Recruitment Training for the Pelvic Floor (PFM)

Unfortunately, 65% of people that think that they know how to contract their PFM’s are doing it incorrectly. The first step is to learn to produce a proper contraction of these muscles.

Lie on your back, or side, or sit with the spine in a neutral posture. Firmly palpate your abdomen 1-2 inches inside of your hip bones. Try the following cues to connect to (contract) your pelvic floor:

- Females - Think of your vagina as a clock, pubis is 12, tailbone is 6, left lateral wall is 3, right lateral wall is 9. Visualize drawing the 12 to the 6, the 6 to the 12 and finally gather the 3 and 9 toward the middle of the clock and gently lift.
- Females - Nod your clitoris down toward the vaginal opening, curl your tailbone toward your clitoris, now gently imagine sucking a jellybean up off of the floor toward your head.
- Females - Visualize ‘squeezing’/close off the urethra (as if to stop urine flow), hold this while you ‘squeeze’/close the anus (as if to stop flatulence) and gently lift.
- Males - visualize gently drawing your testicles up and forward into your abdomen. (aka ‘bring the boys home’).
- Males or Females - Think about a guy wire or line from the anus up to the back of your pubic bone and connect along this line.

Maintain your lateral costal breath throughout this exercise. When contracting your PFM you should feel a deep tension in your abdomen (under your fingers). You should NOT feel your buttocks tighten, legs rotate out or movement of your spine or pelvis. If you feel bulging of the abdomen, butt gripping or spinal movement then you are not properly contracting just your pelvic floor muscles. A correct contraction should result in a very gentle tension deep in the abdomen (often very hard to feel initially).

Co-ordinating a PF Contraction with Transversus Abdominis and the Deep Fibers of Multifidus

The next step is to learn to co-contract the PFM’s in conjunction with transversus abdominis and the deep lumbosacral multifidus. These will be added as progressions once you can successfully maintain an isolated PFM contraction. As you practice connecting to your pelvic floor muscles combine your cues to ensure that TrA and dMF are co-contracting (your physiotherapist will confirm both your cues and your performance of this task).

Endurance/Strength Training with a focus on the Pelvic Floor

Hold Em’s
- Breathe in (widen your lower rib cage) then breathe out using your PF cue. Engage and hold the contraction for 3-5 seconds, while breathing normally.
- Repeat 10x. Perform these in supine, hands and knees, sitting and standing.

Speed Em’s
- Breathe in (widen your lower rib cage) then breathe out using your PF cue. Perform a quick contraction/lift then immediately let go and relax.
- Repeat 10x (work towards 15-20-30 reps). Perform these in supine, hands and knees, sitting and standing.

Hold Em’s with Functional Movement
- Heel Slides – Lie on your back with your hips and knees bent. Perform a ‘hold em’ then slowly slide one leg straight while maintaining your PF contraction and breath. Slide the leg back to its original position. Repeat with the opposite leg. Repeat 5x/side.
- Wipers - in the same position as above, perform a ‘hold em’. Keep your low back and pelvis level and slowly move one bent knee out to the side. Maintain your PF contraction and exhale to bring your leg back to neutral. Repeat this with the opposite leg. Repeat 5x/side.
- Leg lifts – in the same position as above, perform a ‘hold em’. Slowly bring one knee toward your chest. Maintain your PF contraction and on the exhale return the leg to the floor and repeat this with your opposite leg. Repeat 5x/side.

The final step is to be able to co-contract all of the deep muscles during functional activities, which include nose blowing, coughing, sneezing, walking, jumping and lifting. Retraining the deep muscle system requires repetitive use and the more you use it, the less you will be likely to lose it.