Barral Institute Case Study Visceral Manipulation - IBS and Incontinence Tanye Hage Maisel, PT

Patient Symptoms

Fecal incontinence, IBS, poor bowel formation. Increased frequency of voiding. Three patients treated for same symptoms this fall. All three had abdominal and pelvic scar tissue from hysterectomy or appendectomy. One also had Parkinsons, and all had some degree of pain and poor control of pelvic floor, as well as poor motility of digestive system.

Evaluation / Treatment

Treatments two times per week for one month, then one time per week for a total of 6-15 sessions. Primary treatment with Visceral Manipulation, scar release, a bit of CST, minimal muscle energy, minimal biofeedback for levator ani muscle, pelvic stabilization program and patient education regarding proper diet and exercise.

Outcome

All were able to report regular one time per day bowel movements with good formation of bowel and improved muscle tone to control bowels, as well as decreased pain both in spine, pelvic/abdomen and pelvic floor.