

Pregnancy and Mode of Delivery May Contribute to Pelvic Floor Disorders

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Researchers at the University of California, San Diego (UCSD) Medical Center and Kaiser Permanente San Diego have shown substantial evidence linking pregnancy, mode of delivery and the occurrence of a pelvic floor disorder, such as incontinence or pelvic organ prolapse. The results demonstrated that women who delivered vaginally suffered higher rates of pelvic floor disorders than women who underwent Cesarean sections or never gave birth. The results of the study, "Pelvic Floor Disorders: An Epidemiologic Study" will be published in the June 1 issue of *Obstetrics and Gynecology*.

Of the women in this study group who gave birth vaginally, 42 percent suffered one or more pelvic floor disorders compared to only 27 percent of the women who delivered only via Cesarean.

The study's principal author, Emily Lukacz, M.D., Assistant Professor of Reproductive Medicine, M.A.S, in Clinical Research, who completed both her residency and fellowship training at UCSD, said this is not a reason for women to rush to their obstetricians and request Caesarean sections.

"Although the study's outcome showed a statistically higher rate of pelvic floor disorders in the vaginal delivery group, 58 percent of those who delivered vaginally did not suffer a pelvic floor disorder at all," said Lukacz.

Lukacz says that there has been controversy about whether it is pregnancy, mode of delivery or age alone that causes the pelvic floor disorders.

"Previous studies have argued that there is a link between pregnancy and developing a pelvic floor disorder and others have argued that there is not a link," Lukacz stated. "The problem has been that previous studies have used different definitions and non-validated instruments. We developed a questionnaire, a validated instrument that addressed all pelvic floor disorders. This is the largest U.S. study using a validated instrument addressing all major pelvic floor disorders."

The goal of the research was to determine if women who give birth only by Cesarean section have less of a chance of developing a pelvic floor disorder than women who give birth vaginally.

The study was conducted by mailing surveys to 12,000 women enrolled in the Kaiser Permanente of Southern California Health Plan. The women fell into three groups, those who had never given birth, those who had given birth by Cesarean section and those who had given birth vaginally. Of the 4,458 women who returned the surveys, Lukacz found that seven percent suffered from pelvic organ prolapse, 15 percent had urinary incontinence, 13 percent experienced an overactive bladder and 25 percent had fecal incontinence. Thirty-seven percent of the respondents suffered one or more of these conditions, regardless of their status of having given birth or not. The women who gave birth only via Cesarean section suffered the conditions at the same rate as women who had never given birth at all.

Lukacz stressed that there should not be a widespread effort to steer women toward Cesarean sections because of the associated medical and surgical risks that could be life-threatening.

“Cesarean section should be a careful decision made between a woman and her doctor where risks to both mother and baby are extensively explored,” Lukacz cautioned. “The point of the study was to broaden the dialogue of these complex issues.”

Lukacz said that pelvic floor disorders are a major problem for women. According to the American Accreditation HealthCare Commission approximately 13 million adults experience incontinence at some point in their lives, with six out of every seven cases occurring in women. And, nearly 11% women will require surgery for a pelvic floor disorder in their lifetime.

Lukacz noted that pelvic floor disorder is a major health problem that requires special treatment. A specialty program for treating these disorders has recently been developed for ob-gyn physicians who want to specialize in the treatment of these conditions. The training program, which is approved by the American Board of Obstetrics and Gynecology, offers physicians the training and experience to treat pelvic floor problems regardless of a woman’s experience with giving birth. The fellowship, called Female Pelvic Medicine and Reconstructive Surgery, is offered at 22 American medical institutions, including UCSD. In addition, UCSD offers a multidisciplinary women’s pelvic medicine center.

Lukacz conducted the study in cooperation with Jean M. Lawrence, ScD, MPH and Richard Contreras of Kaiser Permanente Southern California - Pasadena, Charles W. Nager, M.D., UCSD, and Karl Luber, M.D. of Kaiser Permanente Southern California – San Diego Medical Center. The study was funded by the National Institutes of Health (NIH).

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