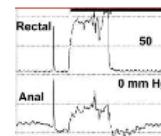
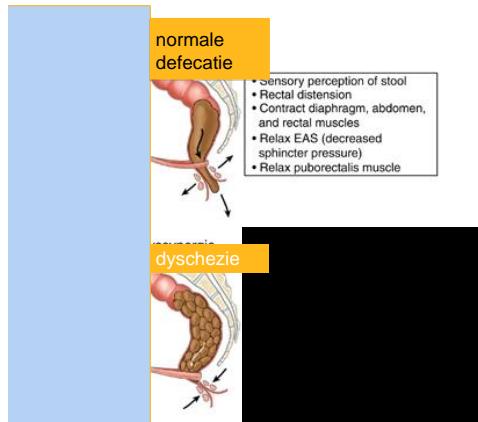


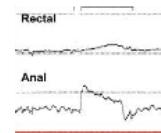
## Bekkenbodemkine voor het achterste compartiment van het kleine bekken

Prof Alexandra Vermandel

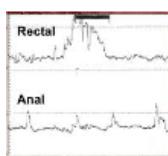
Coördinator Klein Bekken Kliniek UZA



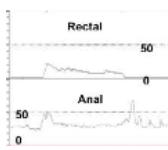
1. Efficiënt persen = goede intra abdominale drukverhoging
2. Paradoxe druk verhoging van EAS



1. Geen goede verhoging van de intrarectale druk
2. Samentrekking EAS



1. Adeqaat persen
2. Niet volledige EAS relaxatie



1. geen voldoende drukverhoging bij persen
2. Geen of onvoldoende relaxatie van EAS

Goede expulsiekracht , abdominale drukverhoging zonder samentrekking van de BB

(Bharucha, 2009; Bouras, 2009; Rao, 2008; Basotti, 2004)

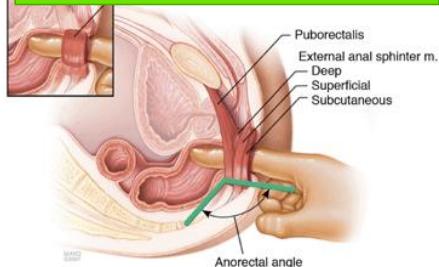




## Our influence on the defecation proces ?

- Providing information ( education) about normal defecation:

**Literatuur : belang van controle correcte BB samentrekking  
VOOR start BB therapie , Biofeedback**



## Before starting PFT



## Biofeedbacktraining

■ is een training waarbij aan de patiënt een **fysiologisch proces** (hier de BB) duidelijk gemaakt wordt onder de vorm van een visueel, auditief of tactiel signaal zodat hij dit proces kan beïnvloeden

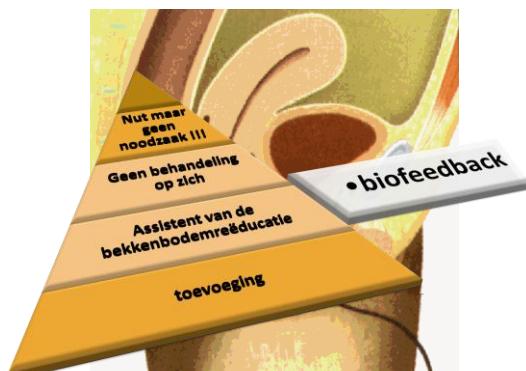


### Biofeedback – Pelvic Floor Muscle

- With EMG anal probe / **surface EMG** electrodes
- Pelvic floor contraction and relaxation



### Welke oefeningen ?

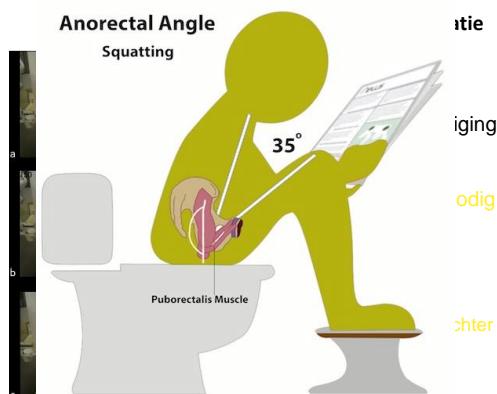


### Defecation Techniques = behaviour modification

Learn good abdominal straining

Sensory Training

Review the proper posture during defecation  
Toilet posture: stabilised trunk, >90 degree hip flexion



= Behavior modification

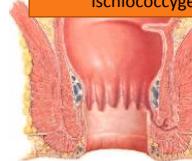
Increasing fiber and fluid intake

Timed toilet training: twice a day, after waking or after a meal.

