

# Women's Health Physiotherapy

Welcome to:

# Urinary Incontinence

Education Class



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# Aims



- What is incontinence
- What causes incontinence
- Understanding the pelvic floor - anatomy & function
- How the bladder works
- How can Physiotherapy help ?



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# What is urinary incontinence?



Urinary incontinence is any unintentional loss or leakage of urine

“Incontinence is a largely preventable and treatable condition and certainly not an inevitable consequence of ageing” (WHO, 1998)



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# How common is it ?



- Approximately **5 million** people in the UK are affected by incontinence
- **23%-46%** of women in the UK are incontinent:
  - **50%** - moderately or greatly bothered
  - **27%** - unwilling to go to places where they were unsure if there are toilets
  - **31%** - dressed differently
  - **23%** - said it affected their sex life
  - **23%** - said it reduced their activity levels
  - **25%** - report feelings of frustration and/or embarrassment

(CSP Physio Works, 2014)



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# Coping strategies

Its normal to leak a little when you cough

I drink less if I'm going out so I wee less

Its good to stop my urine flow to test my muscles

Straining after a wee ensures I fully empty my bladder

You should open your bowels once a day

You can catch germs through sitting on public toilet seats

Drinking less means I'm less likely to have accidents

Food goes straight through me



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# Types of incontinence

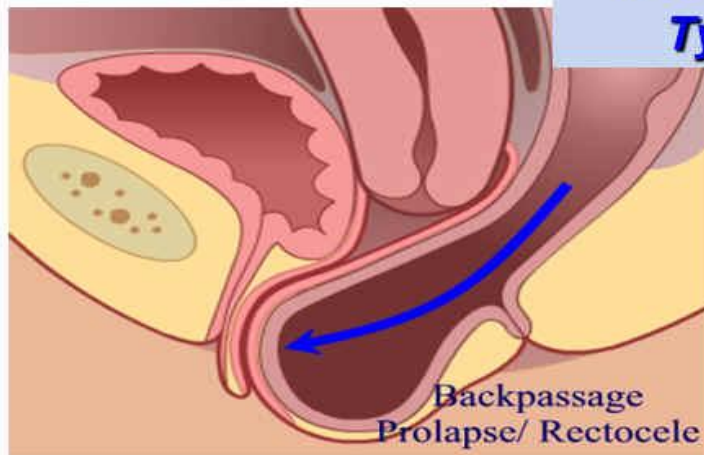
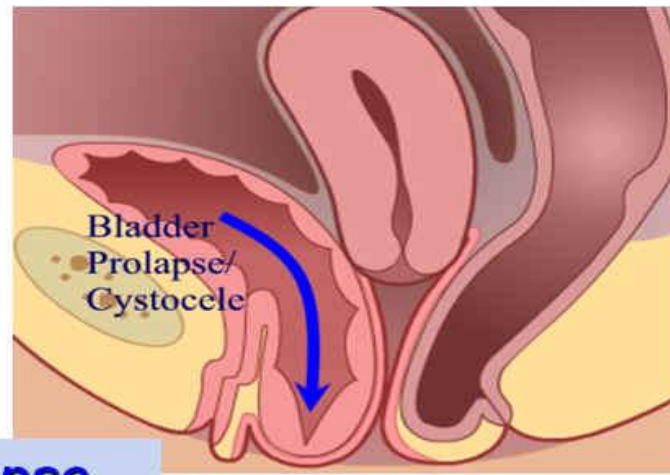
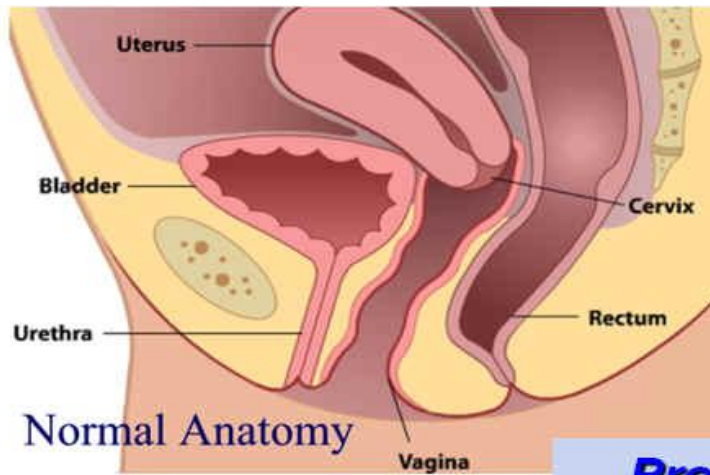
- Urge incontinence
- Stress incontinence
- Stool / faecal
- Wind / flatal



