Rakel Gabrielsen 2025 et al Abstract

PFM Resting Activity And PFM Contractions Of Women With Endometriosis

Objective
The study examined the link between pelvic and genital pain, dyspareunia, and increased pelvic floor muscle (PFM) tone using an electronic questionnaire and **surface electromyography** (**sEMG**). It aimed to investigate the association between PFM resting activity and pelvic and genital pain and dyspareunia, and whether there is an association between PFM resting activity and activation during attempts at PFM maximal voluntary contractions (MVCs) in women with endometriosis.

Results
No significant association between resting activity, pelvic and genital pain or location and concerns of dyspareunia was found. A significant positive association between PFM resting activity and activation during attempts at MVCs of the PFM was found.

Contrary to the hypothesis, higher PFM resting activity resulted in more activation of the PFM during attempts at MVCs.

Participants and Researchers
A cross-sectional study involving 80 women with endometriosis and pelvic and genital pain. Mean age was 29 years and nine (11%) were parous.

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Methods
The electronic questionnaire included background information, pelvic and genital pain (numeric rating scale 0–10) and questions about location and concerns of dyspareunia. Associations between variables were analyzed using multiple linear regression with the use of **surface electromyography** (**sEMG**).

The PFM activity assessments were conducted by a specialist woman's health physical therapist. PFM resting activity and activation during attempts at MVCs of the PFM were assessed by intravaginal **surface electromyography** (**sEMG**) using a **NeuroTrac MyoPlus** device (Verity Medical).

The full abstract can be found at
https://link.springer.com/article/10.1007/s00192-025-06190-2