

The logo consists of a dark blue square containing the lowercase letters 'b&b' in white, sans-serif font.

b&b

Bladder & Bowel
Community

Only When I Laugh, Cough or Sneeze!

A guide to Stress Urinary Incontinence

A large, abstract graphic of flowing, translucent blue waves or ribbons that curves across the lower half of the page, creating a sense of movement and fluidity.

www.bladderandbowelfoundation.org

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What is stress incontinence?

Many people leak urine when they laugh, cough or sneeze. This problem affects over two million people in the UK; it is extremely common. Doctors often call it "SUI" or stress urinary incontinence. It is also commonly referred to as bladder weakness.

For some people stress incontinence only happens during exercise like running or lifting something heavy. But stress incontinence can happen with very light activity like walking, laughing or getting up from a chair.

Stress incontinence is not caused by emotional stress or worry.

The good news is that most people with this problem can be helped. Many people can be cured completely. This booklet explains what causes stress incontinence and how it can be helped.

Who can suffer from stress incontinence?

Stress incontinence can affect men and women of all ages, although it is more common amongst women.

For a few women this can be a problem from a young age. For the majority, stress incontinence begins around child bearing years and can become an increasing problem with age. For men, stress incontinence is often a problem after surgery for prostate problems.



How the bladder works

Urine is collected and stored in the bladder. The bladder is made of smooth muscle. As the bladder fills up in between visits to the loo, this smooth muscle relaxes. When you do go to the loo the bladder muscle squeezes and the pelvic floor muscles relax allowing urine to come out through a tube called the urethra.

There are two mechanisms which prevent urine from leaking out of the bladder:-

The pelvic floor

Both men and women have a pelvic floor. This is made of layers of muscles and fibrous tissues, which support the bladder (and womb in women) and bowel. The pelvic floor muscles also help to stop leaks from the bladder and bowels.

Urethral sphincter

The sphincter is a circular muscle that goes around the urethra, the tube that urine comes out of. The sphincter muscle normally squeezes as the bladder is filling up. This creates a seal so urine can't leak out. When you go to the toilet, the sphincter muscle relaxes

What causes stress incontinence?

Stress incontinence usually happens because the muscles of the pelvic floor or sphincter are weak or damaged.

In women, these muscles can be weakened during pregnancy by the extra weight and natural hormonal changes. Childbirth can cause more problems especially if delivery is prolonged or the baby is large. Forceps and ventouse (vacuum) assisted deliveries may increase the risk of damage. Muscle tearing or episiotomies (where the muscle is cut to allow an easier birth) can cause further damage. Pelvic floor muscle exercises (see page 6) can help with these problems.

Some women develop stress incontinence after the menopause. This is because the pelvic floor becomes weaker. Even before the menopause, some women may notice that stress incontinence becomes worse in the week before a period. It is thought that stress incontinence may occur after a hysterectomy and also operations on the bladder.

People who have been constipated for a long time, or have a cough, may also be prone to stress incontinence. Men can develop stress incontinence especially after a prostate operation.

We have detailed fact sheets on how to do pelvic floor exercises for men and women – please contact us for a copy or download one from our website at www.bladderandbowelfoundation.org

Can stress incontinence be prevented?

Being overweight, smoking and eating an unhealthy diet seem to make incontinence more likely in later life. These are all things which can be changed.

Pelvic floor muscle exercises may help prevent stress incontinence. They should be started when we are young and continued through life. It is important for women who are thinking about having children, or who have become pregnant, to begin a regular routine of these exercises.

Men who are planning to have surgery on their prostate may also benefit from starting these exercises. On a positive note, pelvic floor exercises can also help men and women improve their sex life.

Who can help with stress incontinence?

The first thing to do is talk to your doctor or practice nurse, your local continence nurse or continence physiotherapist. These are nurses and physiotherapists who specialise in bladder problems. B&BC can provide you with the phone number of your local NHS Continence Advisory Service. Please phone 01926 357220 or visit www.bladderandbowelfoundation.org.

The doctor or specialist nurse will assess you by asking you some questions to try and find out what is causing your problems.

You may be asked:

- How often do you go to the loo?
- How often do you leak or have an accident?
- When do you leak or have accidents?
- What medicines do you take?
- What do you normally eat and drink?
- Is it painful or uncomfortable when you go to the loo?
- Do you suffer from constipation?

Common Tests

Here are some tests that you may be recommended to have as part of your assessment. Ask the person you see to explain what the test may involve and how it can help.

Urinalysis - this test needs a sample of urine to find out if there is any infection, or any blood in your urine.

Residual urine - this is to find out if there is any urine left in your bladder after you have gone to the loo. If you have problems emptying your bladder the doctor or nurse will check residual urine using an ultrasound

machine to take a scan of your bladder. Another way to check is to insert a catheter into the bladder through the urethra. This may be a little uncomfortable.

