



Cyclist's Syndrome

The mild weather of northern California coupled with our challenging rolling hills and beautiful landscape is a cyclist's dream. Unfortunately, some cyclists develop genital and pelvic pain known as 'Cyclist's Syndrome'. Cyclist's Syndrome is typically characterized by pain upon sitting (especially on a bike seat), perineum pain, genital pain and/or numbness, rectal/anal pain, and urinary and sexual dysfunction. Hours of sitting on a bicycle seat in combination with a compromised posture can result in muscle hypertonus, myofascial trigger points, neural compression, and connective tissue dysfunction. More specifically, the small bike seat compresses the tissue between the perineum and the coccyx restricting circulation in the connective tissue as well as compressing the pudendal nerve. This chronic compression can cause tissue hypersensitivity, pelvic floor muscle dysfunction, and neural irritability which results in sitting, genital, perineum and/or anal/rectal pain and urinary and/or sexual dysfunction. In addition, a cyclist's posture often causes psoas, quadratus lumborum, and abdominal muscle hypertonus and myofascial trigger points. Dysfunction in these muscles will contribute to pelvic pain and dysfunction. At the Pelvic Health and Rehab Center we successfully treat this patient population by normalizing muscle tone and motor control, eliminating myofascial trigger

points, eradicating neural irritability, and normalizing connective tissue mobility. With the correct physical therapy treatment, the pain and dysfunction associated with Cyclist's Syndrome can be reversed and allow these patients to get back on their bikes.

Winter Sport Pelvic Injuries

Even the most advanced skier, snowboarder, or ice skater will fall. Many of these falls are on the sacrum and/or coccyx. Repetitive falls on the posterior pelvic girdle can result in sacroiliac joint and/or coccyx mal-alignment. Joint mal-alignments such as these will cause compensatory muscle activation which often leads to muscle hypertonus and myofascial trigger points. These patients typically complain of tailbone pain, sacral pain, pain with sitting, pain transitioning from sitting to standing and vice versa, hip pain and low back pain. In order to realign these joints, the muscular dysfunction must be eliminated as well as the joints adjusted. The physical therapists at the Pelvic Health and Rehabilitation Center specialize in treating the musculoskeletal dysfunctions related to coccyx and sacroiliac joint mal-alignment. The treatment programs include manual techniques to normalize muscle tone and motor control, eliminate myofascial trigger points, joint re-alignment, and a home exercise program.