



## Signs indicating a dysfunction of the pelvic floor:

trouble stopping the urine flow /leakage of urine while making efforts (coughing, sneezing, lifting weights) or urgently / with difficulty and / or pain during sexual intercourse / feeling of weight in the pelvis/ difficulty holding intestinal gas or stool / difficulty in defecation / Constipation

## Clinical manifestations of the damage:

urinary incontinence / overactive bladder / pelvic organ prolapse / fecal incontinence / sexual dysfunction / perineal pain syndromes / dyssynergia abdominopelvic

## You can do a specific exercise:

The re-education of the pelvic floor or kinesitherapy Pelvis-perineal (CPP) is a therapy that aims to reduce the symptoms reported by the patient thereby improving the quality of living.



## What do you do during the session?

Each meeting can last about 60 minutes, divided into two parts: the first part where you are going to execute the active physiotherapy exercises with the therapist, the second part is instrumental and you will use two methods: 1) biofeedback (re-education technique physiological activities, effettuata through visual or acoustic signals), 2) Functional Electrical stimulation (of muscle stimulation technique passively through an intra-vaginal probe connected to a stimulator.

### Who to contact and where:

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## WHAT IS PELVIC FLOOR?



# Where is it?

The pelvic floor is the set of muscles and connective tissue that closes down the abdominal cavity and corresponds to the genito-urinary anal. (Fig.1)

Under physiological conditions it helps to keep in place the pelvic organs (uterus, vagina, bladder, urethra and rectum) supporting them both in their daily activities (walk, jump, lift bags) and in response to sudden changes in intra-abdominal pressure (sneezing, coughing) and intervenes in their proper operation.

When these functions are compromised, dysfunctions occur .

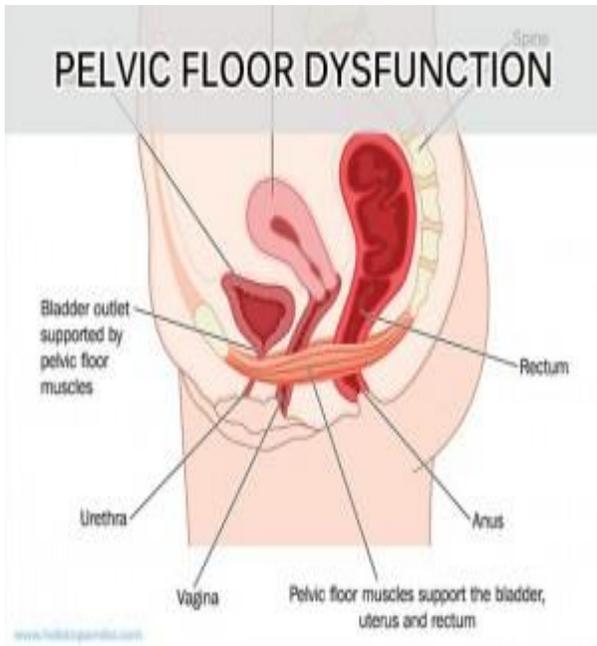


Fig.1

# What are its functions?

## ❖ continence and urination in

urinary function: urinary function is performed by the upper urinary tract (kidneys and ureters) and the lower tract (bladder and urethra surrounded by the detrusor muscle). (Fig.2)

The pelvic floor affect the second.

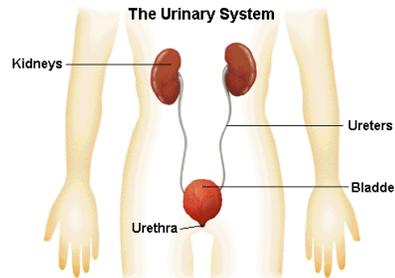


Fig.2

## ❖ continence and defecation in

the defecation act: the rectum is the last part of the intestine, the seat of the rectal ampulla which continues towards the end with the anal canal with which at rest forms an angle of about 90 ° surrounded by muscles that go to form the involuntary internal anal sphincter (IAS) that is closed at rest and external (SAE) called anus (volunteer).

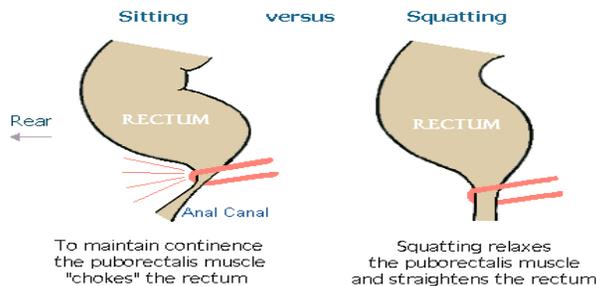


Fig.3

❖ Sexual and reproductive health: the pelvic floor muscles have a key role in the sexual act. Also if in one side during pregnancy it must support the new weight (Fig.4) on the other during labor and childbirth the muscles allow the fetus to exit.

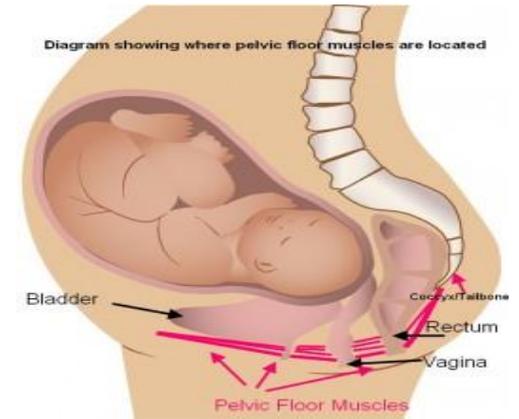


Fig.4

❖ Biomechanics: the pelvic floor helps with the torso's muscles to stabilize the body during movement (Figure 5), adapting to ensure balance and harmony.

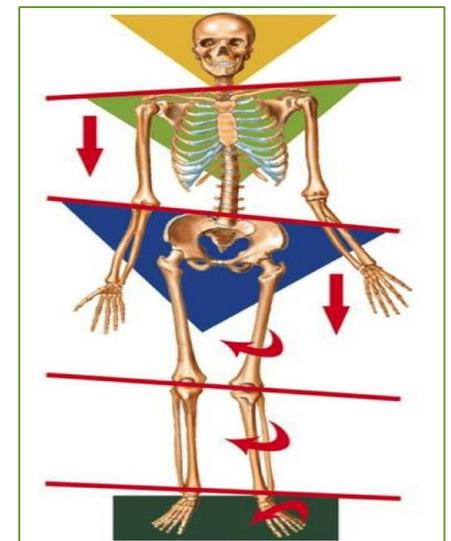


Fig.5