Pelvic Floor Dysfunction: What ALCMs Should Know About Female Incontinence and Prolapse
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Pelvic organ prolapse
Definitions
Symptoms/presentation
ER situations
Treatments
Long term outcomes

Urinary Incontinence
Definitions
Symptoms/presentation
ER situations
Treatments
Long term outcomes

Fecal incontinence/Recurrent UTI/Pelvic pain

Putting into practice

Pelvic Floor Dysfunction: Female Prolapse and Incontinence

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Putting into practice
Pelvic Floor Dysfunction (PFD)

"a group of conditions that affect the muscles, ligaments and connective tissues of the lower pelvis—these tissues ultimately support the vagina, bowel, bladder, uterus, rectum"

- pelvic organ prolapse and fecal/urinary incontinence

-50% of women
Pelvic Organ Prolapse (POP)

"protrusion of the vagina and pelvic organs through the vaginal opening"
- vagina and/or cervix, never another organ
- signs/symptoms and presentation
- timing
- emergent situations
- long term outcomes

POP

- Medical management
  - pessary, PT, medications
- Surgical management
  - pelvic floor reconstruction
- Expectant management
Urinary Incontinence (UI)
“involuntary passage of urine or the inability to stop urination with urge to urinate”
- signs/symptoms and presentation
  - causes, aggravating factors
  - timing
  - emergent situations
  - long term outcomes
- Stress incontinence
- Urge incontinence
- Mixed incontinence
- Overflow incontinence

Fecal Incontinence (FI)
“involuntary passage of stool with urge to defecate or without awareness”
- signs/symptoms and presentation
  - causes/aggravating factors
  - timing
  - emergent situations
  - long term outcomes
  - treatments

UI- treatment
- Urge incontinence
  First, 2nd and 3rd line strategies
- Stress incontinence
  Medical vs surgical
- Mixed incontinence
- Overflow incontinence
Recurrent UTI (rUTI)

“three or more culture proven UTIs in 12 months and/or two or more culture proven UTIs in 6 months, whichever comes first”

- signs/symptoms and presentation
- causes/aggravating factors
- timing
- emergent situations
- long term outcomes
- treatments
- antibiotics

Pelvic Pain

- acute versus chronic
- complicated to assess
- interstitial cystitis/bladder pain syndrome (IC/BPS)
Putting It Into Practice

Practical tips for women living with pelvic floor dysfunction and their care managers and caregivers

- ask questions if you see signs, ask questions even if no signs
- ask for evaluation by the right professional
- tolerance does not equal comfort

Where To Get Care

- UC San Diego Health
- Sharp
- Kaiser
- VA
- VA Medical Center
- Scripps
Online Resources
American Urogynecologic Society
www.augs.org
American Urologic Association
www.auanet.org

References
www.augs.org
www.auanet.org