



What are pelvic floor disorders and who is at risk?

Damage to the pelvic floor organs, tissues and muscles can occur from childbirth, obesity, chronic coughing, heavy lifting, disease or genetic predisposition.

Common problems and symptoms

INCONTINENCE

Loss of bladder or bowel control, including urine frequency and urine leakage, which affects more than 11 million American women.

EMPTYING DISORDERS

Difficulty urinating or moving bowels.

PELVIC PROLAPSE

A condition where one or more of the pelvic organs have become displaced from their normal position, usually "dropping" from its original location.

PELVIC OR BLADDER PAIN

This can include painful urination, pelvic discomfort or burning sensations in the region.

OVERACTIVE BLADDER

A frequent need to void, bladder pressure, urgency, urge incontinence or nighttime urination.

How do I know if I should see a urogynecologist?

If you are experiencing prolapse or have had problems with emptying disorders, incontinence and pelvic pain or discomfort, you might benefit from a consultation with Dr. Porter.



*F*or more information about Urogynecology, or to schedule a consultation, please call Gynecologic Specialists of the Palm Beaches at (561) 650-1800.



**GYNECOLOGIC
SPECIALISTS**
OF THE PALM BEACHES

Main Office

1515 North Flagler Dr., Suite 700
West Palm Beach, Florida 33401
(561) 650-1800 • Fax: (561) 802-5330

Boynton Beach

2300 South Congress Ave., Suite 104
Boynton Beach, FL 33426
(561) 650-1800 • Fax: (561) 802-5330

Palm Beach Gardens

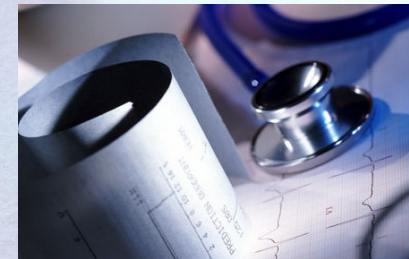
3401 PGA Blvd., Suite 320
Palm Beach Gardens, Florida 33410
(561) 650-1800 • Fax: (561) 802-5330

Wellington

10115 Forest Hill Blvd., Suite 101
Wellington, Florida 33414
(561) 650-1800 • Fax: (561) 802-5330



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UROGYNECOLOGY SERVICES

A division of Perinatal and Gynecologic Specialists of the Palm Beaches, Inc.

Urogynecology Services

Thousands of women suffer unnecessarily from pelvic floor disorders, such as urinary and fecal incontinence, voiding disorder, pelvic (bladder) pain, overactive bladder and prolapse, which cause embarrassment and affect their quality of life. Women who suffer from these disorders now have an important new healthcare resource available to them at Gynecologic Specialists of the Palm Beaches. Under the leadership of our fellowship-trained Urogynecologist, William Porter, M.D., we can accurately diagnose and treat pelvic floor disorders utilizing the latest surgical and non-surgical procedures available.

What is a Urogynecologist?

Urogynecology is a relatively new sub-specialty within Obstetrics and Gynecology dedicated to the care of women with disorders of the pelvic floor, an area that consists of the muscles, ligaments, connective tissues and nerves that support the rectum, uterus, vagina and bladder. In addition to completing medical school, Urogynecologists have completed a four-year residency in Obstetrics and Gynecology and an additional three-year fellowship in Urogynecology and Reconstructive Pelvic Surgery. This specialized training provides the added expertise needed to understand, diagnose, manage and treat pelvic floor disorders.



William Porter, M.D.
One of the area's leading Urogynecologists



State-of-the-art diagnostic procedures & testing

CYSTOSCOPY

A small, lighted scope is utilized to view the inside of the urethra and bladder in great detail to detect any inflammations, masses or other potential problems.

ULTRASOUND

This procedure uses sound waves to project an internal image that allows us to detect anomalies that can affect the pelvic organs.

URODYNAMIC TESTING

Through a small catheter inserted into the bladder, we can accurately evaluate the urinary tract and its functions, including monitoring the filling and drainage during urination.

INTRAVENOUS PYELOGRAPHY (IVP)

An X-ray examination designed to study the kidneys, bladder and ureters (*the tubes which carry urine from the kidneys to the bladder*). In this diagnostic procedure, an iodine-based material is injected through an IV. The X-ray tracks the dye's path through the pelvic organs and allows us to detect and identify abnormalities.

ELECTRODIAGNOSTIC TESTING

Also called electromyography, or EMG, this test uses electrodes placed on the body to evaluate the pelvic floor muscles' response to electric impulse. This allows us to detect muscle weakness and impaired strength that might be causing incontinence and other pelvic floor disorders.

What treatment options are available?

PELVIC FLOOR EXERCISES

Pelvic muscle strengthening activities, also called Kegel exercises, often alleviate problems of incontinence by improving urethral and rectal functioning. These exercises can also help to prevent prolapse.

MEDICATIONS

Several medical drug therapies are available to treat incontinence. Dr. Porter will review your options and discuss any potential side effects.

BIOFEEDBACK/ELECTRICAL STIMULATION

This therapy delivers a low-voltage, electric current to the pelvic floor to stimulate and strengthen a targeted group of muscles. The therapy is successful in treating stress incontinence and urge incontinence.

PESSARY

Worn like a diaphragm, this device can be used as a temporary or permanent treatment to manage prolapse by supporting the vagina, bladder, rectum or uterus. Pessaries are also designed to treat incontinence.

MODIFIED DIET

Dr. Porter can recommend a healthy diet that reduces bladder irritation and urinary frequency or urgency and constipation.

