



# PELVIC DIAPHRAGM

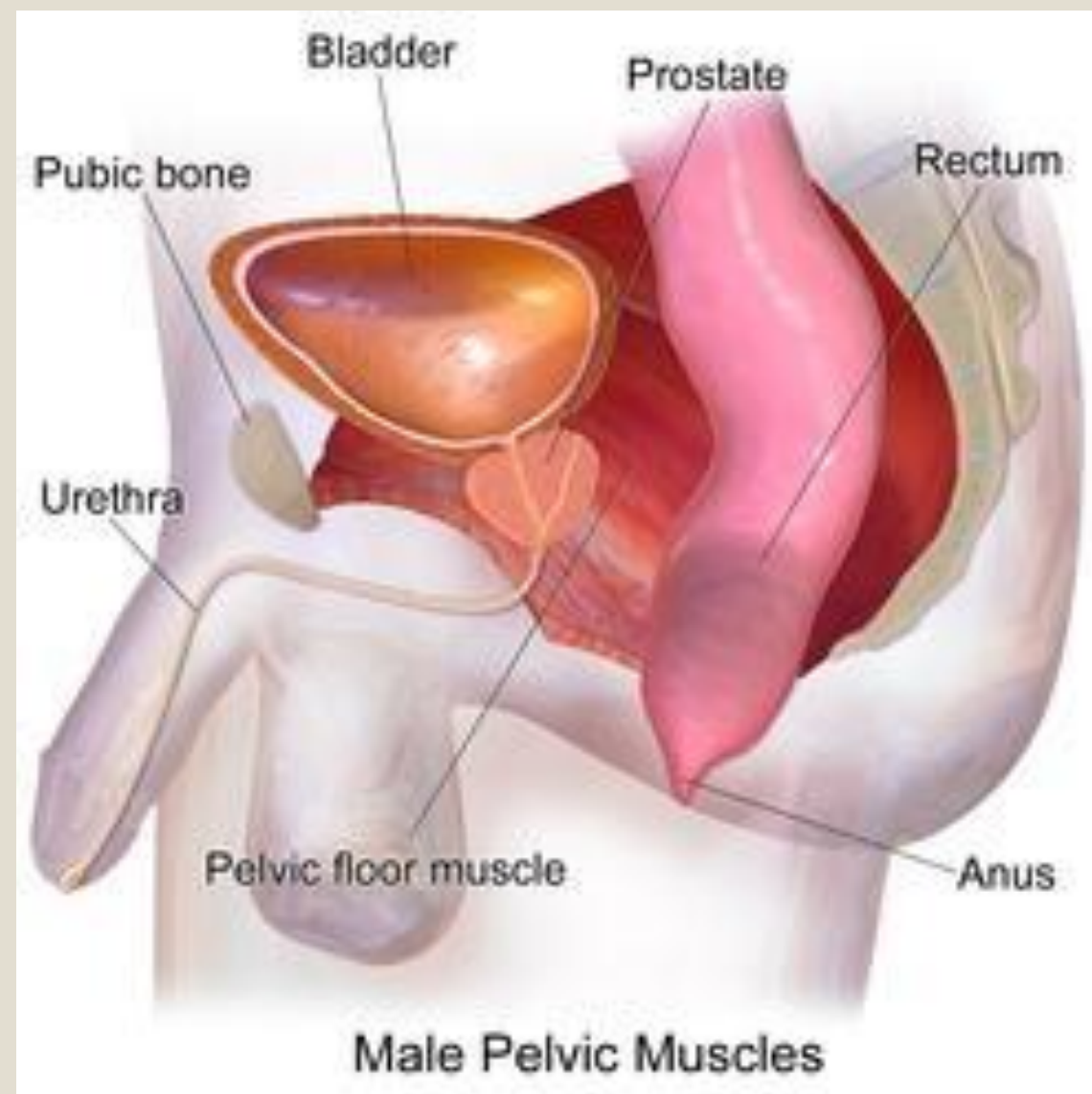
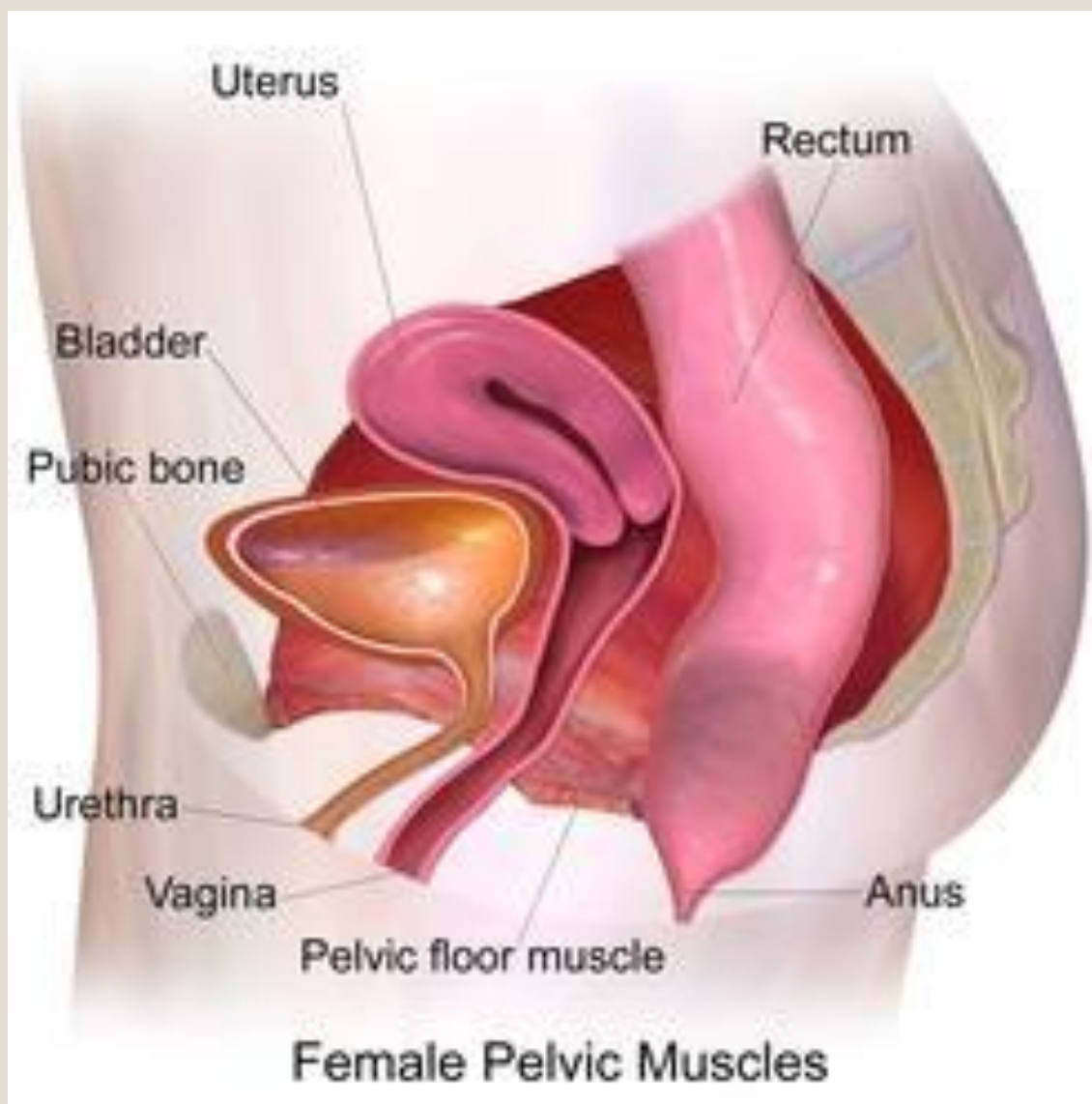
Syeda Sundus Shah Bokhari  
Roll no. 86

# LEARNING OBJECTIVES

- Definition
- Function of pelvic diaphragm
- Components of pelvic diaphragm
- Neuro vascular supply
- Lymphatic drainage
- Diseases of pelvic diaphragm

