



Defense Health Agency (DHA) Clinical Communities Speaker Series

Feb 2022 CCSS: Challenges in Women's and Infants' Health

S03: Military Medicine and the Modern Woman: A Pelvic Health Perspective

Resource List

An increasing number of diagnostic and therapeutic medical devices are available to help women manage pelvic floor symptoms. The article, [Scientific Evidence for Pelvic Floor Devices Presented at Conferences](#) (2019), summarizes and reviews the evidence regarding 11 devices manufactured to manage pelvic floor dysfunction. Although sample sizes in the studies were small and there was a lack of convincing evidence, many of the devices were available on the market. The process for introducing these devices do not adhere to the strict requirements for introducing new drug classes. This review concludes that there are no clear guidelines or gold standards for the evaluation of such devices and that there is a lack of evidence for most pelvic floor devices presented in abstracts at scientific meetings.

The American Urogynecologic Society (AUGS) published clinical guidelines on the [Assessment of Pelvic Floor and Associated Musculoskeletal System: Guide for Medical Practitioners](#) (2021). These guidelines aim to assist practitioners in performing an accurate assessment of the internal and external pelvic musculoskeletal systems to improve appropriate diagnosis and referral of patients with pelvic floor disorders. Physical therapy treatment principles for pelvic floor dysfunction are also discussed. Accurate pelvic floor assessments allows for prompt and appropriate referrals to physical therapy, thereby avoiding further decline and improving clinical outcomes.

The National Institute of Child Health and Development (NICHD) has a dedicated webpage to the [Pelvic Floor Disorders Network \(PFDN\)](#) (2017). The PFDN was established in 2001 to encourage collaborative research on pelvic floor disorders and to improve patient care. The PFDN includes eight clinical centers and a data coordinating center located in U.S universities and medical centers. PFDN research aims to inform healthcare providers about diagnosis, care and treatment of women with PFDs. General areas of research include observational and clinical studies examining the effectiveness of surgical and nonsurgical interventions for PFDs and preventive strategies.

The U.S. Food and Drug Administration (FDA) provided guidance on [Pelvic Organ Prolapse \(POP\): Surgical Mesh and Considerations and Recommendations](#) (2021). In 2019, the FDA ordered mesh manufactures to step selling devices for transvaginal repair of pelvic organ prolapse in the United States. Based on the review of available evidence, the FDA continues to believe the benefits do not outweigh the risks of surgical mesh placed transvaginally to treat POP. The FDA will continue to monitor the safety of these devices in women who have already received transvaginal mesh for POP repair.

The [World Health Organization \(WHO\)](#) published guidelines on community-level interventions that focus on Urinary Incontinence (2017). Non-pharmacological interventions for urinary incontinence such as prompted voiding, habit retraining and pelvic floor muscle training are explored. Six randomized controlled trials (RCTs) focused on pelvic floor muscle training were analyzed to assist with the development of the guidelines. The RCTs suggests that pelvic floor muscle training combined with bladder training benefits older women to manage urinary incontinence. The magnitude of urinary incontinence is larger in low-and middle-income countries and the use of non-pharmacological interventions may be more widely available and acceptable to women in low-resource settings.



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