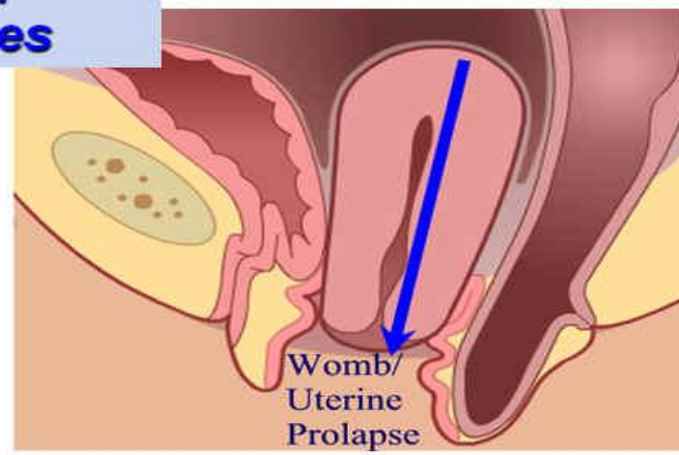
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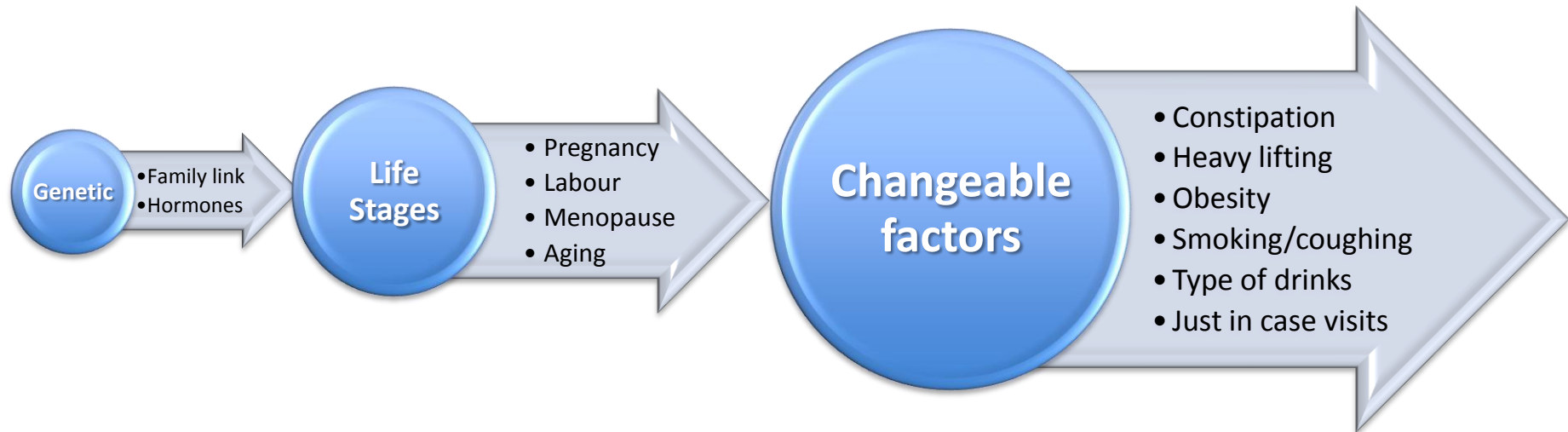
# Prolapse



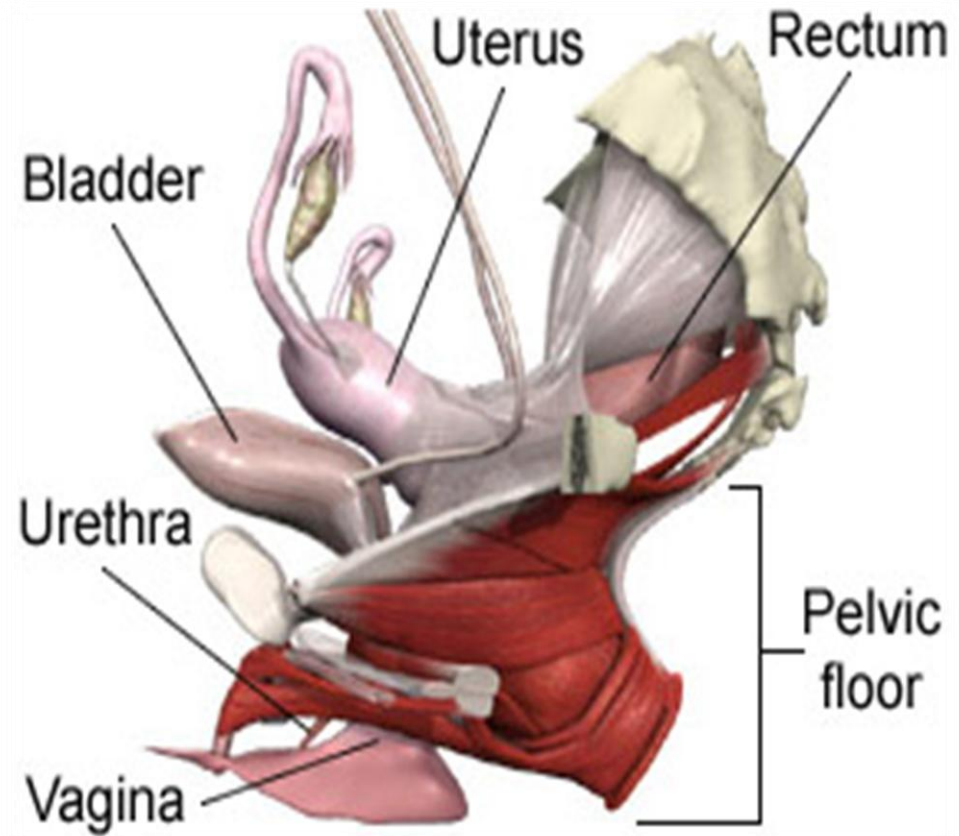
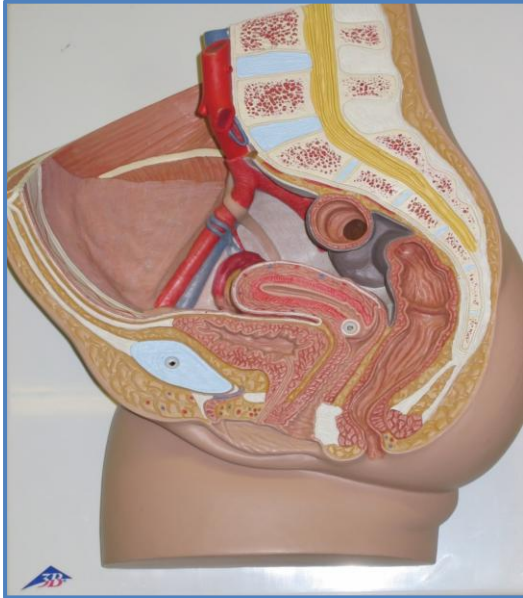
## Prolapse Types



