Physiotherapy and the Pelvic Floor Muscles

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POOR BLADDER CONTROL PROBLEMS

Poor bladder control and having wetting accidents are common problems. Many women do not report incontinence to their doctor and so put up with accidents for many years before seeking help.

You should not leak when coughing, sneezing, lifting, exercising or during intercourse. You should also be able to control the urge to empty the bladder and make it to the toilet in time. You should not have to keep going “just in case”.

Pelvic floor exercises are effective, if you use the correct muscles to control your bladder.

If in doubt about your exercises, seek help from a Chartered Physiotherapist.

STRESS INCONTINENCE

This is leaking from the bladder when you cough, sneeze or exercise. It is associated with weakness of the pelvic floor due to pregnancy, childbirth and menopause.

URGENCY

This is an overwhelming desire to pass urine which means rushing to the toilet.

URGE INCONTINENCE

This is due to over-activity of the bladder muscle or nerves. It gives a sensation of urgency to pass urine and you may not reach the toilet in time. Having to get up more than once a night is common.

THE BLADDER

The bladder is a balloon like muscle, which stores urine. It can hold around 500mls or 1 pint. As it fills to capacity, it
gives a sensation to pass urine. By tightening your pelvic floor muscles you should be able to delay the urge and postpone emptying the bladder until it is convenient. It is normal to empty your bladder 4-7 times in the day and once at night.

PELVIC FLOOR MUSCLES

The pelvic floor muscles are like a trampoline and work to support the bladder, vagina, womb and rectum, holding them in the correct place. These muscles should react automatically to close the bladder outlet when you cough or sneeze. During childbirth, these muscles can be damaged and the muscles are no longer as effective at controlling the bladder outlet.

ABDOMINAL MUSCLES

The deep muscles of your abdomen support your spine and pelvic floor. These supporting muscles provide a “girdle of strength” around your pelvis and work for long periods of time. They work most effectively when the pelvis is held in the natural ‘neutral’ position.

To be more effective in doing your exercises AIM to find this neutral position. Imagine a compass on your lower abdomen, the navel is north and pubic bone is south. Your pelvic bones are east and west. In neutral, the line between the pubic and pelvic bones remains horizontal. Start your exercise with your pelvis in this position whether you are lying, sitting or standing.
POSTURE

When your posture is correct you will look and feel better. It also enables you to improve the control over the pelvic floor for longer periods of time e.g. Out for a walk.

FINDING THE CORRECT POSTURE

- Hold your head up but not your chin.
- Shoulders back and neck long.
- Breathe deeply.
- Pelvis in neutral.
- Knees straight not locked.
- Weight between the big toe, little toe and heel.

FINDING THE ABDOMINAL MUSCLES

These muscles are easiest to find in side lying with the tummy relaxed. Check your pelvis is in neutral whether in lying, sitting or standing. Slowly and gently draw in the lower abdominal muscles as if bringing your tummy towards your spine (and your hip bones together). Don’t move the spine or pelvis. Keep breathing and hold the muscle for at least 10 seconds. When you can do 10 x 10 second holds, introduce the hold while walking with a good posture. Make sure your technique is correct. Using this abdominal muscle can help you find your pelvic floor muscle.

To achieve the best control of the bladder you need to contract and squeeze the abdominal and pelvic muscles together. It is not easy to find the pelvic floor muscles and it can take a lot of time and concentration.
STOP TEST

When passing urine, try to stop or slow mid stream. This is a test only and NOT an exercise. (You should not do this test more than once per week).

SELF TEST

When in the bath, put one or two fingers into the vagina and see if you can feel the squeeze.

THE PELVIC FLOOR EXERCISE
(THE PELVIC ELEVATOR)

Every one is different and needs an exercise programme to suit their individual needs.

- Sit comfortably on an upright chair, knees apart.
- Make sure you are sitting with the weight evenly on both buttocks.
- Imagine your pelvic floor is like a lift. Try to take the lift up and down to different floors.
- Continue to breathe deeply down to the bottom of your rib cage throughout this exercise.
- Breathe in deeply and then all the way out.
- Take the lift to the first floor by tightening the lower abdominals and back passage. As soon as you have tightened - resume normal breathing while you hold.
- Release the muscle completely.
- Next time contract the muscles and take the lift to the second floor. Stop breathing as you contract - resume breathing as you hold. Release completely.
- Continue this again to the third floor.
Correct breathing and the ability to release the muscle to the basement during the programme is very important.

