

Urinary Incontinence – No Laughing Matter

By Beatrice Hanzeli, PT

Have you ever laughed so hard you wet your pants, or experienced lack of bladder control following childbirth or prostate surgery, or switched exercise from jogging to swimming due to urinary leakage? Do you use protection “just in case” of a sudden cough or sneeze? What about being stuck in traffic with the need to “go”, trying to “hold it” and finally getting to a McDonalds or your house only to “lose it” with the toilet in sight.

The above scenarios are not amusing to people who experience urinary incontinence. Nor are they normal. Many individuals needlessly live with this problem for years before seeking advice or treatment. Often they can be helped with education and exercise.

People of all ages can have this problem. One third of men and women ages 30-70 have experienced loss of bladder control at some point in their lives. It affects at least 10 million persons in the US. At a minimum it can cause embarrassment and even lead to social isolation or nursing home admission. In a 2006 article by Morrison and Levy, urinary incontinence accounts for approximately 10% of nursing home admissions. In addition there are the costs of incontinence products and cleaning, lost productivity, as well as psychological stress.

A recent study published in the Annals of Internal Medicine (March 18, 2008) reports that the symptoms of urinary incontinence in women were resolved with pelvic floor muscle training in combination with bladder training.

Some health care professionals have special training in evaluating and treating this problem. They include physical therapists who are experts in exercise and have many training techniques and tools available to help. These physical therapists have pursued continuing education in pelvic floor rehabilitation. Dr Lauren Streicher, a well known OB GYN in Chicago, recently wrote about this in the Dec 1 '07 issue of the Chicago Sun Times. There she touted the services of a “trained pelvic physical therapist to treat stress incontinence”.

There are different types of urinary incontinence. Stress incontinence occurs when you do things that put pressure on your bladder (sneeze, cough, lift, stand up from a chair, jog, laugh). Pelvic floor (Kegel's) exercises can help this. These exercises strengthen the small muscles we all have that help us hold back urine or gas.

Urge incontinence, also called overactive bladder, happens when you have a strong need to urinate, but can't get to the toilet in time. Another symptom is having to go to the bathroom

frequently, even if you have not consumed much fluid, or leaking upon just hearing or touching running water.

Earlier this year Oprah Winfrey hosted Dr.Christine Northrup, author of a number of books on women's health. Dr Northrup pointed out that if you have been doing Kegel/pelvic floor exercises consistently and they aren't working, perhaps you were not doing them correctly. She said "I'd go to a physical therapist who specializes in the pelvic floor because a lot of women do not know how to do them properly – and if you do them properly – they're very, very effective". Doing the exercises incorrectly can actually exacerbate the problem, so just one visit may be all you need to learn the proper way and get control back.

Urinary incontinence can be caused by other things such as illness, injury, surgery, or medication. So be sure to consult with your primary care provider to rule out these other possibilities or complications and discuss treatment options.

If appropriate, seek consult with a physical therapist who can help you laugh, travel, exercise, garden and get through a cold/allergy attack without worrying about incontinence.

For more information contact Central Physical Therapy & Fitness, 206-860-3746, where Bea Hanzeli, PT practices with a specialty in pelvic floor rehabilitation.