

Fascia Clinics Calls for Broader Approach to Pelvic Floor Dysfunction Following New Swedish National Guidelines

Woman with severe pelvic floor dysfunction was told a stoma was her only option. Six months after a different approach to chronic pelvic pain, she is pain-free.

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/EINPresswire.com/ -- Pelvic floor dysfunction affects up to one in two women during their lifetime, yet

millions suffer in silence for years without adequate help. For one woman in Stockholm, chronic pelvic pain following a birth injury became so debilitating that she could no longer use the toilet normally. After seven years, she was told a stoma might be her only remaining option.

“

I felt it release. Something huge let go. I could start eating again. It didn't hurt when I walked, sat, or lay down. I haven't been in pain for six months now.”

Woman with seven years of pelvic pain, Stockholm

“They told me I had a total spasm that couldn't be fixed. That this was what my life was going to look like.”

The turning point came through an unexpected connection: a horse she had begun renting, and a referral to a clinic taking a different approach to chronic pelvic pain. At the [Fascia Clinics](#) in Stockholm, her condition was assessed not as an isolated pelvic floor problem but as part of the body's interconnected system.

Fascia is the body's continuous network without beginning or end, the system that enables structure, flow and communication between all parts of the body. Rather than treating the pelvic floor in isolation, the treatment addressed the full range of structures that converge in the pelvis: the coccyx, sacrum, glutes, hamstrings, hip flexors, diaphragm, abdominal wall and back fascia.

The result was a turning point she had not found in seven years of searching for help.

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Her message to other women living with similar conditions is direct: "I wish more people knew about this earlier than I did. More people need to know that help is possible." Watch the [full interview](#) in which she describes her seven-year journey with pelvic pain and what changed.

New National Guidelines Highlight a Silent Public Health Crisis

In 2025, Sweden's National Board of Health and Welfare ([Socialstyrelsen](#)) published the country's first national clinical guidelines for pelvic floor dysfunction, identifying it as a public health problem affecting up to one in two women, approximately 2.5 million in Sweden alone. The 14 recommendations call for stronger competence in primary care, better coordination, and multi-professional teams for women with complex symptoms.

Anders Berg, Unit Manager at Socialstyrelsen, identifies a central problem:

"When patients are told that their symptoms are 'normal' after childbirth or with ageing, it is a sign that suffering has been normalised. This must not continue."

Anders Berg, Unit Manager, Socialstyrelsen (Sweden's National Board of Health and Welfare)

A Complementary Approach, Open to Collaboration

The Fascia Clinics emphasise that their approach is a complement to established care, not a replacement, and that outcomes vary between individuals. The clinic is open to collaboration with primary care providers through knowledge transfer, joint training and clinical partnerships. "Our experience is that the pelvis needs to be understood in context, in relation to the rest of the body. The new national guidelines are an important step, and we welcome the opportunity to be part of the multi-professional collaboration they call for."

Hans Bohlin, Founder, the Fascia Clinics

The Fascia Clinics are also expanding internationally. A Fascia Commission has been established in Japan to deepen collaboration around fascia research and clinical methodology. Operations in Izumo begin in autumn 2026, including pelvic floor treatment, as part of a wellness-tourism initiative with the city of Izumo.

About the Fascia Clinics

The Fascia Clinics have developed a non-invasive treatment method grounded in anatomical fascia research, delivered through Swedish-developed patented devices and a standardised



Pelvic floor dysfunction affects up to one in two women, often beginning with a birth injury

methodology built on more than a decade of clinical experience. The Fascia Clinics describe their approach as a complement to established care.

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