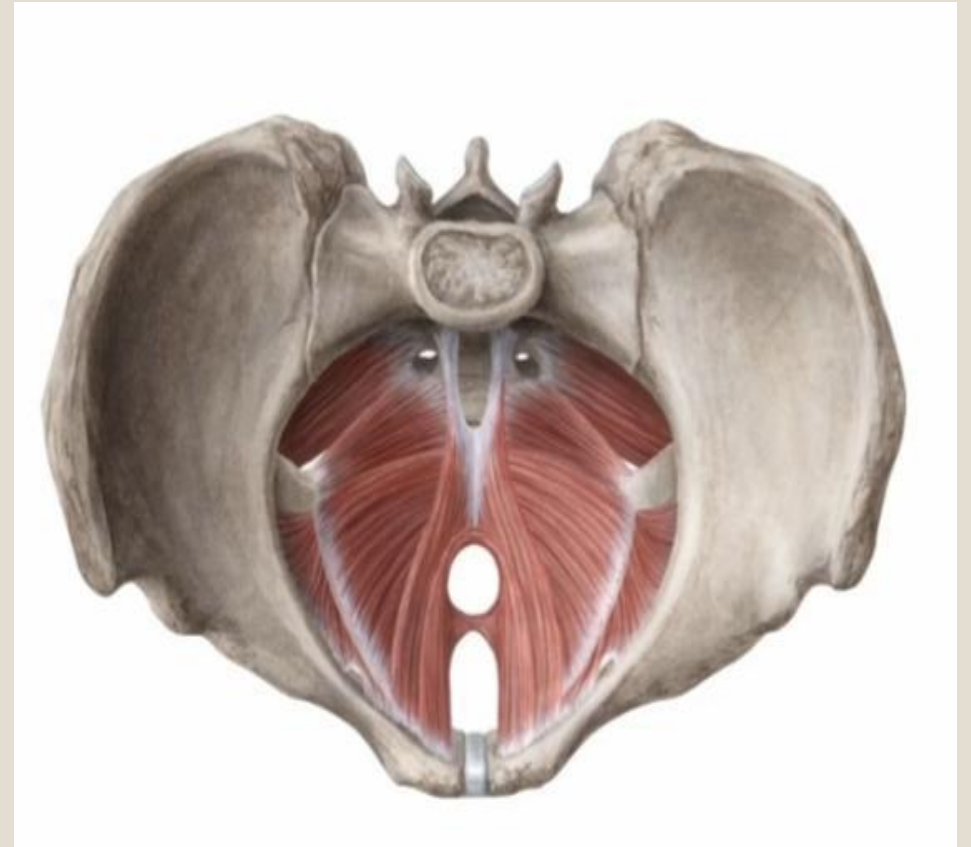
# PELVIC FLOOR

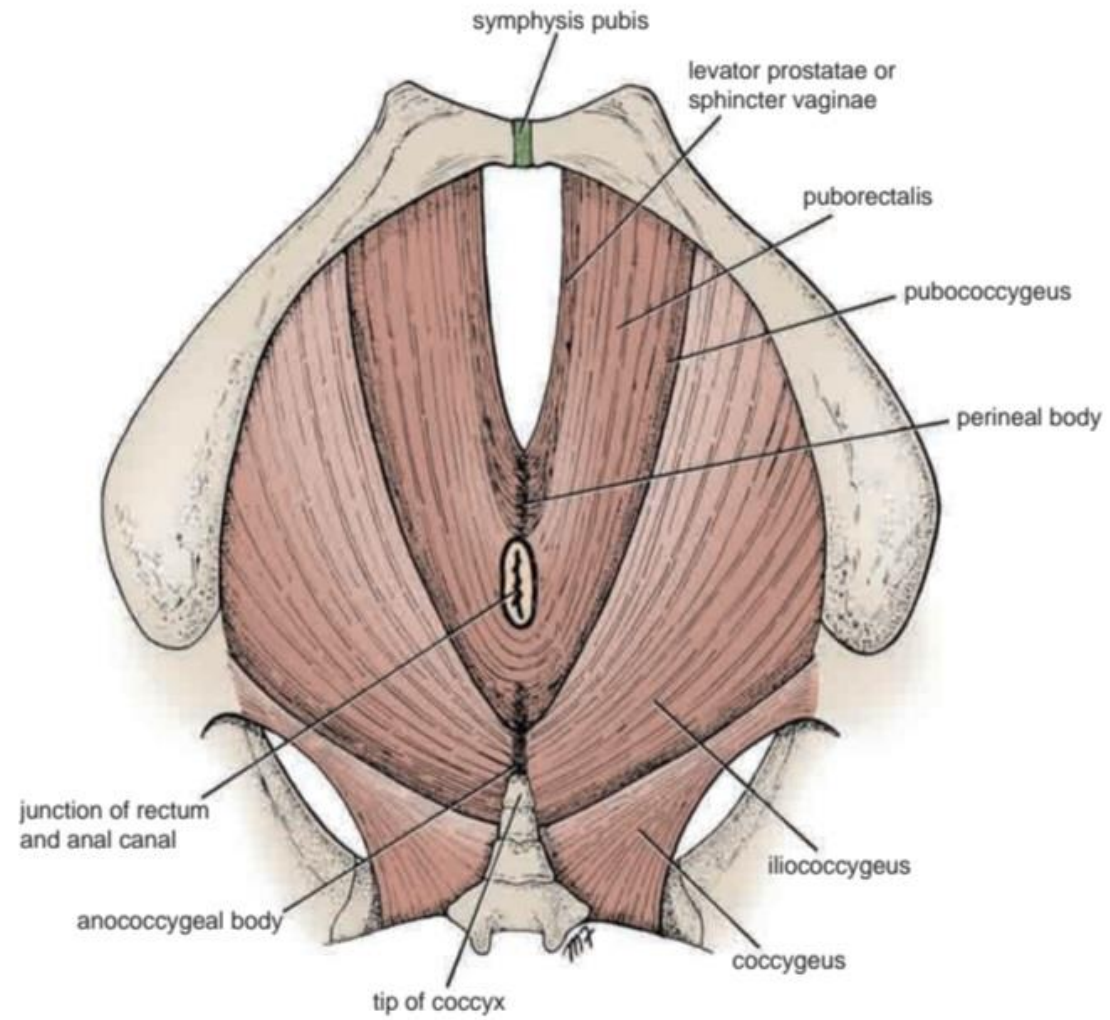
It is a basin/funnel shaped structure made of pelvic diaphragm and their associated fascia supporting the pelvic viscera i.e. rectum, urinary bladder, uterus in females.



# PELVIC DIAPHRAGM

The pelvic diaphragm is a group of muscles present in the floor of pelvis separating pelvic cavity proper above and perineum below. It is incomplete anteriorly to allow passage for urethra ( and Vagina in case of females)





# FUNCTIONS OF PELVIC DIAPHRAGM

1. Support and maintain pelvic viscera in position.
2. Resistance to rise in intrapelvic/intraabdominal pressure ( in coughing, sneezing, lifting heavy objects, etc)
3. Provide urinary and faecal continence
4. Support during childbirth to presenting fetal part by holding the fetus in place during uterine contraction.

# COMPONENTS OF PELVIC DIAPHRAGM

## 1. LEVATOR ANI MUSCLES:

- Anterior fibres (Levator prostatae or sphincter vaginae)
- Intermediate fibres (Puborectalis and pubococcygeus)
- Posterior fibres (Iliococcygeus)

