Does Imagery Ability Affect Pelvic Floor Muscle Function?

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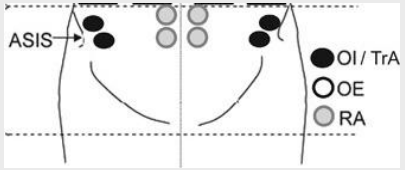
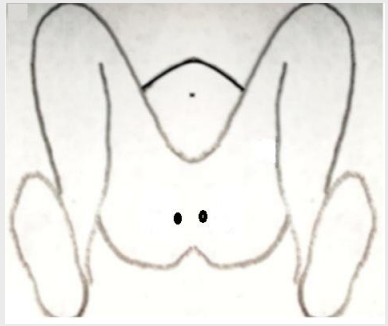
Background/Aim

Pelvic floor muscles (PFM) are essential for continence, pelvic stability, and sexual health. Motor imagery, including visual and kinesthetic forms, has been shown to facilitate motor learning and muscle activation. While imagery is increasingly applied in rehabilitation, the relationship between imagery ability and PFM activity in healthy women remains unclear. The aim of this study was to investigate the relationship between kinesthetic and visual imagery ability and pelvic floor muscle (PFM) activity in healthy women.





Methods

This research was planned as a cross-sectional study. Ffifteen women aged 20 to 25 years were involved the study. PFM activity was assessed with a surface electromyography biofeedback device. After the participants understood the method for contracting the PFM, superficial electrodes were placed to the skin to the PFM and transversus abdominis muscle.

Kinesthetic imagery and visual imagery ability were assessed with the Movement Imagery Questionnaire-3 (MIQ-3) and the Vividness of Visual Imagery Questionnaire (VVIQ), respectively.

Results

The mean age and mean body mass index of the participants were 21.8±1.21 years and 23.9±3.72 kg/m2, respectively.

No correlation was found between the MIQ-3 and VVIQ and PFM phasic, tonic, and endurance contractions.

Variable	Mean ± SD
Age (years)	21.8 ± 1.21
Body Mass Index (kg/m^2)	23.9 ± 3.72
VVIQ	62.8 ± 7.18
HIA-3 Internal Visual Sub-parameter	5.8 ± 0.65
HIA-3 External Visual Sub-parameter	5.60 ± 1.08
HIA-3 Kinesthetic Sub-parameter	5.60 ± 0.97
PFM MVC (Rapid/Phasic)	49.7 ± 10.6
PFM MVC (Tonic)	38.8 ± 9.0
PFM MVC (Endurance)	39.0 ± 7.29

Implicaitons

Our study found that the participants had relatively excellent levels of kinesthetic and visual imagery, as well as phasic, tonic, and endurance contractions of the PFM.

However, we observed no relationship between imagery ability and PFM activity.