

Pelvic floor – its role is both to support and withstand

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One in three women aged 35 - 50 and one in two women over 50 suffer occasionally from the involuntary discharge of urine. Elderly men, particularly following prostate operations, are also affected. In other words, it's a widespread problem but considered embarrassing and so not spoken about.

Where is the pelvic floor?

The diaphragm closes off the abdominal cavity at the top and the pelvic floor muscles at the bottom. The pelvic floor muscles extend from the pubic bone to the coccyx and are bounded on either side by an ischial tuberosity. The pelvic floor consists of several layers of muscles, which together are the thickness of a hand and are positioned funnel-shaped one above the other: It also has a loose area of connective tissue, which is compressed by the pelvic organs and embedded ligaments, which are paired with muscle plates. The pelvic floor is bounded below by the external sphincter muscles. The role of the pelvic floor is to keep the abdominal organs (intestine, rectum, bladder and genitals) in place and it is also important for sexual responsiveness and perception.

However, in most cases, we only become aware of our pelvic floor if it loses its basic tension and can no longer fulfil its function.

Main reasons for weak or non-functioning pelvic floor muscles:

- General weakness of the connective tissue
- Overweight
- Sustained excessive load, e.g. lifting and carrying heavy loads, sustained, spasmodic coughing or sustained strained breathing (e.g. with chronic bronchitis or asthma) as this exerts significant pressure on the pelvic floor
- General lack of a measured load
- Hormonal changes during the menopause; weakening of the tissue around the urethra, bladder and genitals, slight atrophy of the muscles, reduction in blood circulation and a drying out of the mucous membrane
- Damage to the pelvic floor during childbirth or after the birth of several children
- Damage to the pelvic floor following a prostate operation

How to train the pelvic floor?

In principle, it is not difficult for men or women to train pelvic floor muscles. However, training requires a good awareness of the body and its muscles. As this is often lacking, it is recommended that the first step is to attend a pelvic floor course.

Having acquired this conscious awareness of the body, Kieiser Training can help sustain it because it has machines that allow you to tension the pelvic floor voluntarily, e.g. the A4 machine for the hip adductors.

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Similarly, provided this awareness exists, Kieser Training has several other machines that can activate the pelvic floor muscles, e.g. the F2, F3, C1, C3, D5 and D7.

A rounded back caused by poor posture or weak back muscles can also have a negative effect on tension in the pelvic floor. In addition, a stoop causes abdominal organs to exert a greater pressure on the pelvic floor muscles. In this case, the load on the pelvic floor can be reduced by strengthening the back muscles.

To prevent the development of the problems associated with weak pelvic floor muscles in the first place, it is advisable to consider specific training of these often neglected muscles as early as possible.