## 2. COCCYGEUS MUSCLE

## 3. Fascia of Obturator internus and piriformis muscles



# LEVATOR PROSTATATAE OR SPHINCTER VAGINAE

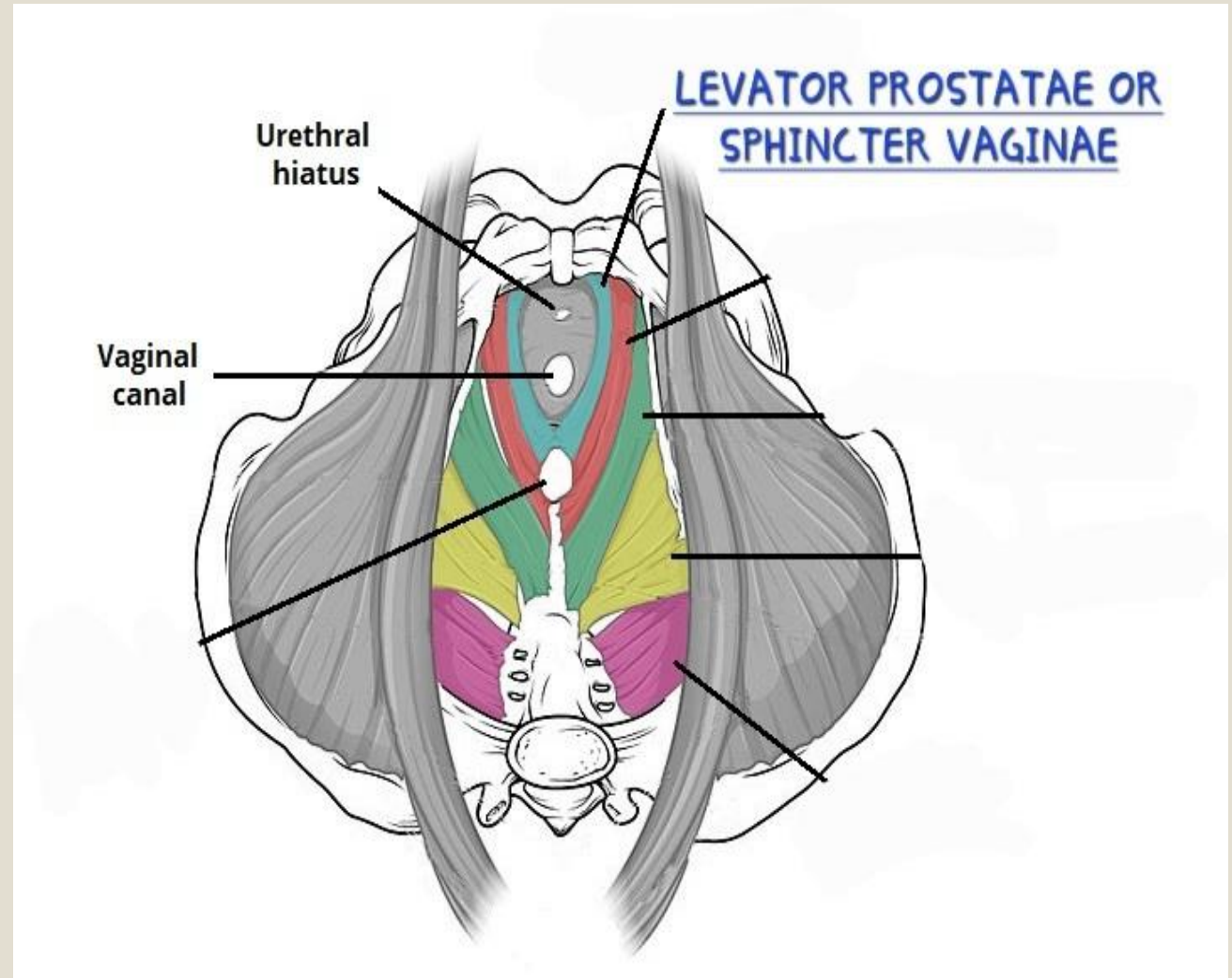
Medial most muscle.

## ORIGIN

Body of pubis

## INSERTION

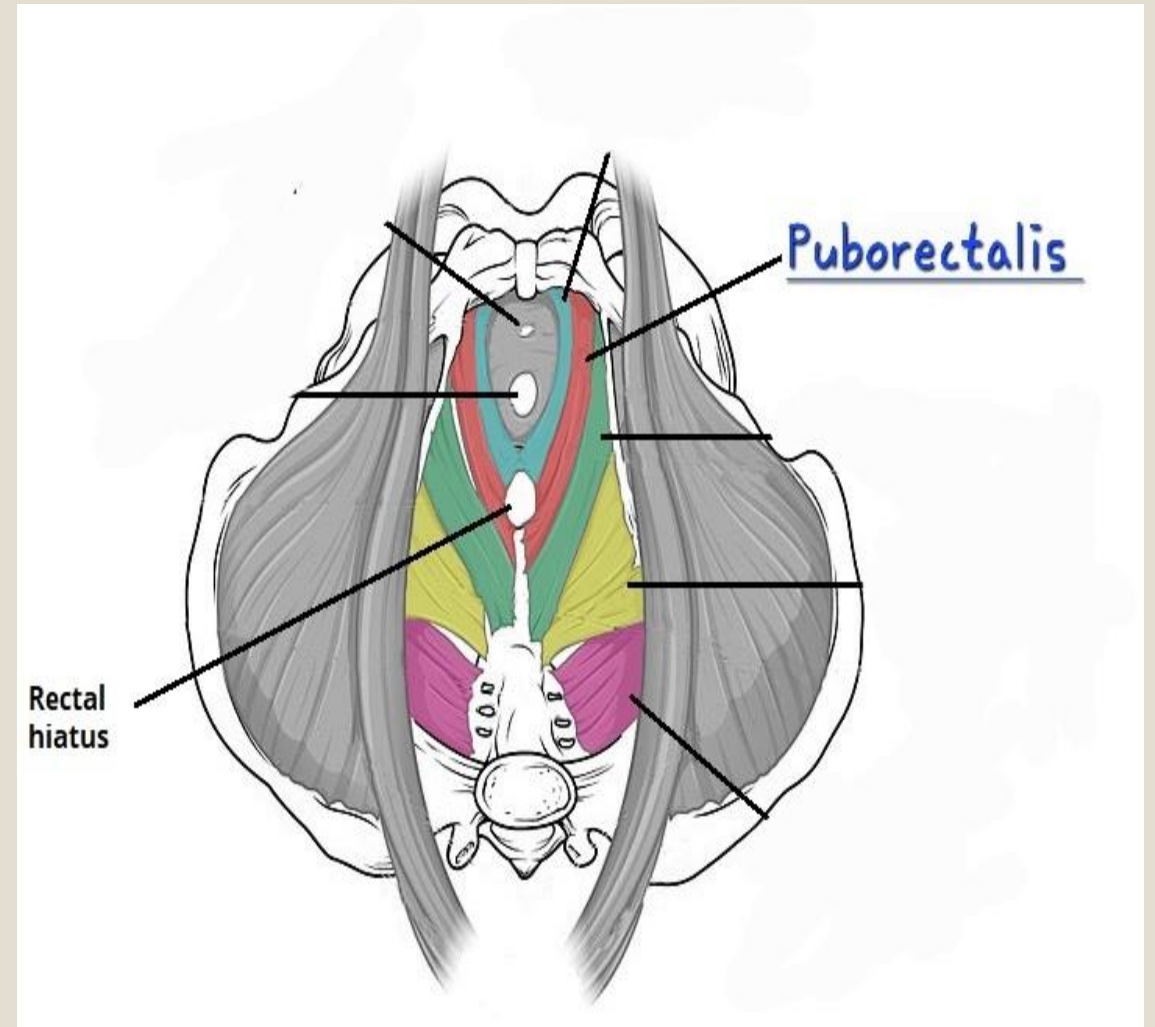
Perineal body (fusion between levator ani, transverse perineii and External sphincter muscles).



# PUBORECTALIS

## **ORIGIN:**

Posterior surface of body  
Of pubis  
No insertion. It forms a  
sling posterior to rectum.







**RELAXED**  
(Rectum almost straight)



**CONTRACTED**  
(Rectum acutely angled)

**PUBORECTALIS  
SLING**

# PUBOCOCCYGEUS

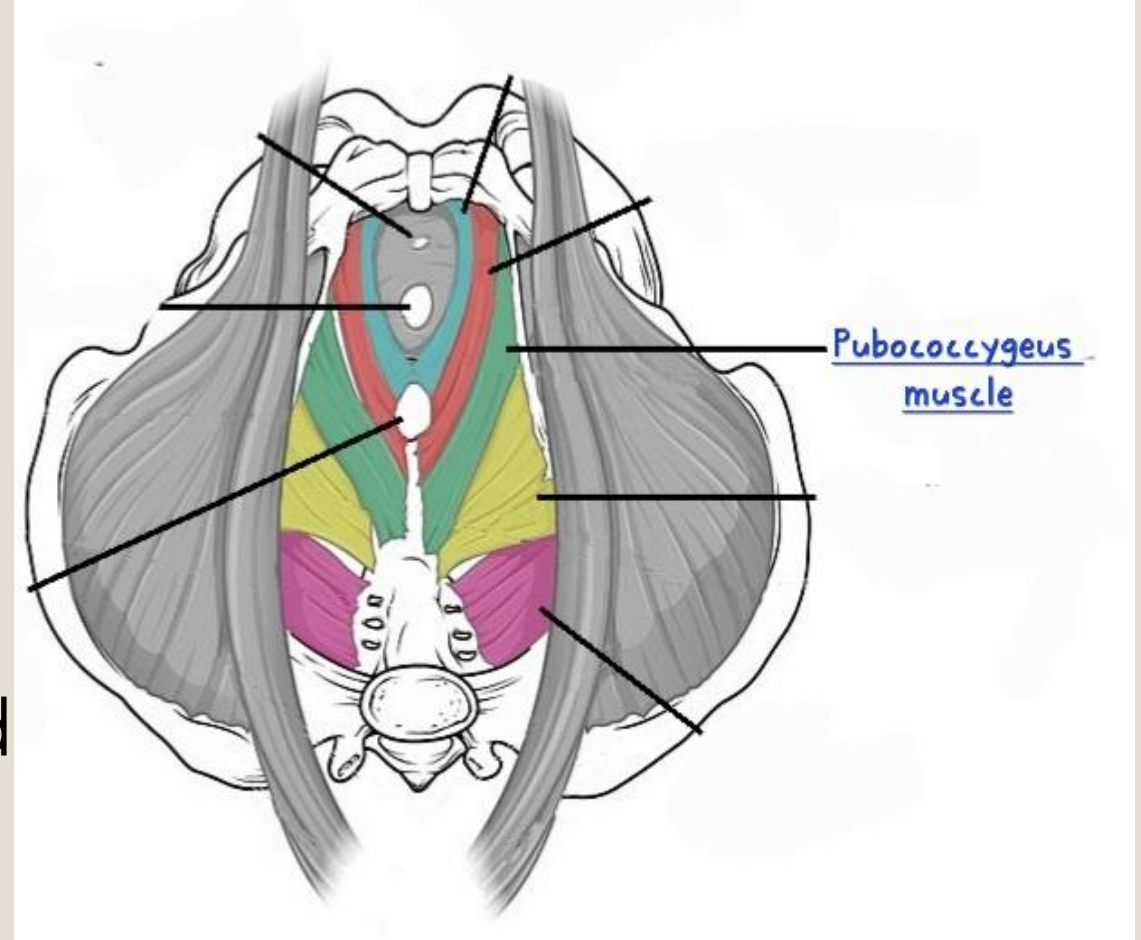
Lateral to Puborectalis.

