Promoting Continence with Physiotherapy

This leaflet contains information about physiotherapy advice and treatment for anyone with bladder and bowel problems.

This may be leakage of urine, wind or stool.

This kind of leakage is called incontinence.
Incontinence is a common problem

Incontinence can happen at any age, and many people have a problem at some time in their lives. Most people with incontinence can be helped by physiotherapy. A specialist continence physiotherapist will help you to understand and manage your problem.

Incontinence can have many causes. Your specialist physiotherapist will talk to you about your incontinence. Together, you can decide on the best treatment.

Getting help

If you have any difficulty following the advice or exercises in this booklet, or find that your symptoms are not improving, ask to be referred, or if available, refer yourself to a physiotherapist with experience in treating women with pelvic and pelvic floor muscle problems. He or she will be able to assess you and offer specific treatments/alternatives that are suitable for your needs.

To find your nearest specialist physiotherapist visit:
pogp.csp.org.uk

Further advice and information booklets are also available from pogp.csp.org.uk
Different types of leakage

Stress incontinence
The most common type of leakage is stress incontinence. It is caused by a physical stress on your bladder that makes you leak. It often happens when you cough, sneeze or exercise. One of the causes of stress leakage is poor control of already weak pelvic floor muscles. Other problems, such as constipation, reduced fitness resulting in reduced muscle bulk, a persistent cough, surgery or being overweight may make it worse.

Urge Incontinence
Urgency is the sudden desire to go to the toilet immediately. If you leak on the way to the toilet, this is called urinary urge incontinence. There are several reasons why this happens - drinking fluids that irritate the bladder, such as fizzy drinks, caffeine or citrus, or because you are not drinking enough fluid through the day. It can also be a result of lost or reduced control of the bladder muscle. Urge incontinence can sometimes be caused by another medical problem, such as multiple sclerosis or a stroke.

Mixed Incontinence
If you have a combination of the above, then you are said to have mixed incontinence. Your specialist physiotherapist will help you to overcome your need to rush to the toilet while also helping you to get back control of your pelvic floor muscles.

Anal Incontinence
This is leakage of stool (faeces) or difficulty with controlling wind. It may be caused by muscle weakness around the anus (back passage).

Physiotherapy assessment
At your first appointment with your specialist physiotherapist, it is important to find out about you, your lifestyle, any surgery you may have had and any other existing medical problems you have. You will be asked detailed questions about your problem so that your therapist can understand your condition before you start your treatment. This assessment may take up to an hour.

Specialist physiotherapists understand how pelvic floor muscles work, and how they contribute to the control of your bladder and bowel. To assess these muscles, it is helpful to do an internal examination to assess how strong these muscles are and what problems you may have.

This procedure will be explained to you, and you will be asked to give your consent for the examination. Afterwards, the results of your examination will be discussed with you, and you will set an individual plan of treatment together.
Some specialist physiotherapists also use ultrasound scanning to assess your pelvic floor muscles, and this may be part of your initial assessment as well.

**Physiotherapy treatment**

**Pelvic floor exercises**

Your pelvic floor muscles contribute to bladder and bowel control, sexual responses, pelvic organ support (prevention of prolapse), and support of your pelvis and lower back. Physiotherapy treatments can help to reduce your leakage problem. Even if you already do pelvic floor muscle exercises, and have strong pelvic floor muscles, you may not be using them at the right time, or in the right way to prevent leakage. Your physiotherapist will give you a programme designed especially for you.

It can take 3 months or longer to improve the function of your pelvic floor muscles; however, your leakage and symptoms may start to get better before that. It is very important to exercise these muscles regularly.

**Electrical Stimulation**

If you have difficulty working your pelvic floor muscles, or you experience urgency and urge incontinence, you may benefit from electrical stimulation. This treatment is safe, and should not be painful or uncomfortable.

If used for stress incontinence, a small electrical current is passed through your pelvic floor muscles to help you tighten them, and you exercise with the machine to help retrain the muscles.