Internal Examinations - a specialist nurse or physiotherapist will gently place a finger into the vagina (for women) or back passage (for men) and ask you to squeeze your muscles. This will show how strong the pelvic floor muscles are. For men, this may also detect if the prostate gland is enlarged.

Urodynamics (Cystometry) - there should be no need for this test unless you need an operation for your problem. This is a more advanced test to help find out the cause of bladder problems. It involves putting a thin catheter (a small, soft, plastic tube) into the bladder through the urethra and another into the rectum through the anus. This can be a bit uncomfortable and is only carried out in a specialist hospital unit. The catheters are removed as soon as the test is over.

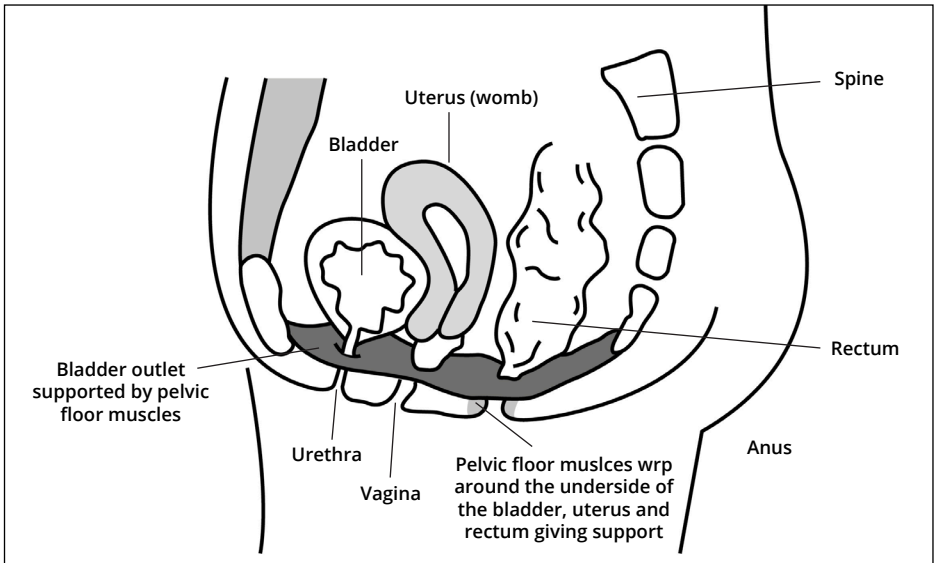
What treatment is available?

Once you know what is causing your problem, you will be able to discuss possible treatments with your doctor, nurse specialist or physiotherapist. They will explain what the problem is and how the different treatments can help. They will also advise of any side effects which may be associated with the treatment. Together, you can decide which treatment is the most suitable for you.

The following pages give some information on treatments you may be offered, as well as ways of helping yourself.

Pelvic floor muscle exercises

These exercises can help keep your pelvic floor muscles in good shape and give you more control over your bladder and bowel. They can also be used to help you if you already have symptoms of pelvic floor weakness. The pelvic floor muscles are layers of muscle stretched like a sheet from the pubic bone in front, to the bottom of the backbone (coccyx). There are three openings through the pelvic floor in women and two in men - the anus (back passage), the vagina in the woman (birth canal) and the urethra (bladder outlet). The muscles support these three openings, but if they are weakened or not in good condition they cannot support the openings effectively.



Why exercise these muscles?

When a muscle is not exercised it will weaken through lack of use. The pelvic floor muscles are no exception. The muscles of your pelvic floor have to be able to work in several different ways, just like other muscle groups in the body. The muscles need to be able to work strongly and quickly during times of sudden increase in intra-abdominal pressure

(coughing, sneezing) to prevent leakage; and they need to work less strongly but be able to hold on for some time without letting go (endurance) so that you can get to the toilet without leaking. You can teach your pelvic floor muscles to work in these different ways.

How to exercise your pelvic floor muscles

First of all you need to determine how strong your muscles are. Start by slowly tightening your muscles around the back passage. Pull upwards and forwards towards the pubic bone as strongly as you can. Imagine you are trying to stop passing wind and urine. This is a maximum contraction. Without holding your breath or tightening your upper tummy muscles (those above your tummy button), try to hold this squeeze for as long as you can (aim for 10 seconds). Now practice tightening your pelvic floor muscles quickly and strongly but do not hold your breath, tighten your upper tummy muscles or your buttocks.

Now you need to turn these squeezes into an exercise routine! You need to challenge your pelvic floor muscles 3 times a day. In time you will find it becomes a way of life and not too much of a chore. Initially take time out to concentrate on what you are trying to achieve.

Try the following routine:

Slowly pull up your muscles as strongly as you can. Hold the squeeze for up to 10 seconds. Let go and fully relax and then pull up again. Repeat this routine up to 8 - 12 times at each exercise session.