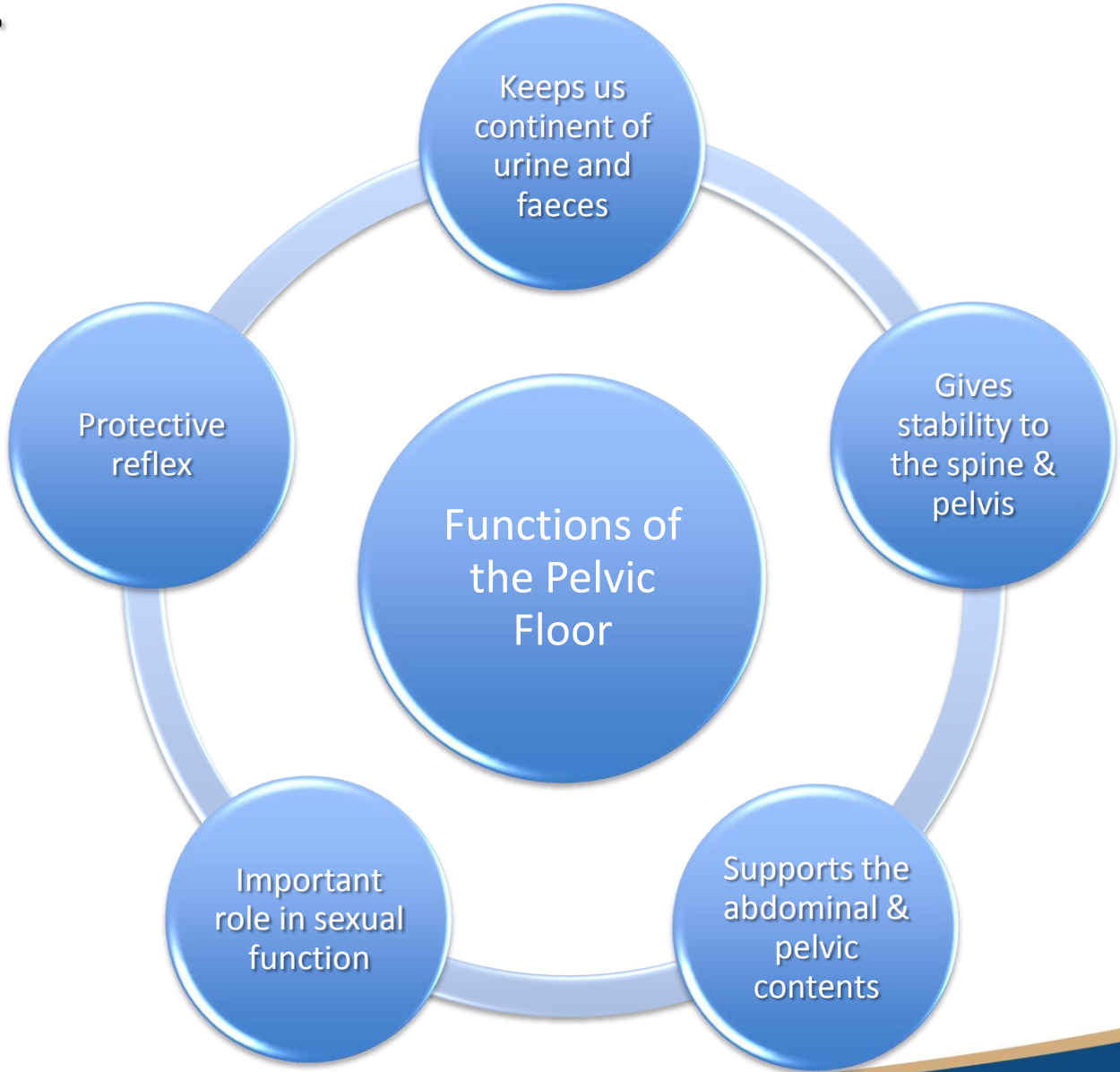
# What can cause incontinence ?



