

Incontinence

What is incontinence?

Incontinence is the accidental or involuntary leakage of urine, faeces or wind. It is a common condition, affecting just under four million Australians. Much can be done to lessen the impact of the condition and often, it can be cured. For many people, simple exercises and training programs can help. If you are experiencing incontinence, seek help from your general practitioner.

Types of incontinence

The most common types of incontinence are:

Urge Incontinence (urinary): The bladder muscle contracts with little warning and the person often feels that they have 'got to go' immediately.

Stress Incontinence (urinary): Urine leaks when the person exerts herself, e.g. when sneezing, coughing, laughing or jumping.

Faecal Incontinence (bowel): is the passing of faeces, wind or soiling of underwear without control. This is commonly caused by constipation but can also be associated with diarrhoea.

Causes of Incontinence

As women age, their pelvic floor muscles – the 'sling' of muscles that supports the bladder, bowel and uterus – may stretch and weaken. The following factors may contribute to this weakening:

- the long-term effect of pregnancy and childbirth
- being overweight
- chronic constipation that causes you to strain
- chronic coughing
- frequent lifting of heavy objects, e.g. children, weights at the gym
- a reduction in the hormone, oestrogen after menopause

Other factors that can increase the likelihood of incontinence include, surgery, chronic lower back pain, recurrent urinary tract infections, some medications, diabetes and other medical conditions.

Prevention and treatment

You can prevent and treat incontinence with a number of simple dietary and lifestyle behaviors:

Fluid intake:

- drink 6-8 glasses (1.5-2 litres) of fluid per day, unless otherwise advised by your doctor
- drink more if the weather is hot or if you are exercising
- cut down on caffeinated drinks, carbonated beverages and alcohol as they worsen incontinence

Food:

- eat plenty of fibre from a wide variety of foods, to avoid constipation
- eat 2 serves of fruit, 5 serves of vegetables and 5 serves of cereals/breads each day

Activity:

- be physically active daily, as this stimulates movement of the bowel and keeps your weight healthy. Aim for 30 minutes of moderate physical activity on most, if not all days
- do your pelvic floor exercises regularly (see *pelvic floor exercises* over page)

Lifestyle:

- maintain a healthy body weight
- don't smoke, as chronic coughing associated with smoking can weaken your pelvic floor
- avoid heavy lifting as this can weaken your pelvic floor; take particular care lifting weights at the gym

Toilet habits:

- don't get into the habit of going to the toilet 'just in case'. Go only when you have the urge to go (see *bladder retraining* below) when using the toilet, sit down properly with your feet firmly supported. This helps to fully relax your pelvic floor and sphincter muscles. Don't strain to wee or pass a bowel motion
- avoid constipation as this can affect bladder and bowel function
- don't practice stopping the flow of urine mid-stream as an exercise, as this can send incorrect messages to your bladder and stop it from emptying completely
- visit your doctor if you suspect a urinary tract infection or if you have ongoing respiratory problems

Pelvic floor exercises

Performing daily exercises to strengthen your pelvic floor muscles can reduce the risk of incontinence.

How to strengthen your pelvic floor:

- start by sitting comfortably in a chair. Tighten the muscles around the anus, vagina and urethra all at once and try to lift them up inside. It is important not to bear down, hold your breath or squeeze your buttocks or legs together and nothing should be tense or tight above the belly button when exercising
- try to hold this while you slowly count to five, then let go
- rest and relax your pelvic floor muscles while you count to five, then repeat the above steps
- if you can't feel anything happening at all, try lying down. If this does not help, you may need to seek advice from a pelvic floor physiotherapist to learn how to work your muscles effectively
- try to hold for a little longer and gradually build up until you can hold for 10 counts and rest for 10 in between
- do as many as you can up to 10, then rest for a minute or two
- now do some really strong squeezes – as strong as you can, then let go. Do as many of these as you can, up to about 10
- repeat this process every day
- progress to exercising your pelvic floor muscles while standing and walking
- squeeze your pelvic floor hard and fast when you cough, sneeze, or pick anything up

Bladder retraining

Bladder retraining improves your bladder capacity and enables it to hold more urine. It is useful for women who frequently pass urine or have urge incontinence.

How to retrain your bladder:

- drink 6-8 (1.5-2 litres) glasses of fluid daily (avoid caffeine, fizzy drinks and alcohol)
- delay going to the toilet by one minute, then gradually, over weeks, increase this time to five minutes or more
- Avoid going to the toilet 'just in case'; go only when you have the urge to go

Hormone Replacement Therapy

In some women, incontinence becomes worse after menopause due to a reduction in the hormone, oestrogen. Sometimes the use of oestrogen therapies, either vaginally or as hormone replacement therapy (HRT) may help.

Incontinence aids

Incontinence pads and accessories can help you feel more comfortable and help maintain your quality of life. You can discuss these aids with your general practitioner, continence nurse, pelvic floor physiotherapist or pharmacist.

Where can I get more information?

www.jeanhailes.org.au

www.healthforwomen.org.au

www.continence.org.au - National Continence Helpline 1800 33 00 66

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This fact sheet is designed to be informative and educational. It is not intended to provide specific medical advice or replace advice from your health practitioner.

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