Finally you need to exercise the muscles for speed, power and co-ordination. Pull up quickly and briskly and with maximum effort, then let go immediately. Repeat this as many times as you can (aiming for 10). You might find it helpful to keep an exercise log so that you can chart your progress.

How long to continue the exercises

If you already have some symptoms of stress incontinence which might be caused by weakened pelvic floor muscles, do not be disappointed

if you do not notice any improvement even after a month or two of exercising. It is a long process which needs patience and some will power. It may help to talk to a specialist nurse or physiotherapist about the exercises to make sure you are doing them properly. They may also be able to suggest additional exercises, exercise devices such as weighted vaginal cones or muscle stimulation which could speed up the process.

Remember

- Practice pelvic floor muscle exercises regularly to make the muscles stronger.
- Try and breathe naturally and avoid tightening your buttocks, leg and upper tummy muscles whilst you are doing your exercises.
- Stop exercising if your muscles begin to ache and take a break.
- Don't give up. Keep doing the exercises.

Don't forget that it can take up to three months of exercising before you notice a lot of improvement. But it is worth the effort because for most people it is the way to overcome their problems. You must keep the exercises up for life too. We have detailed leaflets on how to do pelvic floor exercises, please ask for a copy.

Note: You should seek help from a health professional if you see little or no change in your symptoms after trying these exercises for three months.

Biofeedback

Biofeedback is a technique used to give information about a function of the body that is normally regulated or performed automatically. This will usually be given by a specialist physiotherapist or nurse and is a way of showing you how well you are performing your exercises. There are various types of biofeedback available ranging from computerised systems used in a clinic to home units which you can use with anal or vaginal electrodes as appropriate.

Electrical stimulation

Some people who can't control their pelvic floor muscles very well may be helped by electrical stimulation. Both men and women can try this treatment. A small probe is placed in the vagina (for women) or back passage (for men). The probe is attached to a small machine which carries an electrical current that activates the pelvic floor muscles. This is very useful for people who find it hard to do pelvic floor exercises in the normal way.

This treatment is normally carried out under the supervision of a specialist nurse or specialist physiotherapist, and machines are available for you to treat yourself at home. To find out more about this treatment, you should talk to a specialist nurse or physiotherapist.

Surgery

There are many different surgical procedures available for the treatment of stress incontinence. Surgery can often help sufferers, but may be accompanied by side effects. B&BC produces a factsheet with details of the common operations for stress incontinence.

Your doctor will discuss with you what any operation involves. Always ask if you are unsure about anything.

Other treatments

New treatments and operations are always becoming available. You can find out the latest through B&BC's website **www.bladderandbowelfoundation.org**.

Injectables

A less invasive treatment option and an alternative to major surgery, bulking agents can be injected into the wall of the urethra to improve the sealing mechanism of the bladder. There are a number of different bulking agents to choose from which have been used to treat stress incontinence with varied success due to the skill requirements of the procedure. The procedure is short and can be done under local or general anaesthetic. All have various risks and benefits which you should discuss with your doctor before any procedure.

These treatments take about 15-20 minutes and involve no hospital stay or lengthy recovery period. Injectables can be offered to women where pelvic floor exercises have failed or to those who are reluctant to have surgery or who are planning to have more children. It is also suitable for women who want to try other options prior to surgery, as it does not rule out the possibility of surgical treatment at a later date.

As with all injectable treatments, the results are not permanent and effectiveness is lessened over time. Topups may be required but this varies from individual to individual. Your healthcare professional can run through the different substances available and help you to decide whether this method is right for you.

A new form of injectable treatment is BULKAMID™ which, like other treatments, is placed along the urethral wall in order to achieve better closure and help prevent urine leakage.

Medication. The medication for the treatment of stress incontinence called duloxetine probably increases the activity of the nerve that stimulates the urethral of the nerve that stimulates the urethral sphincter, improving its function. The main side effect is nausea which may lead to many women being unable to take it. The drug is not recommended by NICE for England and Wales, but some women



do respond to the medication, and if you are unable to perform pelvic floor muscle exercises, and don't want surgery for your condition, then it would be worthwhile asking about this option.

Whether you are currently being treated or are waiting for treatment, maintaining a healthy bladder can help reduce the symptoms of bladder weakness.

Make sure you:

- Exercise regularly including doing pelvic floor muscle exercises. Avoid exercises that increase the pressure in your abdomen such as high impact aerobics, jogging/running, sit-ups. Walking, swimming, and toning exercises such as Pilates can be very helpful (if they are done correctly).
- Avoid smoking which can aggravate the symptoms of bladder weakness through coughing.
- Avoid gaining excess weight. If you are overweight a weight loss diet can help your incontinence. Your doctor or nurse can help you with this.
- Eat a varied, balanced diet and drink enough water to keep your bowels regular (recommended daily intake is 1.5 - 2 litres of fluid in 24 hours). Chronic constipation can put strain on the pelvic floor.

