

Jini's NATURAL HEALING GUIDE



Rectal Spasm, Prolapse & Pain

Jini Patel Thompson

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RECTAL SPASM, PROLAPSE AND PELVIC PAIN



There are a number of terms for muscle-based pain in the rectal area, including levator ani syndrome, levator ani spasm syndrome, proctalgia fugax, chronic pelvic pain syndrome, proctodynia, coccygodynia, pelvic floor dysfunction and pelvic floor myalgia.

There can also be a number of physiological reasons that cause pain in the rectum or pelvic floor, and sometimes our emotions play a significant role as well. Let's explore each of these possible causes and then I will also be giving you the treatments for each. Some of you may have just one factor causing your pain and discomfort, others may have several that are feedback-looping together. You are the best person to connect with and explore the messages from your unique body, so be sure to listen to your body and experiment.

Even if you already have a diagnosis for your particular condition, it may still be a good idea to read through this entire book to increase your understanding, or perhaps glean an idea for a different approach that might work well for you.

Levator Ani Syndrome and Proctalgia Fugax

The root cause of rectal spasm is tension in the pelvic muscles including the levator ani muscle. The levator ani is a broad, thin muscle inside the pelvis that tightens and relaxes to aid in a number of bodily functions, including bowel movements. Levator ani syndrome has been described as “a chronic charlie-horse up inside the pelvis”. Pelvic floor muscle spasms can also cause tightness, burning, and a sensation that the rectum is full.

Sometimes the pelvic muscle spasm is caused by a trapped nerve or ligament, or some sort of adhesion or restriction in your pelvis. The

pudendal nerve branches out like tree roots all throughout the levator ani muscles, and can become trapped or aggravated in places. Levator ani pain tends to be constant and centered in (but not restricted to) the levator ani muscle, while proctalgia fugax pain is a short, stabbing pain in the rectum.

Pudendal Nerve Entrapment

Pudendal nerve entrapment, also known as Alcock's canal, occurs when the nerve (which carries signals to and from the genital and anal area) or one of its branches becomes damaged, compressed or entrapped. Pudendal nerve entrapment is the cause of pudendal neuropathy, or pelvic pain. The pelvic pain can worsen when sitting or as the day progresses. Other symptoms can include genital numbness (or increased sensitivity), fecal and urinary straining or incontinence, and sexual dysfunction.

Causes of pudendal nerve entrapment include pregnancy, accidents, infection and inflammation, and scarring from surgery or surgical mishaps. Don't expect your surgeon to tell you about these mishaps! A friend of mine witnessed a surgery during his residency where the surgeon mistakenly sliced the patient's urethra. "Whoops!" was the sole response. Why would a surgeon give you information you could then use to sue him/her? Also, scarring from surgery or surgical mistakes will happen long after the event, so may take weeks or months to become an issue. Fortunately, you don't necessarily need to know what's wrong, in order to heal yourself.

The pudendal nerve can also fuse or adhere to different parts of the anatomy, or become trapped between the sacrotuberous and sacrospinous ligaments. Heavy and prolonged bicycling, especially on an inappropriately shaped or incorrectly positioned bicycle seat, may eventually thicken the sacrotuberous and/or sacrospinous ligaments and trap the pudendal nerve between them, resulting in pelvic pain.

Now that we've looked at the levator ani muscle and the pudendal nerve, let's look at some other possible issues you may be dealing with...

Anal or Rectal Stenosis

When inflammation has been present for a long time in the rectum, it sometimes causes scarring (fibrosis). Repeated ulceration and healing from proctitis, Crohn's Disease, anal fissures, chronic constipation etc, can also result in scar tissue. Surgical procedures for hemorrhoids, skin tags, anal dilation, sphincterectomy, etc. all cause scar tissue as the body heals the wound. Scar tissue is not as flexible as healthy tissue, and the gradual build-up and thickening of scar tissue can narrow and constrict the rectal or anal canal, resulting in a rectal or anal stricture.

Sometimes this narrowing (also called anal stenosis or rectal stenosis) comes on very gradually, so you may think you are constipated, rather than realizing there is a physical obstruction of scar tissue blocking your stool from coming out. Then of course, as you strain and push to get the stool out, this can cause more tearing (and as it heals, more scar tissue) along with hemorrhoids, strained rectal and anal muscles, rectal spasm and aggravated nerves. Rectal spasming (cramping) and aggravated nerves will then constrict your rectum even further. In some cases, anal stenosis can be caused solely by muscular dysfunction or spasming.

If you suspect you have anal stenosis caused primarily by scar tissue, then be sure and get my other book, [Jini's Natural Healing Guide: Anal Stenosis & Stricture](#) which outlines an effective remedy for dissolving/softening scar tissue. I also have tried-and-tested remedies for internal and external hemorrhoids and anal and rectal fissures.

Rectal Prolapse

Rectal prolapse occurs when the tissue that lines the rectum falls down into or sticks out through the anal opening. Rectal prolapse can start off by protruding only during bowel movements; then it may protrude during sneezes or other abdominal contractions; then progress to protruding during activities like walking, and eventually it may reach chronic protrusion, where the rectum fails to retract at all.

Rectal prolapse can result from the following conditions:

- Constipation
- Cystic fibrosis, MS, paralysis
- Malnutrition and malabsorption (celiac disease is an example)
- Pinworms (enterobiasis)
- Prior injury to the anus or pelvic area
- Whipworm infection (trichuriasis)
- Anal intercourse - especially if long-term or aggressive
- Childbirth

If your rectum has prolapsed, you will likely see a pink or reddish-colored mass of tissue that sticks out from the opening of the anus, especially after a bowel movement. The lining of the rectal tissue may be visible and may bleed slightly.