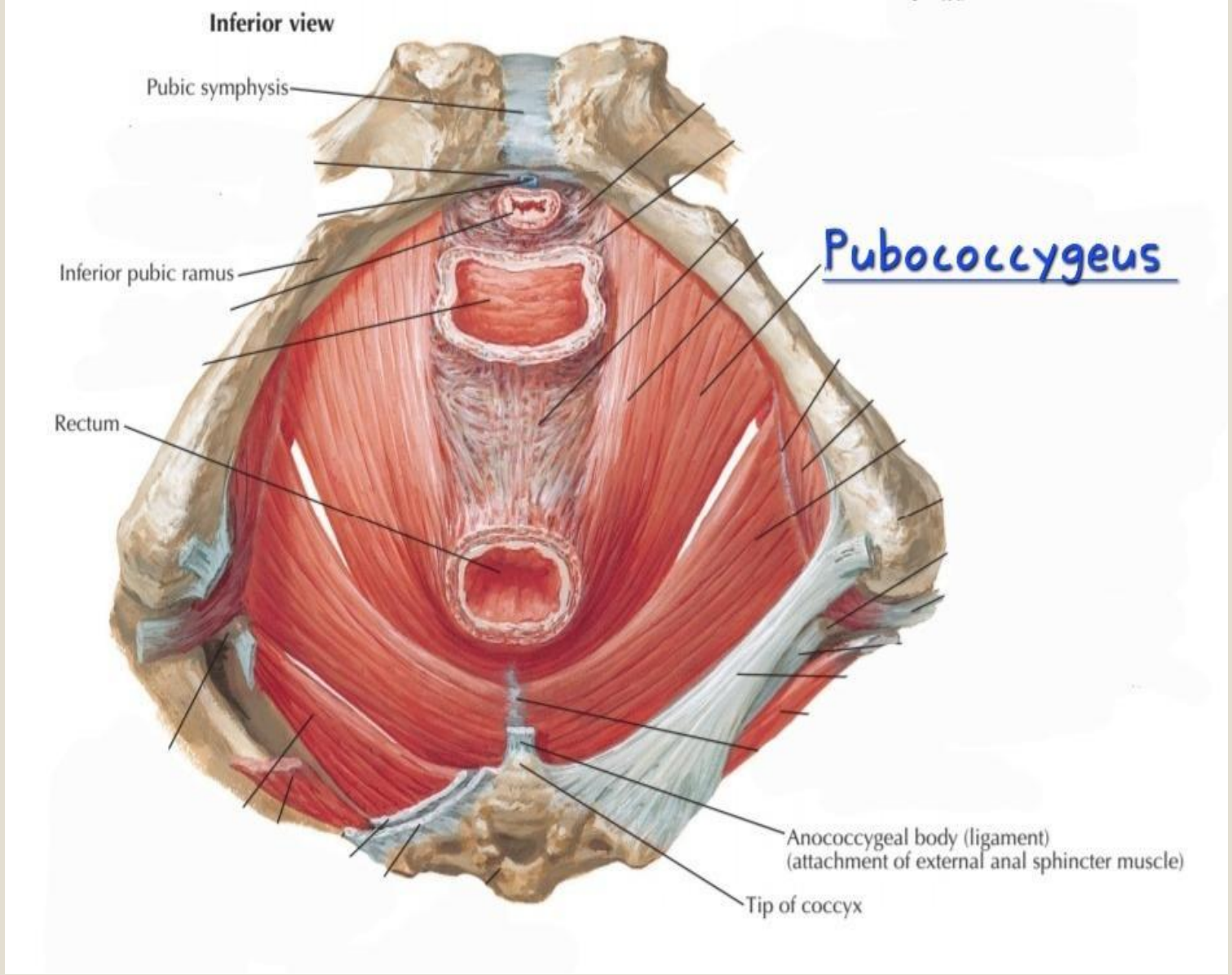
## **ORIGIN**

Posterior surface of body  
Of pubis.

## **INSERTION:**

Anococcygeal ligament.  
(between anal fascia and  
Coccygeal periosteum)





