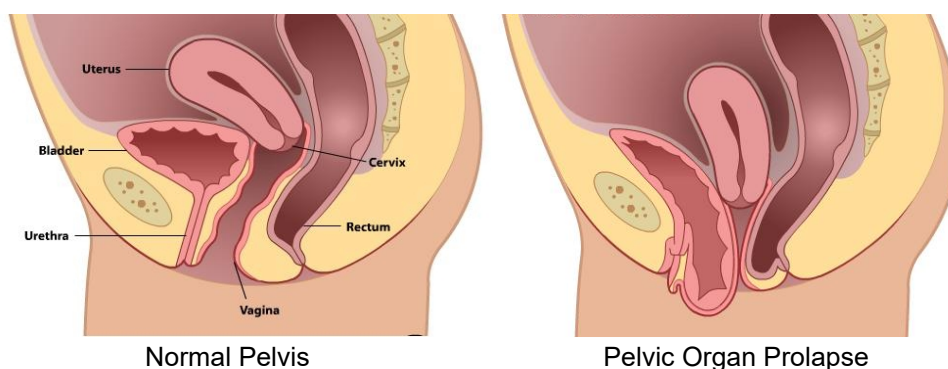


## Your important health information

# Pelvic organ prolapse

## What is a pelvic organ prolapse?

Pelvic organ prolapse is a common condition where the bladder, uterus and/or bowel protrude into the vagina instead of sitting in their normal position(s) in the pelvis. Women who have this type of prolapse may experience heaviness, dragging or an ache in the vagina or lower back. Prolapse can also appear as a lump inside or protruding out of the vagina. Women with a prolapse sometimes report changes in bladder or bowel function or changes in sexual function.



Normal Pelvis

Pelvic Organ Prolapse

## What causes prolapse?

Prolapse can occur when the supporting structures of the pelvic organs (fascia, ligaments and muscle) are weakened, stretched or disrupted. The biggest cause of prolapse is pregnancy and birth – almost one in two (or 50% of) women who have been pregnant will have some degree of vaginal prolapse. Your pelvic floor muscles and supportive structures are weakened during pregnancy (by extra weight and hormonal changes) and then again during a vaginal delivery – particularly if you have had more than one baby, your baby was big or you had to push for a longer time than usual.

Other factors which may increase the likelihood of developing a prolapse are:

- **menopause and ageing:** due to changes in the female hormone levels and the effect of stretch and weakening of muscles and supportive structures over time
- **genetics:** some women have softer connective tissue that is more likely to stretch; hence prolapse can sometimes be common within families
- **hysterectomy or previous vaginal prolapse surgery**
- **constipation and/or straining** on the toilet
- **repetitive heavy lifting** such as in house duties, lifting children or related to your work
- **chronic cough** which may occur with smoking or chronic lung diseases
- **being overweight.**

## What can I do if I have a prolapse?

Having strong pelvic floor muscles and preventing unnecessary strain are the first steps in preventing and treating prolapse.

- **Pelvic floor muscle exercises**

Your physiotherapist can assess your pelvic floor muscles and prescribe an individual exercise program to help you manage your prolapse.

- **Avoid constipation and straining on the toilet**

Drink plenty of water (aim for one and a half to two litres per day) and eat a high fibre diet such as fruit, vegetables, grains and nuts. Avoid straining to empty your bowels. It can sometimes be helpful to support the vagina with your hand to assist with emptying. Ask your physiotherapist about good positioning and emptying techniques.



- **Reduce heavy lifting**

Avoid lifting, pushing or pulling anything that causes effort. Break up loads or ask for help to lift them. Always brace your pelvic floor muscles when lifting.

- **Horizontal rest to reduce the effect of gravity**

Avoid long periods of standing and pace your day to involve periods of rest.

- **Choose appropriate exercise and maintain a healthy weight**

Exercise is very important to maintain a healthy weight and keep fit and strong. Choose low impact exercise, such as walking, swimming or cycling.

Avoid exercise which causes strain such as running, aerobics, heavy weights and sit ups.

### Other information

Some women with prolapse report discomfort or change in sensation during sexual intercourse. If you have questions regarding this or other medical management options please speak to your physiotherapist or doctor.

### Additional comments

#### Further Information

If you have any questions regarding this information, please contact:

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