What happens when...

What to expect inside clinics that help you at different life stages.

Women’s healthcare has changed dramatically in the past three or four decades in Australia. When we look at the wide range services available to us, it’s easy to forget that many of these services were not around in our grandmothers’ time.

Pelvic floor physiotherapists and endocrinologists are two such services, which now both play an important role in women’s health. Each can be essential when it comes to helping a woman get fit and well after childbirth, or simply during the course of a woman’s lifetime, particularly around menopause.

These highly-trained professionals work within the Australian medical system and can be found in many hospitals, specialised women’s clinics, health centres and in private practice.

So, what happens when you visit a pelvic floor physiotherapist or an endocrinologist?
Pelvic floor physiotherapists

Pelvic floor physiotherapists help women rehabilitate their pelvic floor muscles. These muscles can be weakened by childbirth, surgery, heavy lifting, being overweight, constipation or menopause. The pelvic floor muscles support the womb (uterus), bladder and bowel (colon), forming a ‘sling’ from the pubic bone at the front to the tailbone at the back.

If the muscles are weak, this can affect bladder and bowel control, resulting in incontinence (leakage) or prolapse.

For other women, their pelvic floor muscles may be overactive; that is, they can switch on involuntarily when they should be relaxing. These women need to learn to release their muscles. Overactivity can cause difficulty with having sex, emptying the bladder or bowels or using tampons.

Training and registration

Physiotherapists study for a bachelor degree in physiotherapy over four years at university or they can do a double degree over six years. Specialising in pelvic floor physiotherapy may involve a postgraduate certificate or masters program at university level. They are registered with the Physiotherapy Board of Australia and Australian Health Practitioner Regulation Agency (APHRA), so must adhere to strict standards.

Consultation

You don’t need a doctor’s referral to see a pelvic floor physiotherapist. However, if a doctor refers you with a chronic disease management plan, you can get a Medicare rebate for up to five sessions.

When you see the physio, they will take a full history of your bladder and bowel function, sexual function and medical and surgical history. They will also be interested in your fitness activities. Your pelvic floor muscles are usually examined.

Treatment

This could include exercises, biofeedback (electronic monitoring), and manual treatment of the muscles. Advice about daily activities and fitness, as well as good bladder and bowel habits, will be given. Functional training of the pelvic floor gets your muscles back working effectively when you need them.

Jean Hailes says

There is good evidence that shows that pelvic floor physiotherapy can help with urinary incontinence and prolapse and can lessen the effects of childbirth and menopause on the pelvic floor, says Jean Hailes pelvic floor physiotherapist Janetta Webb. A pelvic floor physiotherapist is an important part of the multidisciplinary team managing bladder and bowel health, sexual difficulties and pelvic pain. Women should not have to put up with incontinence, pelvic pain or discomfort.

GETTING ADVICE

When visiting a medical professional it’s best to do some research beforehand. Ask a trusted health professional if they can refer you to someone they recommend.

When you have your first consultation, ask questions about their experience and interests. A good practitioner will be happy to answer any questions you may have before treatment.

To find a registered physiotherapist in your area, visit the Australian Physiotherapy Association, www.physiotherapy.asn.au or the Continence Foundation of Australia Physiotherapy Group, www.cfaphysios.com.au

To find an endocrinologist, there is a ‘search for an endocrinologist’ webpage on the Endocrine Society of Australia’s website, www.endocrinesociety.org.au

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Endocrinologists
An endocrinologist is a doctor who has undergone specialist training to work with the body’s endocrine – or hormone – system. Hormones are chemical messengers, which play many important roles in keeping our bodies working properly. An endocrinologist assesses whether hormones are being made in the correct amount (not too little, not too much) and what consequences any variations might be having on the body.

Typical conditions an endocrinologist assesses and treats in women include menopause and perimenopause (physical or psychological symptoms), thyroid conditions (over or under-function, nodules, inflammation), ovarian conditions (polycystic ovary syndrome), pancreatic problems (diabetes), pituitary and adrenal problems, or rarer conditions.

Training and registration
The pathway to become an endocrinologist involves attending medical school at university, basic hospital training including an intern year and usually a couple of ‘resident’ years in hospital, then physician training while in the hospital setting, which includes specialist exams. After this, the doctor will seek an endocrinology training job in a major hospital. They will usually work at several hospitals while training over the course of three years, to gain broad experience in different conditions. Many endocrinologists also complete a PhD in a particular area of hormone research.

Consultation
To see an endocrinologist, you need a referral from your GP. During the initial consultation, the endocrinologist will ask many questions – about your past medical and family history, medication or supplement use, social circumstances, diet and exercise and also take a full history of the symptoms you present with.

Afterwards they will usually do an examination, depending on your symptoms. They may also organise other tests to assist in sorting out any possible hormonal issues, which may include blood or urine tests or X-rays.

Treatment
Depending on the presenting problem, symptoms and test results, treatment options are very broad and may include lifestyle changes (diet or exercise), hormone treatments (to either block overproduction or to supplement underproduction of hormones), other medical treatments or surgery.

Jean Hailes says
Not everyone needs to see an endocrinologist, but if a woman has a problem that may be hormonal in nature and needs specialist assessment and advice, then a visit to the endocrinologist can be beneficial, says Jean Hailes endocrinologist Dr Sonia Davison.

Many women are essentially healthy, for instance, but they may have problems during perimenopause and menopause that are due to their hormones changing. Effective education and advice for women (and doctors) can be life-changing, in some cases. Don’t be afraid to talk to an endocrinologist about any health concerns you might have.

3 THINGS TO KNOW
1. A physiotherapist helps increase a person’s mobility and strength and reduce pain by teaching them gentle stretches and exercises. A pelvic floor physio is specially trained to help strengthen or rehabilitate pelvic floor muscles.
2. An endocrinologist is a specialist medical doctor who works with a person’s hormone system. They can help diagnose, treat and manage a wide range of conditions such as thyroid problems or menopause symptoms.
3. People with a complex or chronic disease may be able to claim up to five sessions of physiotherapy with a Medicare rebate. Check with your GP first.