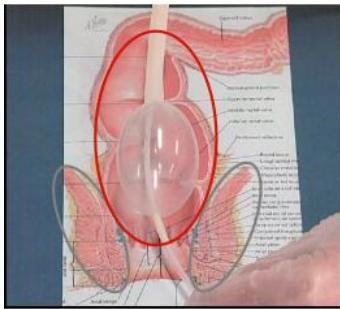


**For defecation we need:**

- Voluntary relaxation of Puborectalis and External Anal Sphincter (EAS)
- but also:
  - Urge to defecate:
    - Anal and rectal sensitivity
    - Increased rectal tone
    - Isometric contraction pubococcygeus, iliococcygeus and ischiococcygeus for rectal support



## Ballon expulsie

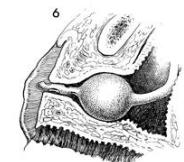


## Sensibiliteitstraining :

Verbeteren rectale sensibiliteit  
Verbeteren stoelgangdrang

- Eerste sensatie :  $\pm$  10-20 ml
- Urgente ontlastingsdrang :  $\pm$  150 ml
- Max draagbaar volume: 250-300 ml

Chiarioni 2005, Rao 2007, de Backer 1998)



Objectieve verbetering in de rectale sensorische functie bij patiënten met rectale hyposensitiviteit

Gladman 2009

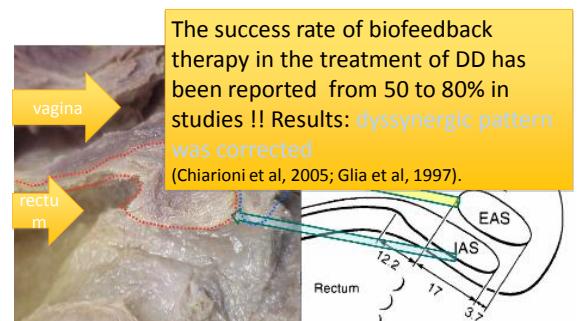


Expulsietest : controle van de functionaliteit van de BB-sp tijdens het persen (! Paradoxale contractie)

Emmanuel & Kamm 2001

## Stool diary: bowel habits

- 1. **frequency** and 2. **consistency of stool** (bristol scale).
- 3. if they
  - **need to strain**
  - or **digitate** anally or vaginally
  - or **support** the perineum



## Predictors of success

Severe psychopathology has negative effect on successful treatment  (Mason, 2002)	Age, gender, demographic variabilities, duration of symptoms  are no predictors of success  (Heymen, 2003; Hwang, 2006; Rao 2007/2008)	A lot of pain, emotional problems or less vitality in daily life are bad predictors of successful treatment  (Mason, 2002)
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## Predictors of success

Complete all the treatment sessions of biofeedback  
  
(Gilliland, 1997; Koutsomanis, 1995; Lau, 2000; Wang, 2003; Rao, 2008; Bharucha, 2009)

Biofeedback means also:  
**cognitive behavior treatment, coaching, counselling and informal psychotherapy**  
(Mimura, 2000)

**Personal instruction and encouragement of the patient by the physiotherapist**  
(Heymen, 2003/2007; Hwang, 2006; Lau, 2000; Gilliland, 1997)

### Time investment

We have time to talk with the patient ½ hour a session /day

When the patients have specific problems we communicate it to specialist  

- voiding problems (anorectal and lower urinary tract function are interrelated)
- Pelvic pain ...

### Cheap

Biofeedback usually consists of 4-7 appointments

Dank u voor u aandacht