# Pelvic anatomy



# Pelvic floor function



# How to perform a pelvic floor muscle contraction

Tighten your back passage as if trying to stop wind

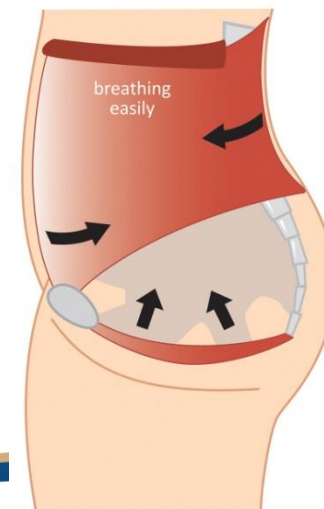
Also tighten the front as if to stop passing urine

The feeling should be a 'squeeze and lift'

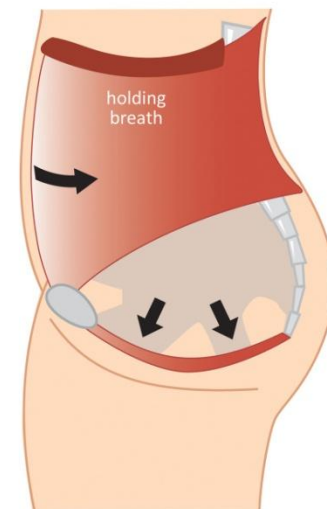
Aim for an up & forward direction

You may feel your abdomen tighten just above the pubic bone

PELVIC FLOOR MUSCLE CONTRACTION

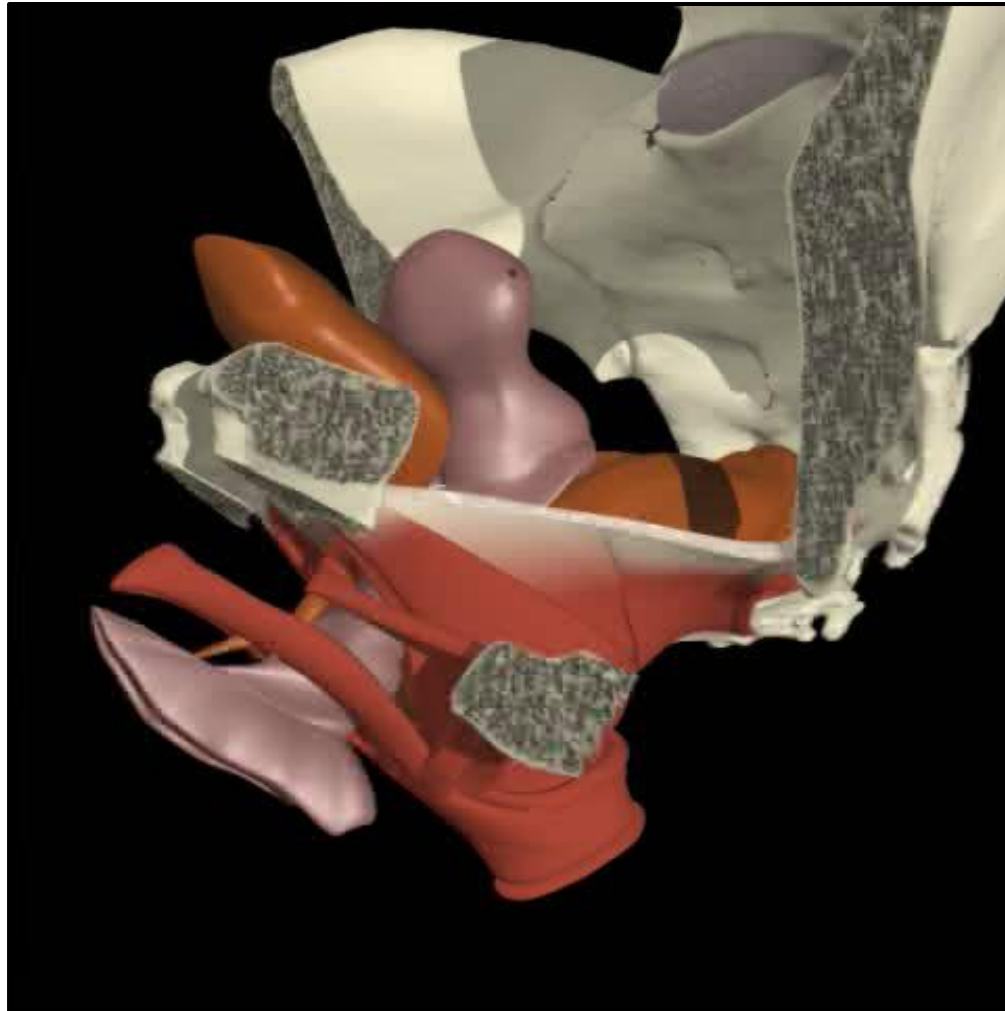


**Correct action**  
The pelvic floor lifts, the deep abdominals draw in and there is no change in breathing



**Incorrect action**  
Pulling the belly button in towards the backbone and holding your breath can cause bearing-down on pelvic floor

# Pelvic Floor movement



# Two types of exercise



KNACK !

## FAST

- Maximum contraction
- On/off like a switch
- Aim x 10

## SLOW

- Gentle, gradual contraction
- Holding
- Aim 10secs x 10



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# How to progress

- Start lying
- Try sitting
- Build up to standing
- Then with activity / exercise