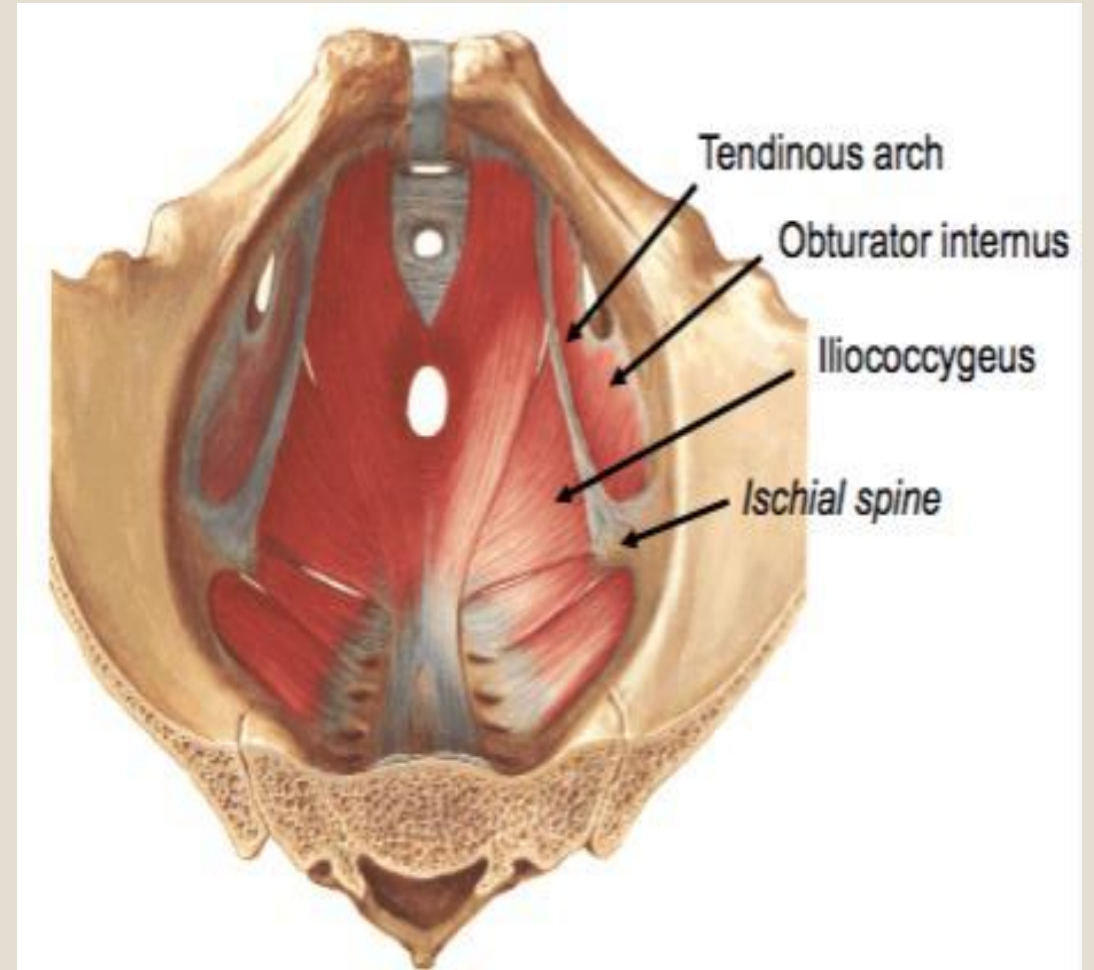
# ILOCOCYGEUS

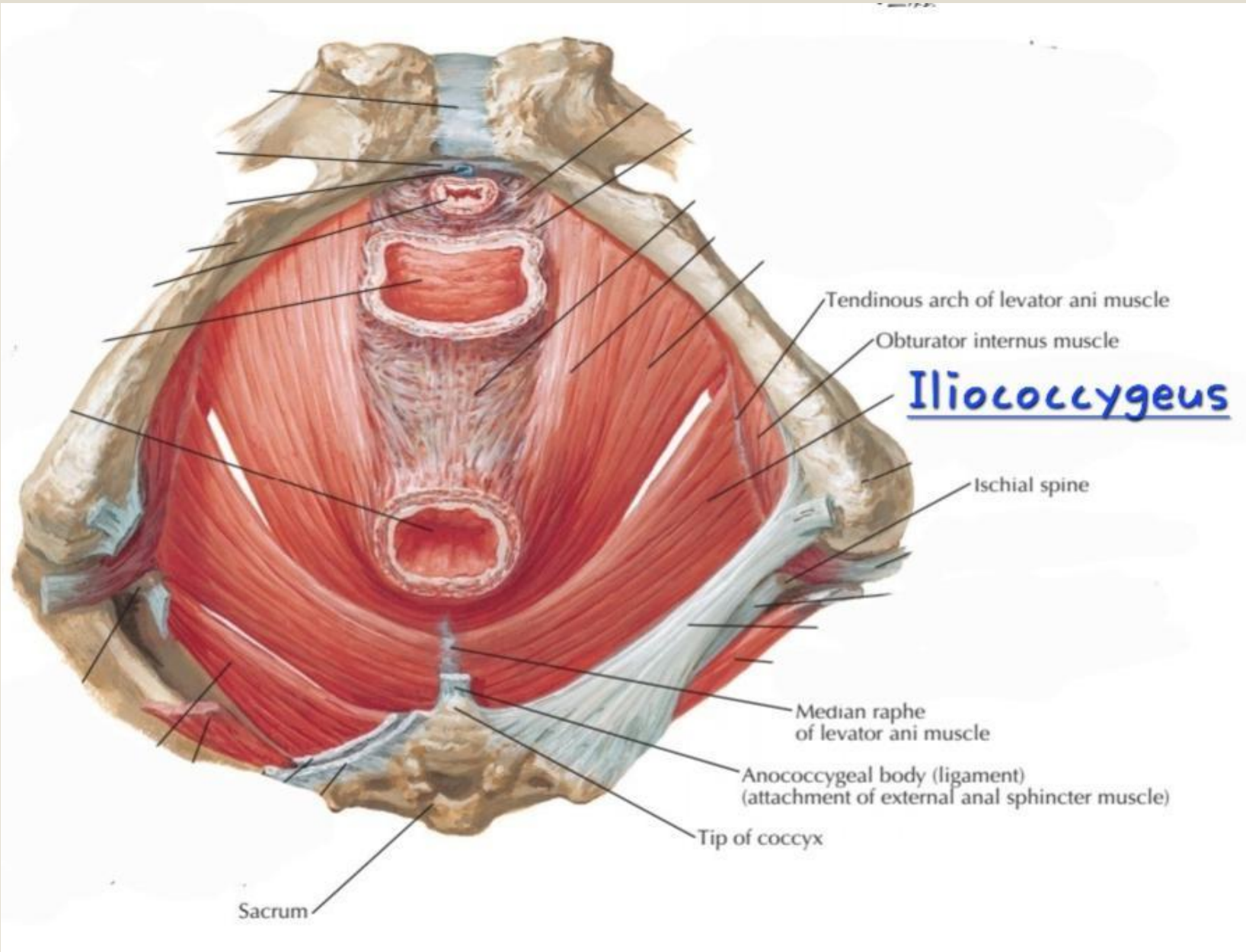
## **ORIGIN:**

Tendinous arch of internal obturator fascia and Ischial spine.

## **INSERTION:**

Anococcygeal ligament and coccyx.







# COCCYGEUS

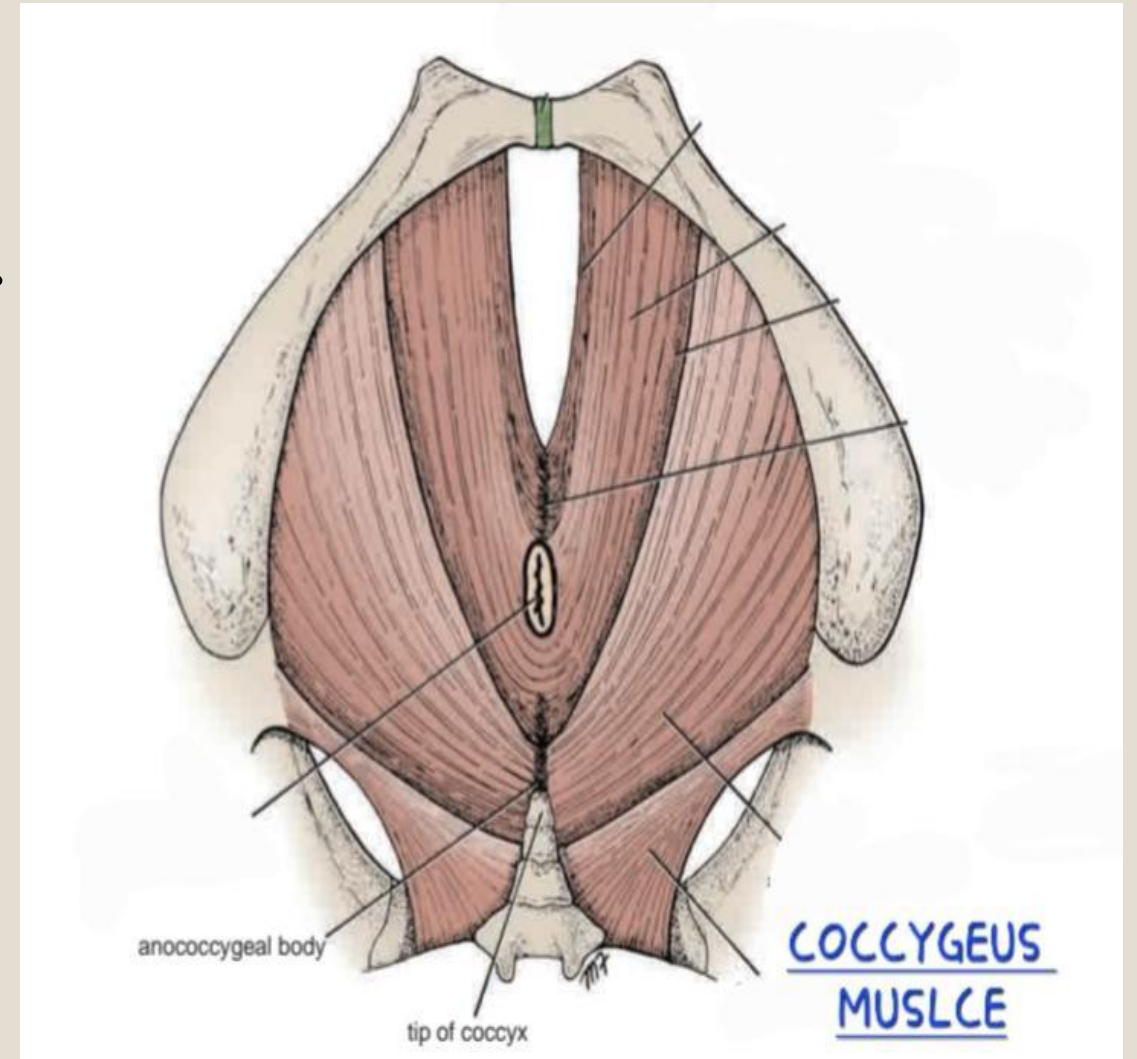
Triangular shaped muscle.

