PELVIC 101

Your Daily Quick-Reference Guide

Persistent pelvic pain affects 15% of women and 10% of men — and it's been underdiagnosed, undertreated, and ignored for too long. Pain is not something you should have to live with or explain away.

BASIC ANATOMY

The **pudendal nerve** carries sensation from the clitoris, labia, perineum, and anus — which is why pain can show up anywhere from the lower abdomen to the buttocks and thighs.

The **pelvic floor** is a hammock of muscles from pubic bone to tailbone. It supports your organs and controls bladder/bowel function.

PELVIC FLOOR TOOLKIT

A healthy pelvic floor isn't just strong — it knows how to relax.

Diaphragmatic breathing: Inhale for 4 counts (belly + pelvic floor soften), exhale for 4 counts. Repeat for one minute, daily.

COMMON CONDITIONS AT A GLANCE

Endometriosis	Uterine-like tissue grows outside the uterus. Severe period pain, pain with intimacy, fatigue.
Chronic Pelvic Pain Syndrome	Pain from belly button to mid-thigh, 6+ months. Urinary symptoms, pain with sitting.
Pelvic Floor Muscle Hypertonia	Muscles stuck tense/contracted. Aching pelvis, urgency, constipation.
Levator Ani Syndrome	Chronic pelvic floor spasm. Dull rectal ache, worse with sitting.
Central Sensitization	Nervous system amplifies pain signals. Pain spreads, flares with stress/poor sleep.

ENDOMETRIOSIS: STAGE ≠ PAIN

Endometriosis is measured in four stages by extent of disease — **not by how much pain it causes**. Someone with Stage I can have severe pain; someone with Stage IV may have little.

I — Minimal	II — Mild	III — Moderate	IV — Severe
A few small lesions, often invisible on imaging.	More lesions, may involve an ovary.	Deeper implants, ovarian cysts.	Extensive implants, dense adhesions.

THE PATH TO TREATMENT

1. Pre-Hab
Weeks before any procedure

2. Treatment
Office-based · surgery when indicated

3. Post-Hab
The months after treatment

THE PRM PROTOCOL™ AT A GLANCE

Ultrasound-guided, in-office treatment — **Reverse** the inflammatory cascade, **Reset** the pelvic environment, **Retrain** the nerves and muscles. Under 30 minutes, no downtime.

96%	88%	75%	68%
fewer ER visits	0 missed workdays	pain & function gains	less opioid use

DAILY LIFESTYLE SUPPORT

- **Anti-inflammatory eating** — vegetables, fruit, omega-3s, fiber
- **Gentle movement** — walking, swimming, restorative yoga
- **Mindfulness & breathwork** — daily diaphragmatic breathing
- **Sleep** — consistent wake time, dim screens before bed
- **Stress reduction** — check in and release pelvic tension often

RESOURCES

- Symptom tracker — track pain, triggers, cycles
- Endometriosis symptom quiz — a conversation starter, not a diagnosis
- Patient stories — real journeys from patients like you
- pelvicrehabilitation.com/blog — articles from our specialists

Ready to talk to a specialist?

Request an appointment at pelvicrehabilitation.com/request-an-appointment