**Practice makes perfect**



# Am I doing them correctly ?



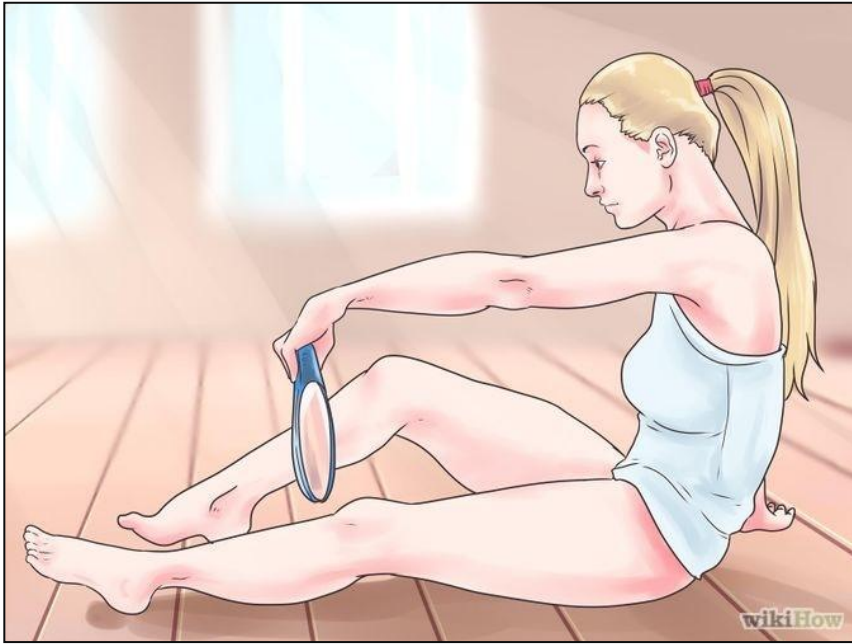
**50% of us do them incorrectly !**

## **Avoid:**

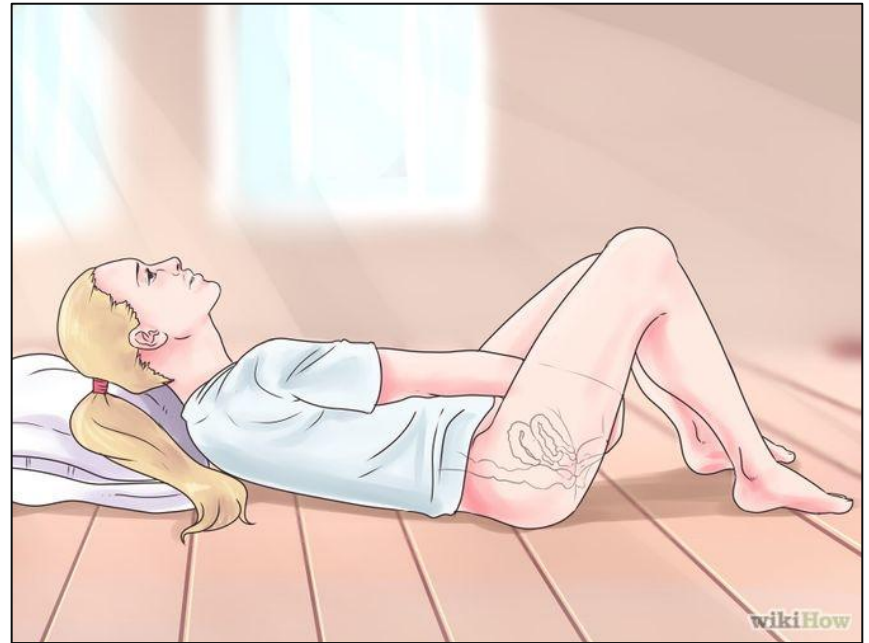
- Breathing in or holding your breath
- Pulling in tummy
- Squeezing legs together
- Clenching buttocks
- Bearing down



# Can I check myself ?



Do not test with a midstream stop to often !



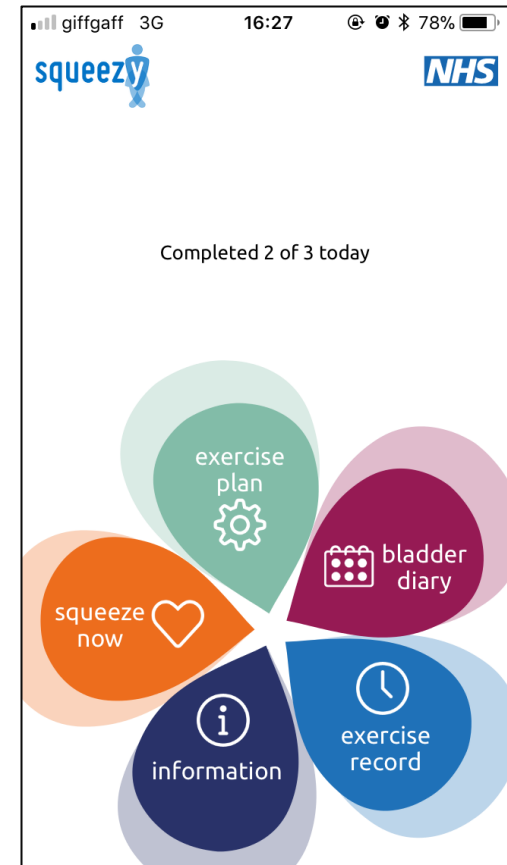
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# How to stick at your exercises....

