

UNIT 3: GYNECOLOGY
SECTION A: GENERAL GYNECOLOGY

Educational Topic 37: Pelvic Floor Disorders

Rationale: Pelvic organ prolapse, urinary incontinence and anal incontinence (pelvic floor disorders) are increasingly common with the aging of the U.S. population. These conditions have a major impact on a woman's quality of life.

Intended Learning Outcomes:

A student should be able to:

- Describe normal pelvic anatomy and pelvic support
- List risk factors for pelvic floor disorders
- Describe signs and symptoms of pelvic floor disorders
- Differentiate the types of urinary incontinence
- Discuss the steps in evaluation of pelvic floor disorders
- Describe the anatomic changes associated with pelvic floor disorders
- Describe non-surgical and surgical management options for pelvic floor disorders

TEACHING CASE

CASE: A 75-year-old woman G5P5 woman presents for an annual exam and reports a "fullness" in the vaginal area. The symptom is more noticeable when she is standing for a long time. This feeling is bothersome to her and is affecting her daily activities. She does not complain of urinary or fecal incontinence. She has no other urinary or gastrointestinal symptoms. There has been no vaginal bleeding. Her past medical history is significant for well-controlled hypertension and chronic bronchitis. She has never had surgery.

Pelvic exam reveals normal appearing external genitalia except for generalized atrophic changes. The vagina and cervix are without lesions. Relaxation of the anterior and posterior vaginal wall are noted to approximately one centimeter beyond the hymen when she is asked to Valsalva. The cervix also descends to the level of the hymen with Valsalva. Uterus is normal size. Ovaries are not palpable. No rectal masses are noted. Rectal sphincter tone is slightly decreased. The patient wishes to discuss options for treatment.

COMPETENCY-BASED DISCUSSION & KEY TEACHING POINTS:

Competencies addressed:

- Patient Care
- Medical Knowledge
- Interpersonal and Communication Skills
- Systems-Based Practice

1. What are the most important support mechanisms for the pelvic organs?
2. What increases this patient's risk for pelvic organ prolapse?
3. What are the symptoms of pelvic organ prolapse?
4. What are the different types of pelvic organ prolapse?
5. What are the steps in evaluating someone with prolapse?
6. What are treatment options that you should discuss with this patient?

REFERENCES

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