

Start	End	Topic	Speakers
11:00	11:10	FIOD Symptoms recognition and measurement: lets make an IMPACT through a systematic approach and multidisciplinary initiatives	Craig Olson
11:10	11:20	Disease specific imaging in FIOD patients	Craig Olson
11:20	11:30	Case presentation: combined fecal incontinence and obstructive defecation with discussion and questions	Craig Olson Paula Iguualada Martinez Alison Hainsworth Amy Thorsen
11:30	11:40	PFPT Assessment and treatment of the FIOD patient	Paula Iguualada Martinez
11:40	11:50	Best time for PFPT in the FIOD patient?	Paula Iguualada Martinez
11:50	12:00	Case Presentation: PFPT in the FIOD patient with discussion and questions	Craig Olson Paula Iguualada Martinez Alison Hainsworth Amy Thorsen
12:00	12:10	Sequential approach to the treatment of FI	Amy Thorsen
12:10	12:20	Managment of ODS: Frist, Do No Harm	Alison Hainsworth
12:20	12:30	Case presentation: combined fecal incontinence and obstructive defecation with discussion and questions	Craig Olson Paula Iguualada Martinez Alison Hainsworth Amy Thorsen

## Description

Pelvic organ prolapse is a very common condition, effecting up to half of women over the course of their lifetime. This has significant implications for urinary, as well as bowel continence, and these are often co-existing disorders[1]. Bowel incontinence itself is also frequently associated with obstucted defecation symptoms, and these problems co-exist in up to half of patients as well[2]. For this reason, awareness and knowledge of treatment of bowel disorders assocaited with pelvic organ propalseis important to any practioner working wtih incontinence patients.

Key learning points in discussed in this workshop will include how to regonize, define and classify fecal incontinence and obstructive defecation disorders in patients with pelvic organ prolapse. We will review the IMPACT patient reported instruments, which are a validated way of screening for and classifying these common problems[3]. Radiologic classification of disease, and reporting standards for radiologic imaging will be discussed [4], leading the attendee to have a better understanding of when to pursue imaging and what we hope to gain from appropriate imaging in the clinical setting.

These disorders are often treated wtih pelvic floor phsyscial therapy in conjunction with conservative and surgical techniques, and we will review these treatments, and importantly the appropriate timing of physical therapy in the treatment of bowel disordres associated with pelvic organ prolapse. Attendees should leave with an awareness of the use of phsyscial therapy for bowel disorders associated with pelvic organ prolapse, and importantly, the appropriate clinical interval to seek these treatments out.

Last, we will discuss the sequential management of fecal incontinence and obstructive defecation in the setting of pelvic organ prolapse. Conservative treatment managements will be highlighted, and the appropriate surgical indications will be discussed. A do no harm approach is important to conisder in this field, and avoidance of surgical complications and poor outcomes will be given attention as well. The attendee should be able to appropriately consider multiple treatment options for bowel disorders co-existing with pelvic organ prolapse after attending.

This exciting program will help attendees to recognize, define, and classify bowel disorders which may be coexisting in their current pelvic organ prolapse or incontinence patients. This will then lead to an appropriate recognition of when imaging will be helpful, how to order imaging, and how to interpret imaging in these screened patients. Having this awariness mastered, effective referrals to physical therapy can then be placed and integrated into a stepwise treatment pathway for these challenging patients with coexsiting disorders and prolapse.

## Additional References

[1] Kapdoor DS, et al. Combined urinary and fecal incontinence. Int Urogynecol J Pelvic Floor Dysfunct 2005, 16(4):321-8

[2] Vollebregt Paul F, et al. Coexistent faecal incontinence and constipation: A cross-sectional study of 4027 adults undergoing specialist assessment. *eClinicalMedicine* 2020, 27:100572

[3] Bordeianou Liliana G, et al. Measuring Pelvic Floor Disorder Symptoms Using Patient-Reported Instruments. *Diseases of the Colon and Rectum* 2020, 63(1):6-23

[4] Gurland Brooke H, et al. Consensus Definitions and Interpretation Templates for Magnetic Resonance Imaging of Defecatory Pelvic Floor Disorders. *Diseases of the Colon and Rectum* 2021, 64(10):1184-97.

### **Aims of Workshop**

This workshop will review the latest controversies and treatment paradigms for patients who suffer from bowel disorders co-existing with pelvic organ prolapse. These are common problems faced by all specialities dealing with continence, and we employ a multidisciplinary approach to help understand and treat these problems effectively.

### **Educational Objectives**

Participants will interact with the faculty through invitation for direct questions as well as through case presentations where the audience will partake in a direct role by answering faculty lead surveys/questions on how to proceed in difficult cases. To aid in this, the outline of the session will include case discussions throughout the talks to encourage an atmosphere of audience participation. Case-based learning also translates well into clinical practice, as the knowledge can be directly applied to similar cases one may encounter.

### **Learning Objectives**

1. Be able to define and classify fecal incontinence and obstructive defecation symptoms that occur with pelvic organ prolapse
2. Understand the role of and when to employ pelvic floor physical therapy in the treatment of pelvic organ prolapse
3. Discuss management options, from conservative to surgical, for the treatment of fecal incontinence and obstructive defecation in patients with pelvic organ prolapse

### **Target Audience**

Urogynaecology and Female & Functional Urology, Bowel Dysfunction, Conservative Management

### **Advanced/Basic**

Basic

### **Suggested Learning before Workshop Attendance**

Gurland B, Mishra K. A Collaborative Approach to Multicompartment Pelvic Organ Prolapse *Clin Colon Rectal Surg.* 2021 Jan; 34(1):69-76

Bordeianou, Liliana, et al. Measuring Pelvic Floor Disorder Symptoms Using Patient-Reported Instruments *Diseases of the Colon and Rectum* 63(1):p6-23, 2020.

Wallace SL, et al. Pelvic Floor Physical Therapy in the treatment of Pelvic Floor Dysfunction in Women. *Curr Opinion Obstet Gynecol.* 2019 Dec; 41(6):485-93.