You could also try to:

- Limit the amount of caffeine and alcohol you drink to prevent bladder irritation and avoid increased urine production.

How can I cope with stress incontinence?

Stress incontinence causes many practical problems. Some people cannot be completely cured. Others may have problems while they are waiting for treatment. For these people, special products are available to help with the condition.

Pads and pants - choosing the right product

The best products to choose for managing urine leakage are those specifically designed to deal with urine. Normal feminine hygiene products are not suitable for dealing with continence problems. Incontinence products are available in a wide variety of styles and sizes and are available from local chemists, supermarkets and via the internet (generally on mail order).

You may be entitled to a supply of incontinence products from your local healthcare provider and you will usually need to have an assessment of your problem first.

Other products

Sheaths and leg bags may be useful for men who don't want to use pads. A sheath fits over the penis and urine is carried into a special bag, usually strapped to the leg. A penis clamp is also available which may help some men with stress incontinence. There are a range of devices available for women to help manage urinary incontinence. Many are products that are inserted into the vagina to help increase the pressure needed to stop urine leaking from the urethra. There is also a new product now available on prescription that is a urethral insert that blocks the leaking urine.

Further help -

Information on product choice can also be obtained from your local NHS Continence Service, details of which are available from B&BC. There are also a number of Fact Sheets available detailing the different products available for men and women. Please phone B&BC on **01926 357220** for a copy or visit the website at **www.bladderandbowelfoundation.org**

Bladder & Bowel Community Just Can't Wait card

A big problem with an overactive bladder is finding a toilet in time. B&BC has a 'Just Can't Wait' toilet card for you to use when you're out and about, shopping or socialising. It may help you gain access to toilets.

It doesn't guarantee you access to toilets but it states that you have a medical condition which requires the urgent use of a toilet, and most places you visit will try and help you.



The Just Can't Wait card is now absolutely free. To apply for a toilet card please visit our website at www.bladderandbowelfoundation.org or phone 01926 357220



Bladder & Bowel Community - Listening, guiding and supporting you

We provide information that allows you to make educated and informed choices, which will enable you to enjoy a greater quality of life.

We campaign for better services, treatments and products on your behalf, provide user-friendly booklets and fact sheets; offer online support forums and a magazine twice a year. It is not just a problem for the elderly and is not an inevitable part of ageing. There is help available.

We aim to:

- **Help break down isolation**
- **Promote emotional well being**
- **Encourage self help**

Get in touch:

- Find the contact details of your nearest NHS Continence Advisory Service by calling 01926 357220 or visit our website at www.bladderandbowelfoundation.org.
- Email us at info@bladderandbowelfoundation.org or write to us at The Bladder and Bowel Community, 7 The Court, Holywell Business Park, Northfield Road, Southam, CV47 0FS.
- Visit the website for information on how to manage your bladder or bowel control problems. You can also register on our Forum, which offers support, encouragement and understanding from people with similar problems. www.bladderandbowelfoundation.org/forum

Please contact us today to find out more about the work of Bladder & Bowel Community and how we can help you. For all general enquiries, please call 01926 357220.

A New Beginning



The Bladder and Bowel Community is very close to my heart. Being an ostomate and living my life battling bowel disease and a chronic illness I know the importance of the Bladder and Bowel Community all too well. My aim has always been to break the taboo of living life with a Bowel or Bladder dysfunction/diversion or condition, raise awareness, and help people to understand that we are not defined by our condition. We won't let it stop us from achieving our goals and aspirations in life.

The B&BC has been an integral part of the Bladder and Bowel Community and for years it has been instrumental in helping and supporting thousands of people across the country, including myself. With a staggering 14 million people a year in the UK suffering with Bladder and Bowel conditions at any one time, our support network is crucial.

Unfortunately, early in 2016, the B&BC was at risk of disappearing. Given my own personal experience of receiving advice and support from the foundation, I realised that I could not let this ship sink. Therefore I went about sourcing investment and am now the proud co-founder of the Bowel and Bladder Community. It's a new Beginning.

A handwritten signature in black ink that reads "Blake Beckford".

Blake Beckford

Co-Founder and Community Director



Join the

Community Support Network

Sign up to our forum for support, advice and to join the conversation.

www.bladderandbowelfoundation.org/forum



**Bladder & Bowel
Community**

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The Bladder and Bowel Community provides information and support for people with bladder and bowel issues. We publish a wide range of user friendly booklets and factsheets.

For more information please call us on 01926 357220, email help@bladderandbowelfoundation.org or write to us at The Bladder and Bowel Community, 7 The Court, Holywell Business Park, Northfield Road, Southam, CV47 0FS.

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