

The Active Life

A new regular column by chartered physiotherapist Nicola Bolger



Sneezy leaks and squeezey pees more common than you think!



If you only read the first paragraph of this article, then it has achieved its goal!

Sneezy leaks and squeezey pees, otherwise officially known as urinary incontinence, is a very common issue affecting mostly women, but it is NOT normal. You should not leak urine when coughing, sneezing, lifting, exercising or during intercourse. In addition, you should be able to control the urge to empty the bladder and not keep going to the toilet "just in case". Fortunately, there is a relatively straightforward solution in the majority of cases.

The statistics in this area of women's health and pelvic floor health are very interesting and most likely underestimated. One-in-three women may suffer from urinary incontinence in their lifetime, with that ratio being one-in-two after menopause and 45% of women may have urinary incontinence at seven weeks post birth. Many women do not report these symptoms due to a multitude of reasons, so put up with poor bladder control and accidents for years.

A quick overview of the pelvic

floor anatomy: The pelvic floor muscles are located across the base of the pelvis to help keep the pelvic organs bladder, bowel and uterus in the correct position. In essence, these muscles work as a trampoline. They are held in place by ligaments that support the organs, especially with an increase of pressure in the abdomen known as intra-abdominal pressure, which occurs with lifting, bending, carrying and straining.

When intra-abdominal pressure increases, the pelvic floor and the abdominal muscles brace, so that internal organs such as the uterus and bladder are not pushed downwards.

The pelvic floor muscles work to help keep the bladder and bowel openings closed to prevent unwanted leakage (incontinence) and they relax to allow easy bladder and bowel emptying.

These muscles should react automatically to close the bladder outlet when you cough or sneeze. The bladder is a balloon-like muscle which holds an average of 500-600mls of urine. As it fills to capacity, it gives the sensation to pass urine and by tightening your

pelvic-floor muscles, you should be able to delay the urge and postpone emptying the bladder until a convenient time.

There are two main types of incontinence – stress and urge. Stress urinary incontinence is the symptom of involuntary leakage of urine on sneezing, coughing, laughing or exertion.

Urge urinary incontinence is the involuntary leakage of urine associated with or immediately preceded by urgency (a sudden compelling desire to urinate that is difficult to delay). This is also known as the "latchkey urgency", because the symptoms can come on when putting the key in the door when returning home.

Why do problems occur with the pelvic floor muscles? Essentially, like any other muscle in the body, they can become weak, overstretched, slow to work, too tight or torn.

Pregnancy and childbirth can cause problems for the pelvic-floor muscles, especially if you have had an assisted vaginal birth, an episiotomy, significant tear or a very large baby.

The hormonal changes that

occur due to menopause can cause pelvic floor muscle weakening or may accentuate any symptoms.

Chronic constipation takes place when you have to strain to empty your bowels on a regular basis and can cause overstretching or weakness.

Heavy lifting, chronic coughing and being overweight may cause an increase in abdominal pressure, which may put your pelvic floor muscles under strain.

High-impact exercise such as heavy weight-based and very vigorous gym activities with jumping can overload pelvic floor muscles, leading to weakness.

There are conservative and surgical options to managing urinary incontinence.

The conservative options include pelvic floor muscle strengthening, activity and lifestyle modification and medications.

The latest research published this year from the National Institute for Health and Care Excellence based in the UK has advised pelvic floor muscle strengthening exercises as the first line of treatment to consider, even before

a surgical option. The research has shown that a basic assessment and prescription of exercises specifically for the pelvic floor muscles can improve and in a high proportion of cases actually cure urinary incontinence.

If you are suffering from urinary incontinence, a visit to a chartered physiotherapist who specialises in incontinence issues is worth considering.

Your visit will include a detailed assessment analysing the symptoms, assessing pelvic floor muscles, identifying habits that may be contributing to the symptoms and prescribing a simple, individualised exercise programme to improve pelvic floor strength and function.

So, in summary, urinary incontinence is far more common than you think and solutions other than surgery are available.

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