Editorial

Empowering pelvic floor rehabilitation: Unveiling technological innovations in the pelvic floor muscle chair; insights and hurdles in the Pakistani context

Saleh Shah[1]*

Owing to the expeditious advancement of research and technology, the Physical therapy and rehabilitation sciences have made a remarkable pace in recent years. This blooming enhancement has metamorphosed pelvic floor dysfunction treatment and has a great impression on the medical and allied health sciences field. In this article, technological advancements in pelvic floor muscles are explored. It also overviews Pakistan-specific challenges and considerations[1].

Intending to help and manage patients with pelvic floor dysfunction, biofeedback training uses sensors to put forward real-time feedback on pelvic floor muscle activity. It has illustrated Potential enhancement in pelvic floor muscle functioning and curtailing symptoms of pelvic floor muscle dysfunction[2]. The pelvic floor muscles are stimulated using low-intensity electrical currents, resulting in solid muscle contraction, and strengthening. It is promising in improving pelvic floor muscle dysfunction and urine incontinence[3]. Behavioral therapy aims to modify the routines and behavior open to pelvic floor dysfunction. It necessitates lifestyle modifications, bladder retraining, and pelvic floor muscle exercises. It has victoriously improved pelvic floor muscle weakness and urinary incontinence as well[4]. Manual treatment methods that include physical manipulation of the pelvic floor muscles and associated tissues include trigger point release and myofascial release. These methods reduce muscular stress, enhance blood flow, and increase muscle function[5].

While developed nations have successfully incorporated modern technology into rehabilitation practices, the Pakistani context presents unique insights and challenges. The lack of an updated curriculum, limited training opportunities, and budgetary constraints hinder the adoption of the latest technological advancements in pelvic floor rehabilitation in Pakistan. To overcome these hurdles, the following steps are recommended;

Curriculum Update: Rehabilitation degree programs should revise their curricula to align with global advancements in technology. The inclusion of courses focusing on pelvic floor rehabilitation and modern technological interventions would better equip future professionals. *Continuous Professional Development:* Continuous professional development programs should be designed to upskill already graduated professionals in the field of pelvic floor rehabilitation technology. These programs will ensure that healthcare practitioners stay updated with the latest innovations and can effectively incorporate them into their practice. *Increased Budget Allocation:* Allocating a higher budget to the rehabilitation sector, specifically for technological advancements, is crucial. Adequate financial resources would enable the acquisition of state-of-the-art equipment,

Designation & Affiliation
[1.] Assistant Professor, Faculty of Allied Health Sciences, Superior University, Lahore Pakistan

Citation
Shah S. Empowering pelvic floor rehabilitation: Unveiling technological innovations in the pelvic floor muscle chair; insights and hurdles in the Pakistani context. T Rehabili. J. 2023:07(03); 01-02. doi.org/10.52567/trj.v7i03.10

Article History
Received on: 03-05-2023
Revision on: 14-08-2023
Published on: 30-09-2023

Correspondence*
Saleh Shah. Assistant Professor, Faculty of Allied Health Sciences, Superior University, Lahore Pakistan
E-mail: salehshah83@gmail.com

infrastructure development, and research initiatives, thereby facilitating the integration of technological innovations in pelvic floor rehabilitation.

Finally, technological innovations have transformed the landscape of pelvic floor rehabilitation, offering new possibilities for improved outcomes. In the Pakistani context, addressing the insights and hurdles specific to the country is vital for empowering pelvic floor rehabilitation and ensuring that individuals with pelvic floor disorders receive the benefits of modern technology.

REFERENCES

1. Shi Q, Dong B, He T, Sun Z, Zhu J, Zhang Z, et al. Progress in wearable electronics/photonics—Moving toward the era of artificial intelligence and internet of things. InfoMat. 2020;2(6):1131-62.[CrossRef]
2. Dumoulin C, Cacciari LP, Hay-Smith EJC. Pelvic floor muscle training versus no treatment, or inactive control treatments, for urinary incontinence in women. Cochrane Database Syst Rev. 2018;10(10). [CrossRef] [PubMed]
3. Shendy W, El Semary M, Battecha K, Abdel-Azim M, Mourad H, El Gohary A. Efficacy of transcutaneous electrical nerve stimulation versus biofeedback training on bladder and erectile dysfunction in patients with spinal cord injury. Egypt. J. Neurol. Psychiatry Neurosurg. 2015;52(3):194-200. [CrossRef]
4. Burgio KL, Goode PS, Locher JL, Umlauf MG, Roth DL, Richter HE, et al. Behavioral training with and without biofeedback in the treatment of urge incontinence in older women: a randomized controlled trial. Jama. 2002;288(18):2293-9. [CrossRef] [PubMed]
5. Rosenbaum TY, Owens A. The role of pelvic floor physical therapy in the treatment of pelvic and genital pain-related sexual dysfunction (CME). J Sex Med. 2008;5(3):513-23; quiz 24-5. [CrossRef] [PubMed]