**ORIGIN** (Apex)

Ischial spine

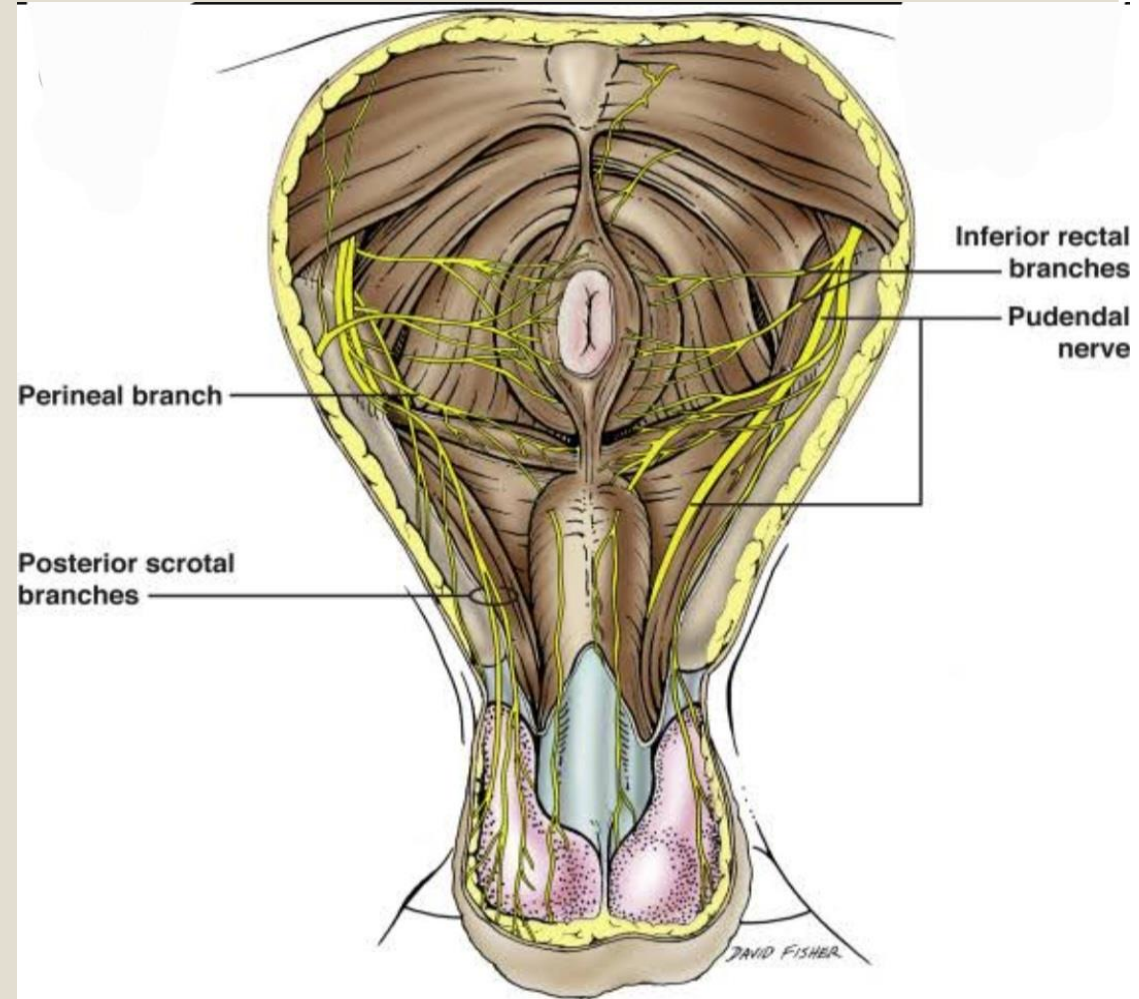
**INSERTION** (Base)

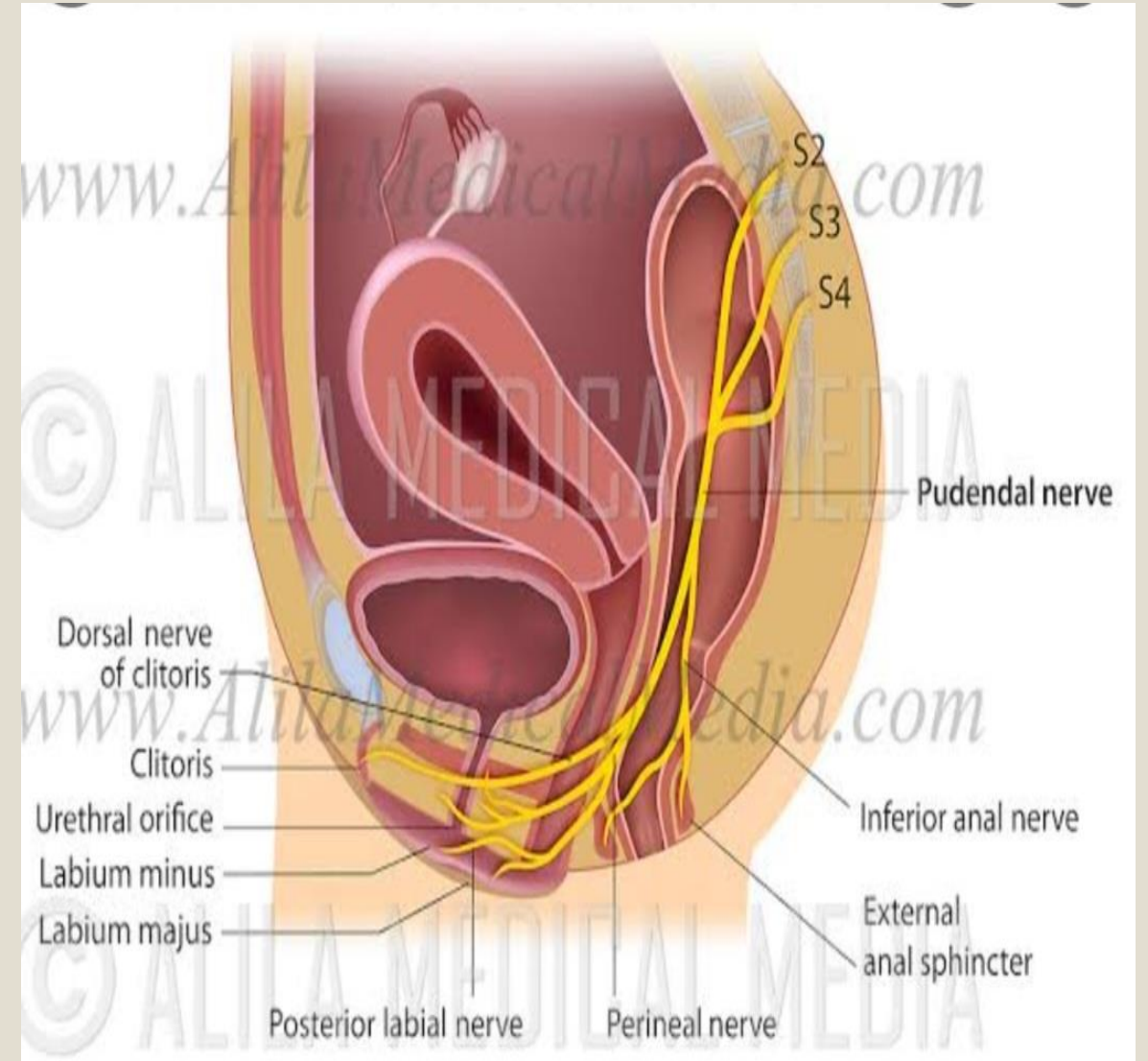
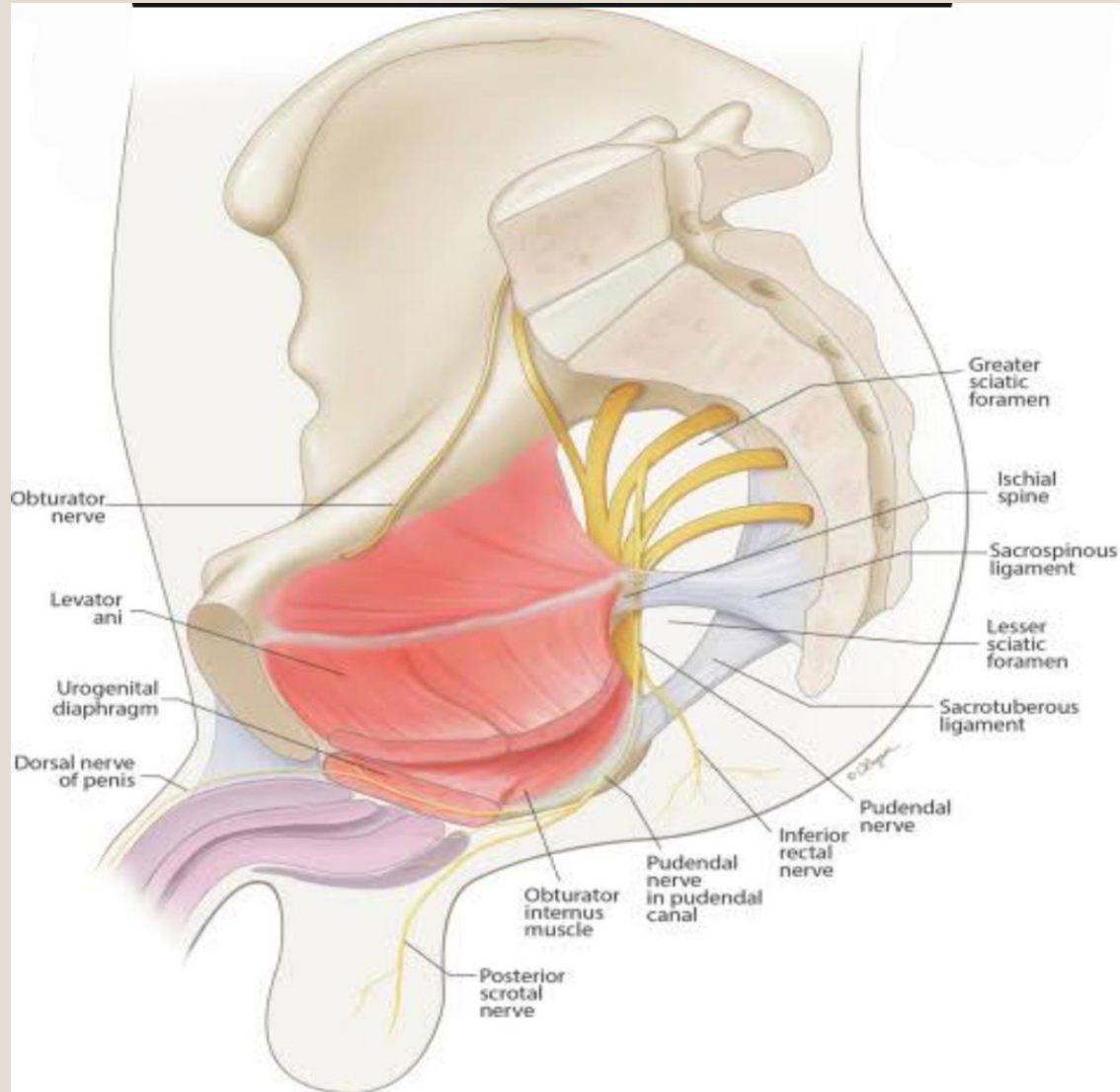
Lower end of sacrum  
(S5 level), lateral part  
of coccyx.



