Is there a difference in the pressure of pelvic floor muscles in women over 40 years? (#560)

ANGELO P, VARELLA L, MAGALHÃES A, MICUSSI MT

INTRODUÇÃO

The lesions that occur to pelvic floor muscle arising from women’s life events[1]. For this reason, a proper assessment of the function, strength and integrity of PFM has a special role in diagnosing and treating disorders involving this region[2]. A strength assessment may give evidence to the status of muscle weakness severity, in addition to being essential for designing specific exercise programs, as well as for monitoring rehabilitation progress. Therefore, the objective this study is to compare the values of manometry among the age groups in adult women.

DESIGN

The study was approved by the Ethics Committee.

It was realized a cross sectional. The sample consisted of 228 women divided to three groups: Group A: women with 40 – 50 years (n = 70); Group B: 51 – 60 years (n = 75); Group C: 61 – 74 years (n = 79). The sample was the result of a non-probability sampling process.

Included criteria: women without an intact hymen, with no urinary, vaginal infection or gynecological bleeding, and who had not had deliveries or gynecological surgery performed for at least six months.

It was used the Peritron 9300V The patients were instructed on the correct way to contract PFM avoiding the Valsalva maneuver, and to perform muscle contraction with the greatest strength possible. Volunteers were also instructed to empty their bladders before the manometry.

The probe was inserted with the equipment turned off. Three maximum voluntary contraction of PFM was requested, with two to three seconds of duration each. The command was “squeeze the probe”.

The assessment was performed by a single evaluator.

It was considered the average of the three squeezes and it was used the classification scale of manometry: Very Weak (7.5 – 14.5 cmH2O), Weak (14.6 – 26.5 cmH2O), Moderate (26.6 – 41.5 cmH2O), Good (41.6 – 60.5 cmH2O) and Strong (> 60.6 cmH2O) [5]. To compare the age groups and manometry was used the Anova.

RESULTS

The three groups were homogeneous in sociodemographic characteristics, except for age. Anthropometric measures, such as body mass index and waist circumference, showed no intergroup difference (p=0.64 and p=0.53, respectively). Obstetric history revealed homogeneity between the three groups in relation to pregnancies and number and type of deliveries. The mean of manometry between the age groups is shown in the Table 1.

Table 1 – Values of manometry of pelvic floor muscle according to age (n=228).

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Manometry [cmH2O]</th>
<th>Classification of Manometry</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>40 to 50 years</td>
<td>30.93 (± 20.24)</td>
<td>Moderate</td>
<td>0.68</td>
</tr>
<tr>
<td>51 to 60 years</td>
<td>31.43 (± 25.03)</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>61 to 70 years</td>
<td>36.53 (± 21.47)</td>
<td>Moderate</td>
<td></td>
</tr>
</tbody>
</table>

*Significant difference with ANOVA.

It was concluded that there is not difference on pelvic floor muscle pressure in women over 40 years.

CONCLUSION

It was concluded that there is not difference on pelvic floor muscle pressure in women over 40 years.

Reference