- Use an app
- Do them at set times
- Tie it into your routine
- Use post-it notes
- Try Pilates
- Do them when you 'need' to

**Weak muscles take on average 10 - 12 weeks to strengthen**



# Normal bladder function

Full bladder = 500mls

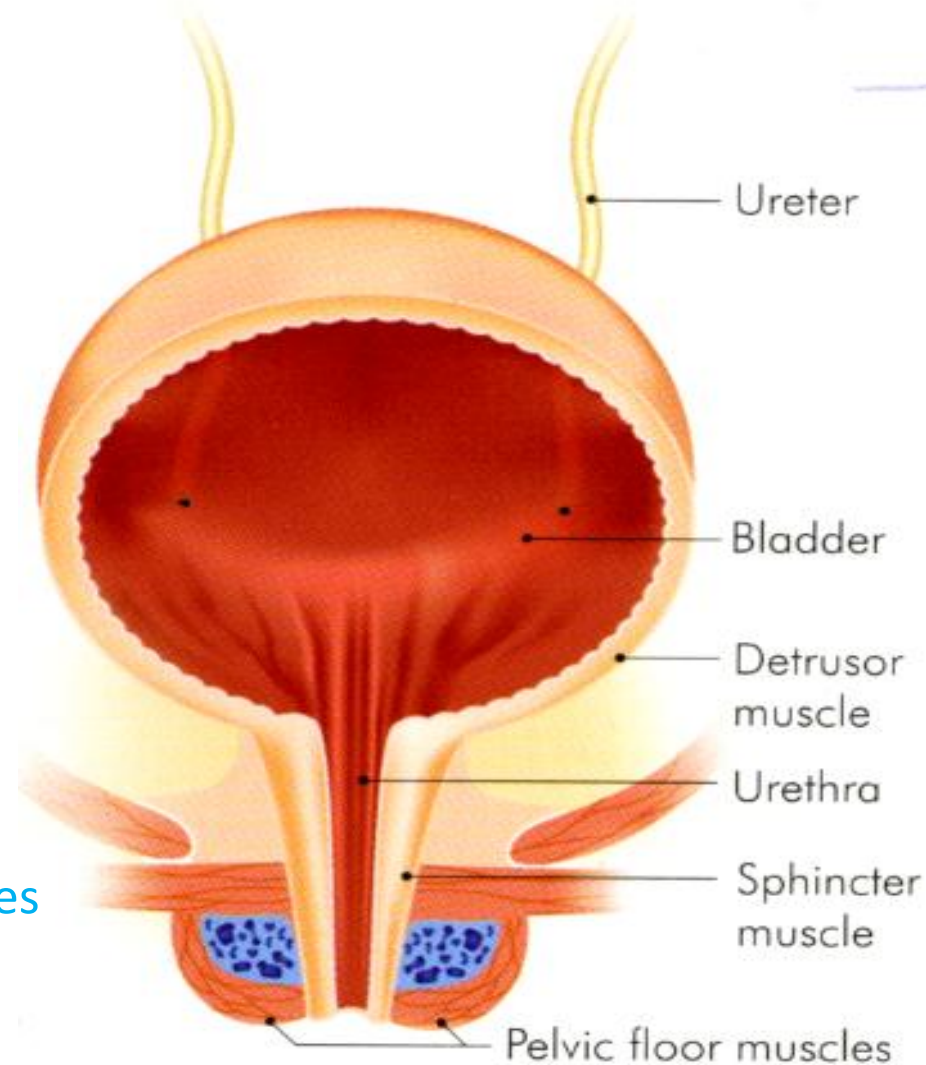
First desire to void = 200mls

Visits to the toilet = 4-6/day

Overnight = Once

Daily fluid needs = 3 pints / 2 litres

1ml of urine / hour / kg

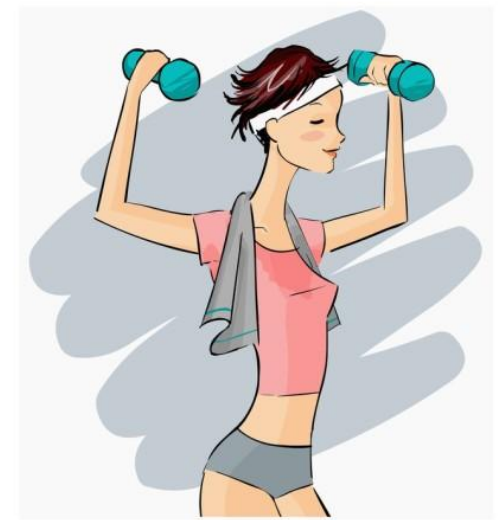


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# What can I expect from Physiotherapy?

- Individual pelvic floor assessment
- Teach you correct pelvic floor squeezes
- Give you an individual exercise programme
- Help you self treat & gain control
- Help you set goals & measure progress



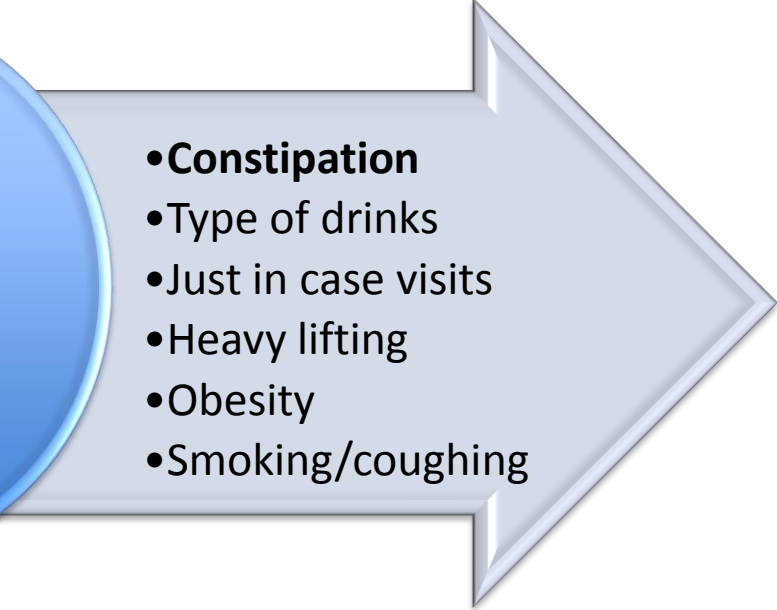
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# We need to work together ....