# NERVOUS INERVATION

- **LEVATOR ANI MUSCLES:**  
From perineal branches of 4<sup>th</sup> sacral nerve and pudendal nerve (S2-4).
- **COCCYGEUS MUSCLE:**  
From 4<sup>th</sup> and 5<sup>th</sup> sacral nerves.



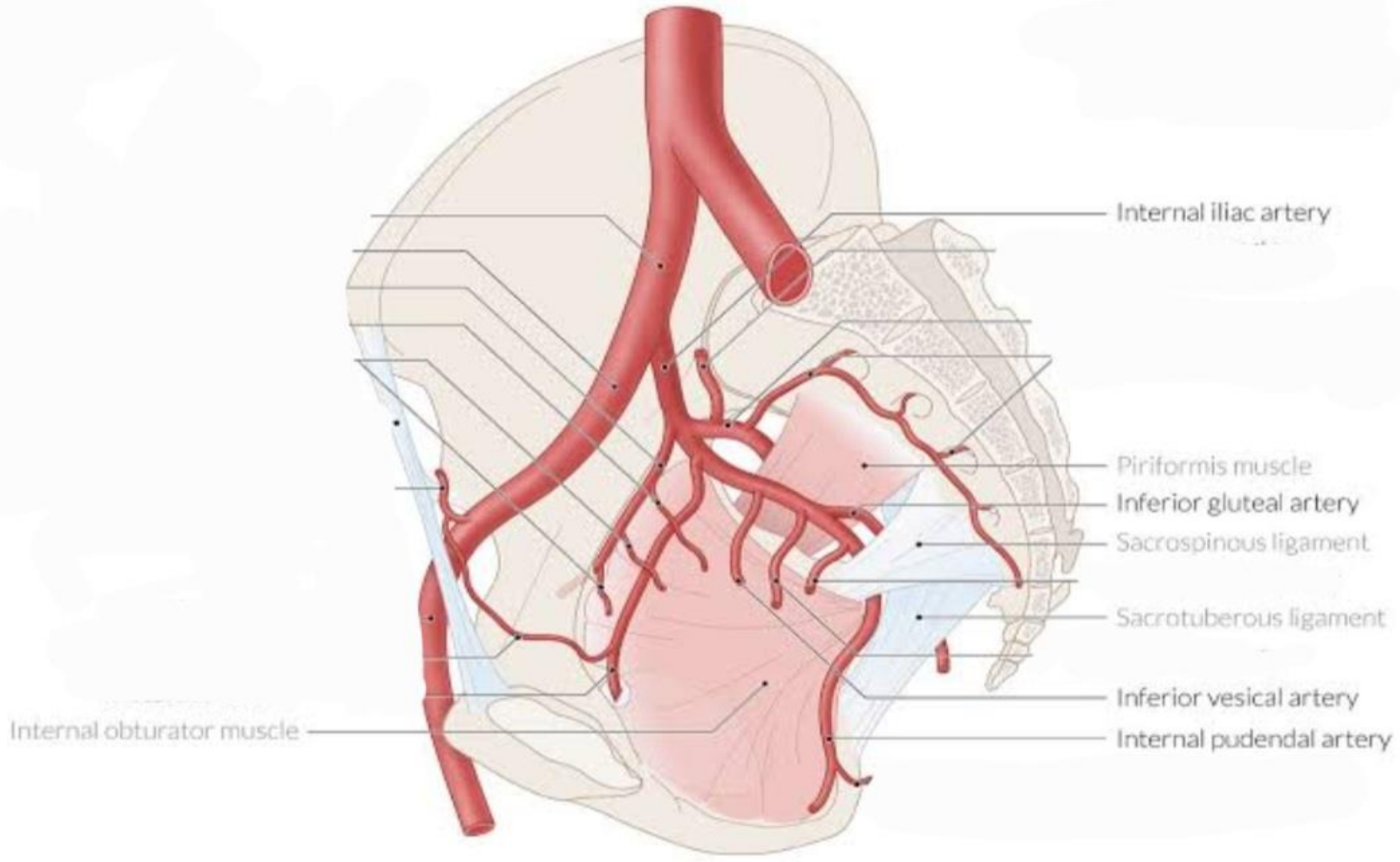


# BLOOD SUPPLY

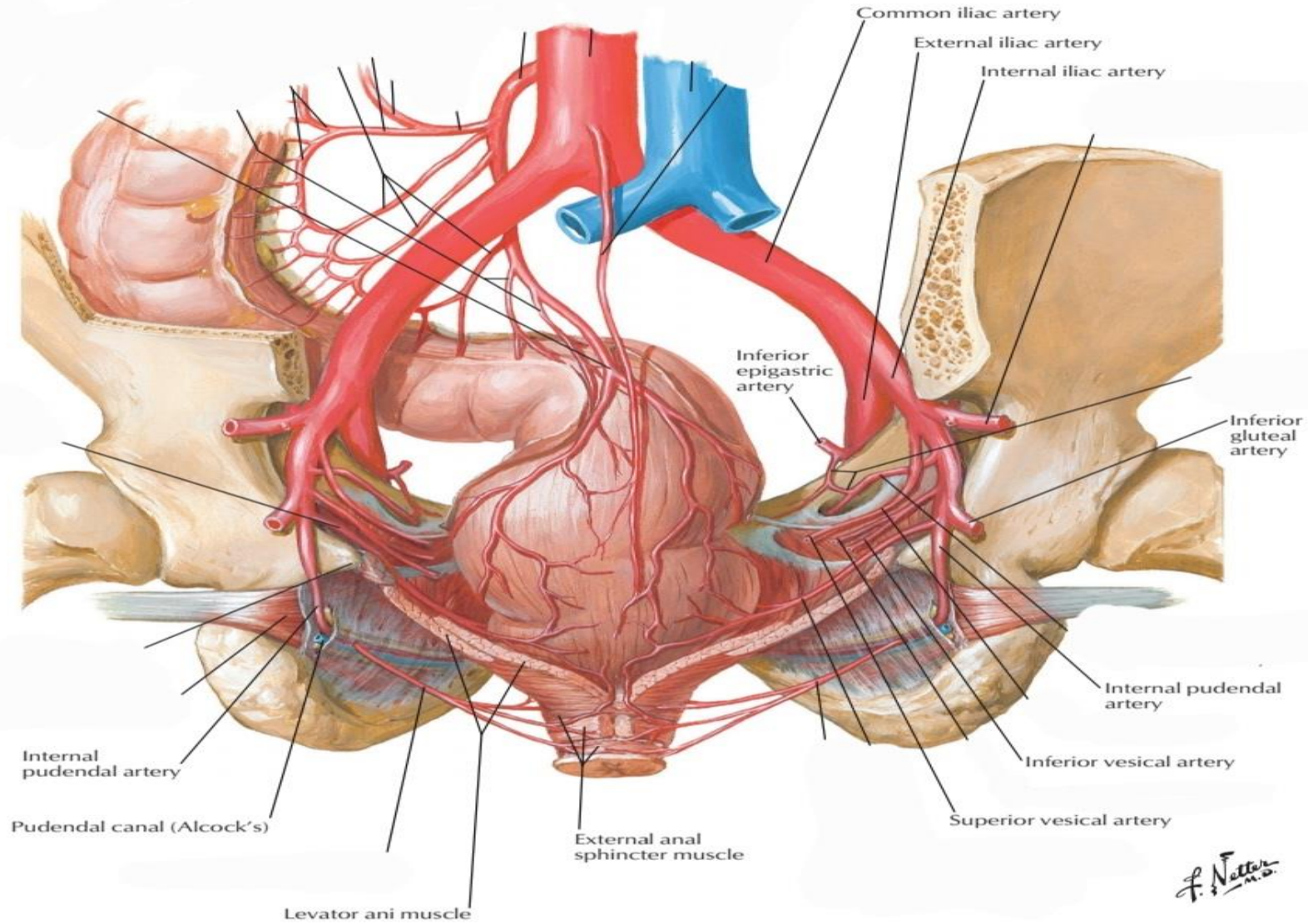
From 3 branches of internal iliac artery