If the treatment is used for urgency and urge incontinence, the machine will be programmed to calm down the inappropriate sensations you are getting, and you may not feel your muscles tightening.

You can purchase units for home use, but always discuss with your therapist whether this will be of benefit for you.

**Biofeedback**

This treatment often involves using special equipment, which gives you information (feedback) about how well your muscles are working. Your specialist physiotherapist may offer biofeedback treatment to you, if appropriate, in the form of ultrasound, a biofeedback unit, cones, weights or electromyography - see the sections below for more details. Alternatively, you may gain enough biofeedback from your physiotherapist through verbal advice and information given during and following an examination to enable specific changes in muscle activation to be made.
**Ultrasound**
Your clinician may use ultrasound over your perineum during your assessment and ongoing treatment to help you visualise your pelvic floor working (or overworking). This can be used as a form of biofeedback.

**Cones or vaginal weight /pelvic floor muscle exercisers**
Vaginal cones/weights are inserted into the vagina (like a tampon) to help exercise your pelvic floor muscles. You can hold them in while you do other things, such as light housework. Your physiotherapist can help you to make sure that you are using them in the best possible way. You should always follow the instructions that come with the device unless you have been advised otherwise by your specialist physiotherapist. They may not be suitable for every woman, and you should discuss this with your therapist. They are not designed to be used by men.

**Drinking Habits**
You may receive advice on how much and what type of drinks to have, as well as ways to control urgency and prevent leakage. You may also be given lifestyle and dietary advice.

**Bladder Diary**
You may be asked to fill in a bladder diary for a few days. This asks you to measure how much you drink and how much urine you pass, as well as the number of times you have a leak through the day. This information helps your specialist physiotherapist to understand how your bladder is working, and she can give you advice to help improve your symptoms.

**Training your bladder**
Bladder retraining will help to reduce frequency, urgency and urge incontinence. Your specialist physiotherapist can teach you how to control the sudden overwhelming urge to pass urine, stop you rushing to the toilet immediately and take control of your bladder.

**Constipation**
Straining to open your bowels may stretch the supporting structures within your pelvic floor and weaken the structures. This may aggravate your urinary symptoms and stretch your pelvic floor. You may be given advice about your diet to help with symptoms, and be given tips on how to empty your bowels more effectively.

**Motivation**
Research shows that, if you are motivated, your treatment will be more successful. This means that you should agree your treatment programme with your specialist physiotherapist, and decide to practise the exercises regularly at home. You should also follow any extra advice you are given.
Apps
There are various apps available online that can be uploaded on to your phone or tablet. Your personalised training programme (suggested by your physiotherapist) can be added to it, and reminders can be set to help you complete your exercises to maximise your pelvic floor strengthening programme.

Weight
Being overweight puts an extra strain on your pelvic floor muscles. Your leakage may improve if you lose weight.

Lifting
Heavy lifting also puts a strain on your pelvic floor muscles. Try to avoid heavy or repetitive lifting whenever you can. With any lifting, try to tighten your pelvic floor muscles before and during the lift, and don’t hold your breath.

Exercise
High-impact exercise puts pressure on your pelvic floor muscles. This may aggravate your leakage too. Sit-ups, if done incorrectly, can make you leak, and will put extra strain on your pelvic floor muscles. Correct use of your ‘core’ muscles may improve the working of your pelvic floor muscles. Your specialist physiotherapist can advise you on the right activities for you.

Smoking
Telephone the NHS helpline:
Smokefree 0800 0224332
www.nhs.uk/smokefree

Helpful advice
Simple tricks can make it so much easier for you to prepare to empty your bladder or bowel:

- Drink 1.5-2 litres of fluid a day (urine should be pale in colour).
- Avoid caffeine (i.e. tea, coffee and energy drinks).
- Avoid fizzy drinks.
- Avoid artificial sweeteners.
- Avoid constipation.
- Aim for a healthy weight for your height.
- Avoid heavy lifting or high-impact exercise.
- Quit smoking (see advice on leaflet).