**Changeable  
factors**

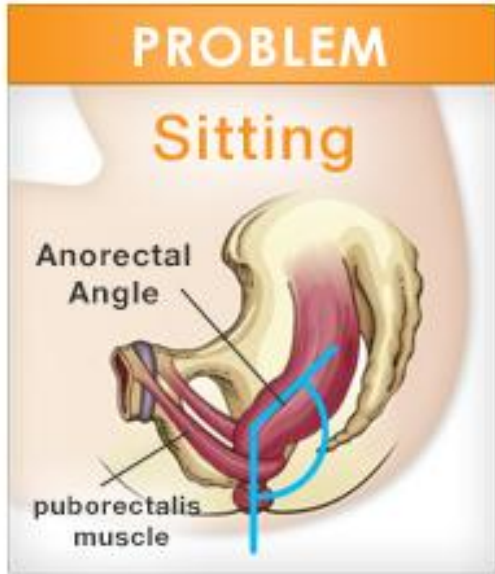
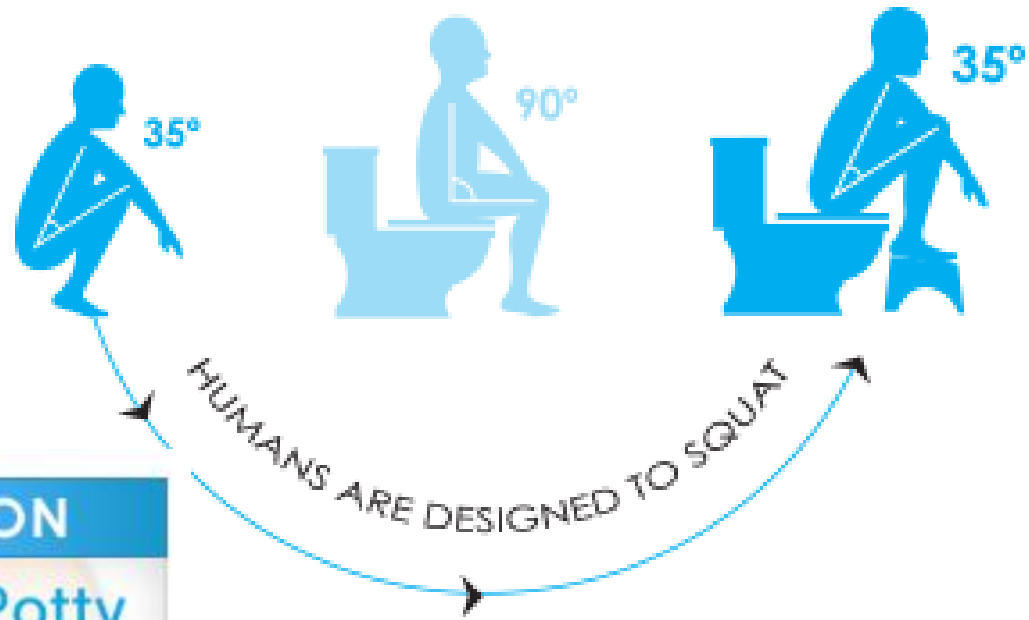
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- **Constipation**
  - Type of drinks
  - Just in case visits
  - Heavy lifting
  - Obesity
  - Smoking/coughing



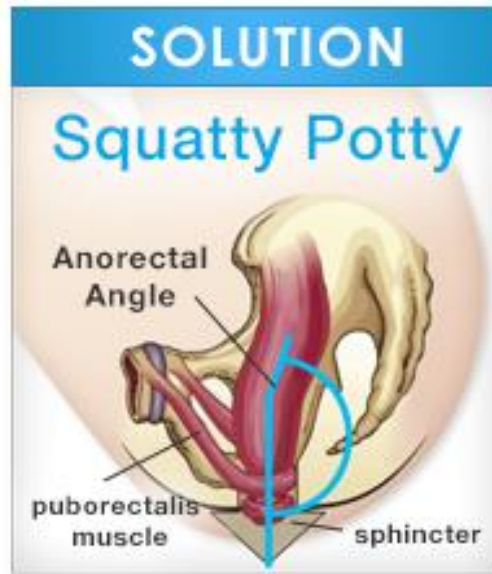
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# Are your bowels involved ?



