

What is Pelvic Floor Dysfunction (PFD)

A condition where pelvic floor muscles are either under-active or over-active, creating weakness or excessive tone. This muscle dysfunction can alter bladder and/or bowel habits as well as sexual function.

PFD is very common, at least 1/3 of women are affected by it at some point in their lifetime.



CARE TEAM

Jessica Hissam

Doctor of Physical Therapy

Graduate of the University of
Alabama-Birmingham

Graduate of Herman & Wallace
Pelvic Rehabilitation Institute



HERMAN & WALLACE
pelvic rehabilitation institute



Goals of Physical Therapy

- Regain control of your bladder and/or bowels
- Decrease pain and return to daily activities and the things you love
- Avoid surgery
- Reduce need to take medications
- Refer you to the correct specialists if needed



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PHYSICAL THERAPISTS

PELVIC HEALTH

PHYSICAL THERAPY

**REGAIN CONTROL
OF YOUR LIFE**

Contact Us

Call to schedule a free 15 minute
phone assessment with Jessica.

📍 4240 Balmoral Dr. SW #100,
Huntsville, AL 35801

📞 256-883-1970

📍 97 Hughes Rd. Ste. P,
Madison, AL 35758

📞 256-774-2978

📍 8490 Hwy 72 W #120,
Madison, AL 35758

📞 256-325-1699

🌐 www.johnsonandhayes.com

Common Symptoms:

- Urinary or fecal leakage with coughing, sneezing, laughing, yelling, running, jumping, lifting
- Urinary or fecal leakage on the way to the bathroom
- Use of the bathroom more than 6 times a day or more than once a night
- Using the bathroom "just in case" you won't be near one in the next two hours
- Pelvic or lower abdominal pressure
- Unable to fully void
- Urge to go to the bathroom after just going
- Need to change body position to defecate
- Constipation
- Pelvic pain or burning
- Pain with use of tampon or intercourse

What can cause PFD?

- Poor posture
- Excessive coughing, lung disease
- Pregnancy
- Constipation
- Abdominal surgery
- Pelvic procedures
- Labor complications
- Menopause
- Obesity
- Repetitive heavy lifting
- Consumption of bladder irritants
- Smoking
- Poor bladder habits

What can I expect on my Initial Evaluation?

You will be asked about your medical history and current symptoms.

Jessica will discuss your concerns and then examine your spine, hips, and externally (with your clothes on) assess your pelvic floor. If necessary, on a subsequent visit, an internal exam may be warranted (Only with your permission and at your comfort level).

Together you and Jessica will come up with a plan of care that addresses your goals. Jessica will explain the progression of treatment and how to accomplish your goals.

Common Diagnoses We Treat

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| • Pelvic floor dysfunction | • Pelvic Pain |
| • Diastasis recti | • Coccydynia |
| • Sacroiliac joint dysfunction | • Dyspareunia |
| • Nerve pain/Radiating pain | • Painful Bladder Syndrome |
| • Low back pain | • Prolapse (Pelvic, Urinary, Rectal) |
| • Hip pain | • Fecal Incontinence |
| • Neck and upper back pain | • Urinary Incontinence |
| • Post pelvic or abdominal surgery | • Constipation |
| • Core weakness | |
| • Prenatal/Postnatal care | |
| • Pain during pregnancy | |

Common Treatments:

Treatment is based on your needs and may include:

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| • Pelvic floor strengthening | • Scar tissue mobilization |
| • Core strengthening | • Education on bladder training, diet, and behavioral interventions |
| • Manual soft tissue mobilizations | |
| • Manual joint mobilizations | |
| • Diaphragmatic breathing | |
| • Relaxation techniques | |
| • Postural strengthening | |

Frequently Asked Questions:

Q: Do I need a Doctor's referral to come to physical therapy?

A: A doctor's referral is not always necessary. Please call one of our locations to determine if a prescription for physical therapy is necessary

Q: Can I use insurance?

A: Yes, we take most insurances.

Q: What should I wear?

A: Clothing you feel comfortable moving around in, preferably not jeans or thick materials.

WE CARE ABOUT
THE WHOLE YOU

