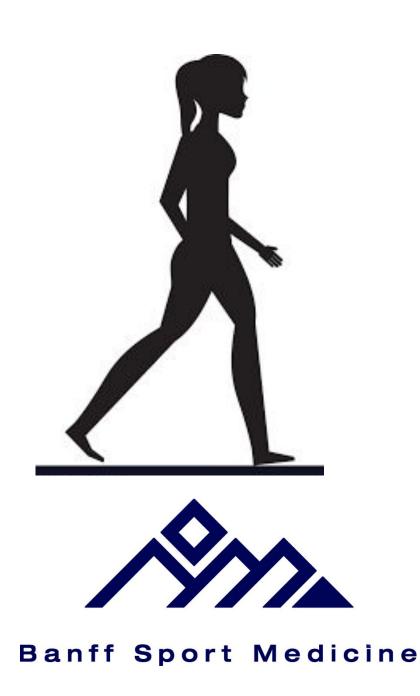
# Interesting Research

- Smith et al. (2007 & 2008)
  - Catch a 1kg bucket of water
  - Incontinent had > PF & EO than continent
  - Continent = balanced, efficient, and task appropriate response
  - Second study on CoP displacement while balancing



- Gait @ 1st urge, 2nd urge, post void
- Dec walking speed and stride length @ 2nd urge to void
- Continence = pelvic floor's priority, not as available to help w/ demands of stability







## Pelvic Health Physio

- Alignment, breathing, functional movements (trampoline metaphor)
- Internal assessment of pelvic floor muscles
  - Decreased tension/tone => piston, ms slings
  - Increased tension/tone => downtraining & integrating above







#### Return to Running & Impact Post-Partum

- Goom et al. (2019)
  - Minimum 3-6 months post-partum & must pass criteria for good control
  - Recovery of PF muscles + associated connective tissue/nerves maximized at
     4-6mo post-partum
  - Start small 1-2min easy jog mixed w/ walking
  - If symptoms video analysis / physio





#### Impact

- Symptom threshold current & goal
- GRFs
- Graded Exposure
- Progressions:
  - Side step, half jack, jumping jack (slow, fast, narrow, wide)
  - Plank step outs, plank jacks, progressing incline to vertical body position
  - Acceleration/deceleration/change of direction





# Signs to Watch Out For

- Pain
- Leaking
- Heaviness or bulging in pelvic area
- Doming or tenting in abdomen





#### Key Takeaways

- Pelvic floor muscles should work with your diaphragm (ie breathing)
  - Inhale-open-relax & Exhale-close-gently lift up & in
- Think dynamic stability over stiff stability
- Think "Blow Before You Go" (unless lifting >80% RM)
- Think "ski jump" or neutral alignment to optimize above
- Practice!





#### References

Booth, J., Paul, L., Rafferty, D., & MacInnes, C. (2013). The relationship between urinary bladder control and gait in women. *Neurourology and urodynamics*, 32(1), 43-47.

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## Thank you

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Questions??



