



“Italian Society of Urodynamics’ (SIUD) Postpartum pelvic dysfunctions card” SIUD PPD CARD

SIUD PPD CARD

SECTION II: POSTPARTUM SCREENING CARD

1) URINARY INCONTINENCE

YES NO

Type: stress urge mixed other

ICIQ-SF

(INTERNATIONAL CONSULTATION ON INCONTINENCE QUESTIONNAIRE SHORT FORM)

Thinking about how you have been, on average, over the past four weeks:

1. How often do you leak urine?*

- 0 never
- 1 about once a week or less often
- 2 two or three times a week
- 3 about once a day
- 4 several times a day
- 5 all the time

2. We would like to know how much urine you think leaks.

How much urine do you usually leak (whether you wear protection or not)?

- 0 None
- 2 A small amount
- 4 A moderate amount
- 6 A large amount

3. Overall, how much does leaking urine interfere with your everyday life?

Please ring a number between 0 (not at all) and 10 (a great deal)

0 1 2 3 4 5 6 7 8 9 10

*tick the box if you leak urine more than once a month, less than once a week

**CUT OFF
SCORE ≥ 1**



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2) ANAL INCONTINENCE

Fecal incontinence yes no

Flatus incontinence yes no

Soiling yes no

WEXNER SCORE

Incontinence	Never	Rarely Less than 1/month	Sometimes More than 1/month Less than 1/week	Usually More than 1/week Less than 1/day	Always More than 1/day
Solid	0	1	2	3	4
Liquid	0	1	2	3	4
Gas	0	1	2	3	4
Wear pad	0	1	2	3	4
Lifestyle altered	0	1	2	3	4

Total score

CUT OFF

At least 1 of the following :

- **SCORE > 0 (almost 1) if solid or liquid incontinence**
- **SCORE > 1 (almost 2) if flatus incontinence**



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3) PELVIC ORGAN PROLAPSE

Simplified POP-Q STAGING

STAGE 0	No prolapse demonstrated
STAGE 1	Most distal portion of the prolapse is more than 1 cm above the level of the hymen
STAGE 2	Most distal portion of the prolapse is 1 cm or less proximal to or distal to the plane of the hymen
STAGE 3	The most distal portion of the prolapse is more than 1 cm below the plane of the hymen.
STAGE 4	Complete eversion of the total length of the lower genital tract is demonstrated

Most distal portion is:

anterior central posterior

CUT OFF
STAGE \geq 2



4) PERINEAL PAIN AND DYSPAREUNIA

	YES	NO
1-Perineal pain		
2- If “yes”, do you think it is a problem for you?		
3-Dyspareunia		
4- If “yes”, do you think it is a problem for you?		
5- Resumption of sexual acitivity		
6- If “yes”, how many weeks after delivery?		

PERINEAL PAIN

VISUAL ANALOGIC SCALE (0-10)

DYSPAREUNIA

VISUAL ANALOGIC SCALE (0-10)

MARINOFF dyspareunia scale

0- No dyspareunia

1- Intercourse is painful but the degree of discomfort does not prevent penetration

2- The pain prevents intercourse from taking place on most occasions

3-Pain results in total apareunia

REDUCED VAGINAL SENSITIVITY AT INTERCOURSE

(compared to pre-pregnancy sensitivity)

VISUAL ANALOGIC SCALE (0-10)

CUT OFF

If perineal pain or dyspareunia are a problem
(if answer to questions 2 or 4 is “yes”)



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5) PELVIC FLOOR MUSCLE DYSFUNCTION

MODIFIED OXFORD GRADING

0 = nil (no discernible muscle contraction)

1 = flicker (a flicker or pulsation is felt under the examiner’s finger)

2 = weak (an increase in tension is detected without any discernible lift)

3 = moderate (muscle tension is further enhanced and characterized by lifting of the muscle belly and also elevation of the posterior vaginal wall; a grade 3 or stronger can be observed as an in-drawing of the perineum and anus)

4 = good (increased tension and a good contraction are present which are capable of elevating the posterior vaginal wall against resistance)

5 = strong (strong resistance can be applied to the elevation of the posterior vaginal wall; the examining finger is squeezed and drawn into the vagina)

Grade

left

right

CUT OFF

Grade ≤ 2

(even if one side only)



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SUMMARY TABLE

SELECTION CRITERIA FOR MANAGEMENT

Dysfunction	Evaluation tool	Cut off
UI	ICI q SF	≥ 1
AI	Wexner score	≥ 1 if solid or liquid and/or ≥ 2 if gas
POP	Simplified POP q staging	≥ 2
Pain/ dyspareunia	VAS	If it is a problem for the woman
Pelvic floor	Oxford Score	≤ 2