

ABSTRACT

Title: An examination of pelvic floor activity following the application of special exercises

Objectives: The aim of this thesis is to validate the usefulness of carrying out local pelvic floor muscle examinations as an indication and education for therapy.

A second objective is for the women involved in the research to subjectively evaluate the examination methods and therapy. Furthermore, the thesis aims to establish an example of a comprehensive and detailed local examination of the pelvic floor muscles.

Methods: We measured the pelvic floor activity per vaginam using an EMG biofeedback device on clients with a pelvic floor dysfunction and grade I stress incontinence symptoms. Based on the results of the examination, therapy using the vaginal device was recommended and in six weeks a follow-up examination was carried out.

The changes in pelvic floor activity were evaluated by comparing the initial and follow-up examinations. Thus the usefulness of carrying out an examination of the local pelvic floor muscles before indicating a therapy was validated.

At the end of the examination an interview with participating clients was conducted in order to subjectively evaluate the method.

Results: All of the women participating in the research had previously undergone a different method of pelvic floor muscle therapy and had not achieved any subjective improvements. The results of EMG measurements showed that all thirteen women from the group examined achieved better results during the follow-up measurement than during the initial examination. The subjective evaluation by all participating clients was positive. Twelve out of thirteen women confirmed that thanks to the vaginal device they learned to make isolated contractions of the pelvic floor muscles, while nine of them also noticed a decrease in stress incontinence symptoms. Most appreciated by the clients was the possibility to control the exercise with the vaginal device. On the other hand, they saw a disadvantage in the requirement of privacy and discomfort when inserting the device.

Keywords: pelvic floor, Stress urinary incontinence, PERFECT scheme, EMG biofeedback