1. Pudendal artery
2. Inferior gluteal artery
3. Vesical artery

The name of the veins correspond to arteries.

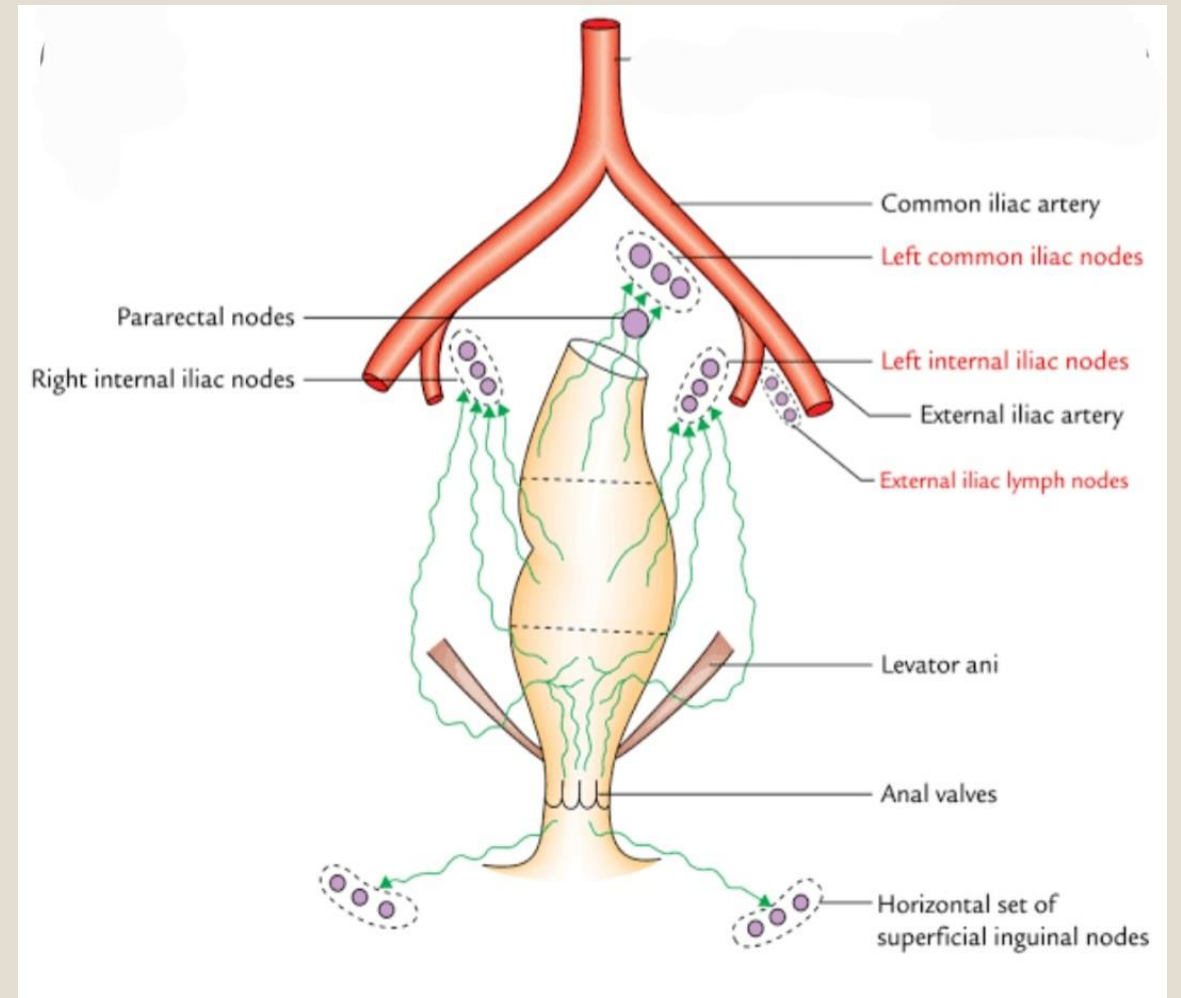


Posterior view



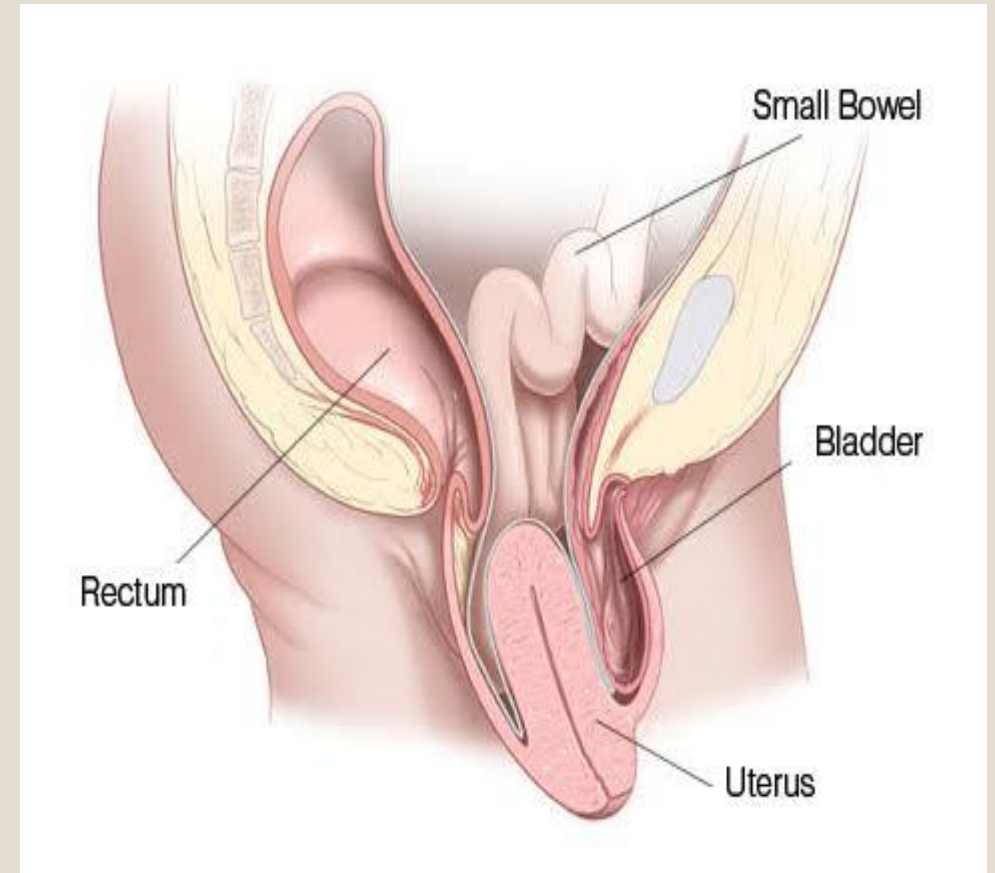
# LYMPHATIC DRAINAGE

Lymph from pelvic floor drains into internal iliac lymph nodes which drain into common iliac lymph nodes.



# PELVIC FLOOR DISORDERS (PFDs)

- Pelvic organ prolapse (most commonly uterine prolapse). In this condition pelvic floor muscles cannot support uterus causing it to descend into the vagina.





- Urinary and faecal incontinence occurs due to weakening of pelvic floor muscles supporting bladder and rectum and forming their sphincters.

## TREATMENT

- Pelvic floor exercises
- Surgery

# Reference

- Snell's Clinical Anatomy
- Netter's Atlas of Human Anatomy
- Internet.



Thank  
you

