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REHABILITATION OF PELVIC FLOOR DYSFUNCTION: A PATIENT EDUCATIONAL VIDEO

Introduction

The primary goal of this video is to provide a consumer-friendly introduction to how physical and occupational therapy can help with pelvic floor dysfunction and what patients can expect from therapy. The secondary goal was to create a tool for referring providers to understand what pelvic therapy is and to use with their patients to help them explain what pelvic therapy is. We were inspired to do this based on several patients commenting on their uncertainty about what to expect at their initial appointments and often leaving saying things like "Well, that wasn't bad at all!" Our theory was that an educational introductory video could minimize the knowledge gap for physicians and providers and thus increase referrals as well as minimize patient anxiety about seeking rehab for pelvic dysfunction.

Design

The content of the video includes sections on the following: definitions of urinary incontinence, bowel incontinence and pelvic pain diagnoses; what to expect at your first therapy visit; common therapy interventions; and a patient testimonial. Video graphics include images of a simulated patient in a home setting, general clinic setting, general physical therapy gym and a women's/men's health specific room. Still graphics include pelvic skeletal models. A voice over provides auditory information on the above topics with the message supported by the image. The patient testimonial was not scripted and includes an actual patient. All featured participants signed a release to use their image in this public video.

Results

After edits were completed, copies of the video were made available in a DVD format and via web-based link. Copies of the DVDs and business cards with the DVD link were distributed to as many referring providers as possible including Obstetrics, Family Practice, Internal Medicine, Urology and Urogynecology. The video has also been used in community-based presentations to help deliver the message of what physical and occupational therapy has to offer to this population. No specific data could be collected on the impact of this video on actual change in referral volumes as this effort coincided with on-going efforts to increase referrals.

Conclusion

Many patients erroneously believe surgery is the only option to treat pelvic floor dysfunction and decide to accept it as a normal part of aging. Physical and occupational therapy is poorly understood in general by the public at large. Healthcare providers may not be familiar with the conservative management of continence issues and pelvic pain and therefore unable to fully explain rationale for referral to a therapist. This video is an attempt to minimize that knowledge gap and empower patients and providers to try a conservative approach at managing such conditions. Our overall goal was to achieve positive, long term outcomes while minimizing or eliminating the need for pharmaceutical management, surgical intervention and ultimately, quality of life.

Disclosures

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