

## Gina Polansky, MSPT

Gina earned her Master of Science in Physical Therapy from University of Colorado Health Sciences Center in Denver, Colorado in 2004. Gina has extensive experience with pelvic floor rehabilitation. She has



two girls of her own who sparked her interest women's health. Gina initiated a pelvic floor rehabilitation program at the hospital she worked at in Colorado prior to moving to Oregon. She has taken continuing education courses focusing on pelvic floor dysfunctions. She has a strong interest in working with pre- and postpartum patients, and incorporating Pilates to aide in their recovery. She is working toward her Balanced Body Pilates certification.



## Why Physical Therapy?

Evidence shows that pelvic floor training should be offered as a first-line therapy to people with stress, urge, or mixed urinary incontinence (Wilson 2005).

High cure rates for stress urinary incontinence were shown in single-blind randomized control trials in which women had individual instruction by a trained physical therapist, combined with biofeedback and modalities with follow up and high adherence to home program by the patient (Morkved 2002).

Evidence shows that routine pre- and post-operative physical therapy interventions improved physical outcomes and quality of life in women undergoing corrective surgery for urinary incontinence and/or pelvic organ prolapse (Jarvis 2005).



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# Women's Health Physical Therapy



## What Does A Pelvic Floor Physical Therapist Do?

The growing emphasis on wellness has brought to our awareness a need to pay closer attention to our bodies during recreation, work, and throughout daily



life. Pelvic floor physical therapists have received specialized training which will benefit individuals with a variety of medical conditions, including: incontinence, pre- and post partum periods, pre- and post-gynecological surgery, pelvic pain, and coccyx (tailbone) pain.

Some tools for treatment of pelvic floor dysfunction include the use of biofeedback, with a device that measures the activity of your muscles. Muscle function may be assessed both internally and externally via muscle sensors and is an excellent training method.

## Diagnostic and treatment procedures may include:

- Electric stimulation
- Ultrasound for episiotomy scars
- Pelvic floor exercises
- Transverse abdominus stabilization exercises
- Bladder diary
- Diet education
- Behavioral techniques
- Postural education and functional training
- Relaxation techniques
- Manual therapy
- Pilates for core strengthening
- Biofeedback

## Patients may benefit from physical therapy if they are experiencing:

- Accidental leakage of urine when coughing, sneezing or laughing
- The need to urinate frequently or all of a sudden, uncontrollable urge to urinate
- Pain in the pelvic region
- Fecal incontinence
- Organ prolapse
- Pre- and post-partum related issues including back pain, diastasis recti and sciatica
- Scar tissue concerns
- Sexual dysfunction
- Post prostatectomy incontinence
- Colorectal conditions and constipation
- Coccyx disorders
- Prostatitis

## Incontinence and Pelvic Pain

Weak or damaged pelvic floor muscles often contribute to incontinence or pelvic pain due to childbirth, aging, or illness. Pelvic pain and bowel or bladder control problems may improve with physical therapy as we help you strengthen and retrain the pelvic floor muscles.

Physical therapy for incontinence and pelvic floor pain could include biofeedback, bladder retraining, strengthening and conditioning programs, and education to improve control of pelvic floor muscles.

## What to Expect at Your First Visit

Your first visit with a pelvic floor physical therapist will be an evaluation of your current condition and issues. This will include a thorough review of your medical history, and questions about your eating, drinking, voiding, and sexual habits as they relate to your symptoms. Your posture, hip, abdominal, and pelvic floor muscles will be assessed for



contributing factors such as weakness, tightness, or strain. This may include an external as well as internal exam.