Levator Syndrome

What is 'Levator syndrome'?

Levator syndrome is a condition caused by spasms of the levator muscle, a large muscle in the lower pelvis which surrounds the rectum and which attaches to the tailbone.

What are the symptoms of levator syndrome?

A dull aching pain, often occurring after prolonged sitting. This may also be noticeable at night. Some people have the pain until they get up and move around; others have brief, sharp pains lasting only a few seconds. Such pains can awaken one from sleep.

Why do people get levator syndrome?

The causes of this condition are not well understood. Tension and stress have often been associated with the condition; poor posture with slouching is also a factor is some cases; but in most instances, the exact cause is unknown.

How is levator syndrome diagnosed?

The symptoms described above are usually highly suggestive of this condition: bowel movements often make the aching pain better, unlike other painful conditions of the anorectal area. Also, the muscle is tender and tense when examined by the doctor, especially in the area of the tailbone.

What can be done to treat this condition?

The first step is to reach a correct diagnosis, and to distinguish this condition from similar problems in the anorectal area, which may be treated differently. The first step in treatment is usually to massage the levator muscle. This is done in the office by the doctor, and consists of an ultrasound massage probe placed in the rectum adjacent to the muscle. This treatment is performed once a week for six weeks, and is successful in about half of all patients with this problem.

In cases where massage is not helpful, the next step is treatment by electrogalvanic stimulation. This is a treatment performed by a physical therapist, and involves the placement of a small plug or probe in the anus; this plug is connected to a machine which uses a gentle electrical current to stimulate the muscle for 20 to 30 minutes at a time; when the current is turned off, the muscle is often fatigued and unable to spasm so easily. This treatment usually is performed three times a week for two weeks. It helps approximately 60% of those patients treated in this way.

Other alternative treatments include biofeedback or acupuncture. If no relief is obtained from the treatments mentioned above, another alternative is to massage the muscle very vigorously in the operating room, using a brief anesthetic. This is sometimes combined with injection of botulinum toxin (Botox), which may be effective in paralyzing the levator muscle for up to six months; allowing relief of pain. Patients leave the hospital an hour or two after completing this treatment. This treatment is necessary only in the most difficult cases, and is often, but not always, successful in eliminating the aching.

Are there any medications that can help? What about 'muscle relaxants'?

Medications are only rarely helpful. 'Muscle relaxants' do not, in fact, relax the muscles, but only give temporary relief from anxiety; they are not useful in achieving a long-term solution to this problem.

Once my symptoms improve, will they come back?

Sometimes there is a tendency for this condition to re-occur at various times throughout life, often as a result of stress or posture problems which may have caused the original problem. However, it has a tendency to get better with time and increasing age.