THE PUBORECTALIS MUSCLE  
"CHOKES" THE RECTUM  
MAINTAINING CONTINENCE

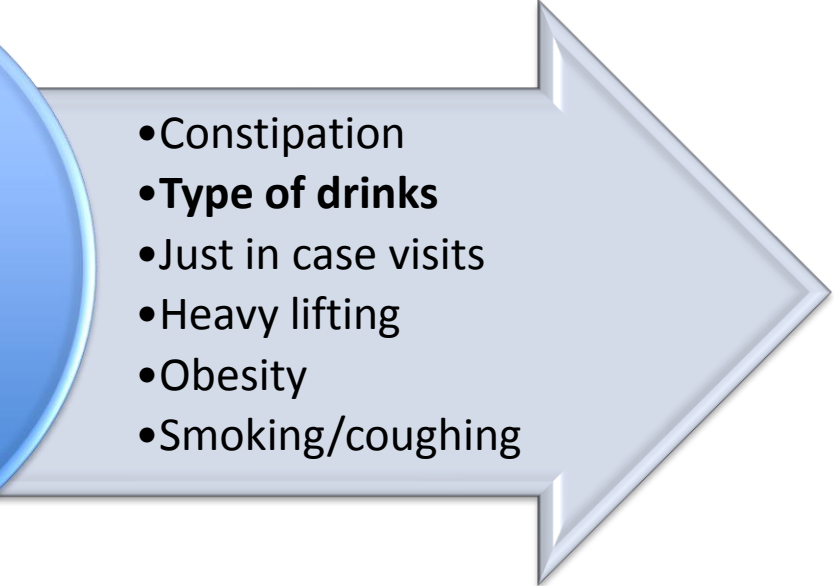


SQUATTING **RELAXES** THE  
PUBORECTALIS MUSCLE ALLOWING  
EASIER ELIMINATION

# We need to work together ....



## Changeable factors

- 
- Constipation
  - **Type of drinks**
  - Just in case visits
  - Heavy lifting
  - Obesity
  - Smoking/coughing



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Tea



Coffee



Hot chocolate



Green tea  
(high in caffeine)



Blackcurrant juice

# FOOD & DRINKS WHICH CAN IRRITATE THE BLADDER



Citrus fruit and juices

(e.g. orange, lemon, grapefruit, lime & tangerine)



Tomatoes



Cola and other  
fizzy drinks



Alcohol

Code: LYR/08-0084-614303 Date of item: December 200



Water



Milk



Decaffeinated coffee

## DRINKS WHICH DON'T IRRITATE THE BLADDER



Decaffeinated tea



Herbal teas

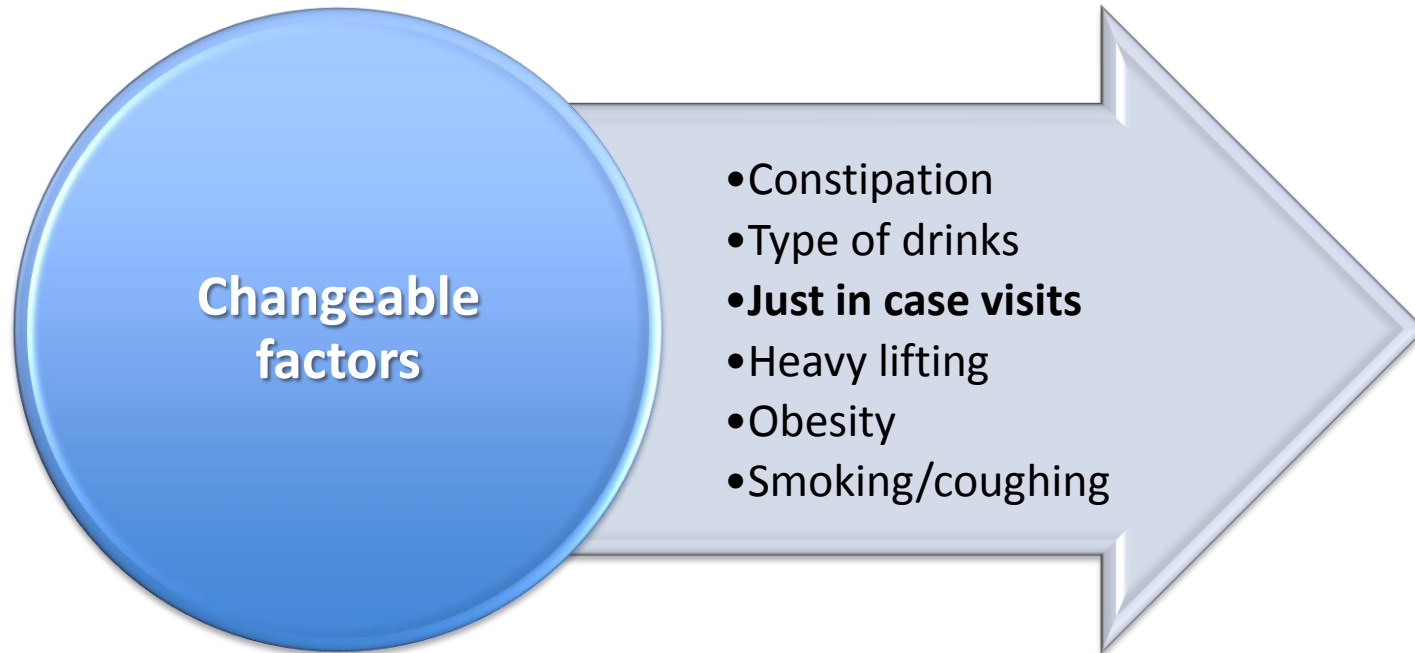


Milk Shakes



Diluted fruit juice  
(Cranberry is recommended)

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# What next?



- An individual appointment - 1 hour (if needed)
- **Assessment** according to your specific problem
- A **treatment programme** will be agreed with you
- You may bring a **chaperone** if you prefer
- Bring a **urine sample** and list of any **medication**



# Are you guilty of increasing our waiting list ?



**Please let us know ASAP if you can't make an appointment**

## **Discharge Policy:**

- Fail to attend =discharge
- Unable to attend =reception will need a genuine reason
- 2<sup>nd</sup> time unable to attend =you will need to discuss with your Physio if able to stay on treatment
- Please still attend your appointments when menstruating



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# Thank you for listening



<http://www.cardiffandvaleuhb.wales.nhs.uk/WHphysio>



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# Make friends with your Pelvic Floor !!

