Pelvic Floor Physical Therapy

& Tethered Cord Syndrome — A Guide for Patients & Families

What Is Tethered Cord Syndrome?

The spinal cord normally hangs freely and moves as you bend and grow. In tethered cord syndrome (TCS), abnormal tissue holds the cord in place, stretching it over time. This can affect the nerves that control your legs, bladder, bowel, and pelvic floor muscles.

Why Does It Affect the Pelvic Floor?

The lowest nerves of the spinal cord (the sacral nerves) control your bladder, bowel, and pelvic floor muscles. When the cord is tethered, these nerves can be stretched too — which is why bladder, bowel, and pelvic pain symptoms often show up together in TCS.

Symptoms You Might Notice

- Bladder: urgency, frequent trips to the bathroom, leaking, trouble fully emptying, recurrent UTIs from incomplete emptying
- Bowel: constipation, straining, accidental leakage, reduced urge sensation
- Sexual health: reduced sensation, arousal changes/erectile dysfunction, difficulty with orgasm or reduced orgasm intensity
- Pain: pain or discomfort in the pelvic area or tailbone, pain with sexual intercourse

How Pelvic Floor Physical Therapy Can Help

PT can't undo the tethering itself — that's a structural issue your surgical team addresses. But PT can meaningfully improve how your bladder, bowel, and pelvic floor muscles function, before and after any surgery.

- Manual therapy: abdominal massage and gentle release of tight pelvic floor muscles
- Guided exercises: stretches and strengthening moves matched to your specific needs
- Biofeedback: sensors help you see and relearn muscle coordination
- Bladder & bowel retraining and posture coaching for daily habits

Toileting Posture

Feet flat (on the floor or a footstool), knees at or above hip height, leaning slightly forward, with your belly and pelvic floor relaxed. This helps relax the muscle that normally kinks your rectum shut, making bowel movements easier and less straining.

Daily Habits That Help

- Bladder: aim to go roughly every 2–4 hours while awake, without straining
- Bowel: anywhere from 3x/day to 3x/week is normal — stools should be soft and easy to pass (sausage shape)
- Water Intake: a general target is about half your body weight in ounces per day
- Fiber Intake: whole grains, fruits, vegetables, and legumes, increased gradually; goal is 14 grams per 1,000 calories consumed (generally 25-40 grams for an adult)
- Healthy bladder and bowel habits: don't rush or strain; don't hold bladder/bowel urges too long — respond in a timely, unhurried way

When to Contact Your Care Team

- New or worsening leg weakness, numbness, or pain
- A sudden change in bladder or bowel control that had been improving
- For children: new symptoms or changes during a growth spurt are worth a call

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