TRAINING THE MUSCLES

In order to control the bladder and stop accidents you must increase the strength and endurance of the muscles.

To train the muscles you need to spend time every day doing the exercise until the muscle feels tired.

Aim to squeeze harder to take the lift higher.

Aim to squeeze longer to hold the lift longer at each floor.

Count how long you can hold for and how many times you can repeat the squeezes. This will enable you to know that you are increasing your exercise programme and improving your strength.

Record your programme to see your progress.

STOPPING THE LEAKS AND CONTROLLING THE BLADDER

Once you have mastered these exercises USE them when you NEED them.

SQUEEZE WHEN YOU SNEEZE

As you breathe in to cough or sneeze, quickly take the muscle to the third floor and hold it while you cough or sneeze. PRACTICE HOLDING the muscle and COUGHING.

CONTROLLING THE URGE, stop and take a few deep breaths, squeeze as hard as you can until the urge fades, then holding the muscle at the first floor walk to the toilet. Squeeze hard again when undressing.
POINTS TO REMEMBER

- Don’t go to the toilet “just in case”. Learn to take control of your bladder and have confidence.
- Most women only leak when doing activities. To prevent accidents when out walking or doing exercises, learn to hold your posture and abdominal control. Holding the lift at the first floor gives you similar control.
- The more control you need, the harder you must squeeze the muscles.
- Use your exercises when you need them and do them regularly.
- Drink normally: 1.5 litres of water a day.
- Avoid tea, coffee, fizzy drinks and alcohol.
- Watch your weight, being over weight can put a further strain on your muscles.
- Avoid constipation and straining by taking extra fibre in your diet.
- It may take up to 6 months to train the muscles.
- Improvements can continue for up to a year.
- KEEP THEM UP FOR LIFE.
- Contact your Chartered Physiotherapist through Irish Society of Chartered Physiotherapists 123 St Stephens Green, Dublin 2. Telephone: 01 402 2148

BLADDER RETRAINING

For people who have problems making it to the toilet in time (urgency or urge incontinence), simple bladder training can improve your symptoms.
An average person can hold 400 to 500mls of fluid and passes urine six to eight times in a 24 hour period.

When you have a problem with urgency it is usually due to a disturbance in the reflexes of the bladder or reduced bladder size. The bladder gives off strong messages that it wants to contract and you are unable to do anything to stop the reflex, the bladder contracts and the pelvic floor is not strong enough to resist it.

To retrain your bladder, when you feel the urge to go to the toilet during the day try and hold on for a few minutes longer than you normally would before passing urine. Try not to rush to the toilet at the point when your urge is strongest (see diagram). Use the techniques below to practice holding. It is very difficult at first and often impossible. If the urge is too severe then you should practice these techniques in conjunction with drug therapy.

Bladder retraining may also be used for someone who has an over stretched bladder.

YOUR RETRAINING PROGRAMME

When the urge starts stand still, as the urge rises squeeze your pelvic floor, as the urge peaks distract yourself, as it subsides wait and walk calmly to the toilet.
Helpful hints for holding on:

- Stand still or sit down. Sitting and leaning forward is best.
- Practice deep regular breathing.
- Think of something else other than the toilet.
- Tighten your pelvic floor muscles.
- Press on your pelvic floor muscles and hold the pressure for as long as it takes for the urge to subside.
- Stand up on your toes for a long as it takes the contraction to subside (this helps settle the reflexes).
- Avoid large quantities of alcohol, avoid tea and coffee.
- Drink at least a litre of water daily.

BLADDER DIARY

Your doctor, physiotherapist or nurse continence advisor may ask you to fill out a bladder record chart or bladder diary. This is a record of your fluid intake, the amount of fluid passed and episodes of leakage daily. This gives a lot of information about the minimum and the maximum amount of fluid the bladder can hold, types of fluids you are drinking, whether they are irritating the bladder, the number of times you are going to the toilet daily and the different patterns that you have established. This chart will be used to help you to understand and retrain your bladder together with your advisor.
# Bladder Record Chart (Frequency and Volume)

Measure and record in this box the amount of fluid taken.

Measure and record in this box the amount of urine passed.

Tick this box every time you wet yourself before getting to the toilet.

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<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
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Example:

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<tr>
<th>TIME</th>
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<th>Day 2</th>
<th>Day 3</th>
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For a list of Physiotherapists in your area with an interest in incontinence please contact the Irish Society of Chartered Physiotherapists at 01 402 2148