ASSESMENT OF THE EFFECTIVENESS OF PHYSICAL ACTIVITY IN PELVIC ORGAN PROLAPSE

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Abstract

Pelvic organ prolapses (POP) is a syndrome of prolapse of the pelvic floor and pelvic organs in isolation or in combination, which has an extremely negative impact on the quality o f life of patients. According to world data, from 2.9 to 53% o f women note some form of POP. Up to 47% o f patients with pelvic organ prolapse are women of working age. According to the Women, s Health Initiative Study, among 16 616 perimenopause women, the incidence of uterine prolapse was 14.2%, cystocele - 34.3%, rectocele - 18.6%. In most cases, POP is almost asymptomatic, which indicates its greater prevalence in the population.

Keywords: pelvic floor muscle failure, pelvic organ prolapse, Pelvic Floor Impact Questionnaire-7, Pelvic Floor Distress Inventory-20, Pelvic Organ Prolapse / Urinary Incontinence Sexual Questionnaire-12.

Introduction

Pelvic organ prolapses (POP) is a syndrome of prolapse of the pelvic floor and pelvic organs alone or in combination, which is extremely negative affects the quality of life of patients. According to according to world statistics, certain manifestations of POP are noted by 2.9 to 53% of women. Up to 47% of patients with pelvic organ prolapse are women of working age. According to the Women’s Health Initiative Study, among 16616 women of perimenopause age, the incidence of uterine prolapse was 14.2%, cystocele - 34.3%, rectocele - 18.6%.

Purpose of the study. Evaluation of the effectiveness and safety of physical activity in pelvic organ prolapse.

Material and methods. Under supervision in the obstetric and gynecological complex of the clinic of the Tashkent Medical academy were 30 women with mild and moderate PH. The comparison group consisted of 30 patients without pelvic organ prolapse. Study groups were comparable in age, parity, the onset of menstrual function, the presence of genital and extra genital pathology. In the study group, the pelvic floor muscles were trained using specialized simulators for women planning childbirth and for preoperative preparation with mild to moderate prolapse. The average age of the surveyed is 38.3 years. When assessing quality life

of patients with pelvic organ prolapse, a complex of specialized questionnaires was used PFIQ-7 (Pelvic Floor Impact Questionnaire-7), PFDI-20 (Pelvic Floor Distress Inventory-20), PDQA questionnaire, Wexler score, PISQ-12 (Pelvic Organ Prolapse/Urinary Incontinence Sexual Questionnaire-12). It was revealed that 83.3% had a sedentary lifestyle woman, complications in childbirth, such as perineal rupture - in 36.6%, episiotomy, episiorrhaphy - Y 56.6%. After analyzing the possible causes factors in the development of pelvic organ prolapse found that 36.6% of the examined were engaged in heavy physical labor, colitis was noted in 80%, malnutrition (consumption of convenience foods and fast foods) occurred in 80%, gastrointestinal disease - in 23.3%, stress urinary incontinence - in 90%. Pre-examination, counseling and special loads were carried out in the group with using simulators weighing from 65-85 g for 30 minutes three times a week for 6 months.

Results. It was revealed that performing exercises on a regular basis improves tissue tropism, which helps to restore the tone of the pelvic muscles. bottom, reducing complaints such as stressful work gastrointestinal tract in 40% due to technology correct breathing during exercise, reduction of pain in the hip joint in 60%. In the group of patients after surgical treatment, thanks to special simulators, the time of operative treatment was reduced by 15 minutes, the amount of blood loss by 20%, the terms of rehabilitation in the postoperative period also decreased due to a decrease in the pain factor in 60% of patients.

Conclusions. Our data confirm the role special simulators in improving the quality of life (improving the motor function of the large intestine by 80%, urogenital disorders by 70%). Therefore, a reasonable differentiated approach to the use of minimally invasive and surgical methods for correcting pelvic floor dysfunction. Thus, with functional and primary insolvency can be recommended gymnastics to strengthen the pelvic floor.

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