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Incontinence Article (*Anonymous*)

For many women, incontinence seems to go hand in hand (or rather bladder in pelvis) with SPD. However I managed to jig vigorously up and down with a full bladder before and after both my deliveries with no leakage problem, despite being on crutches because of SPD. I smugly put it down to inheriting a cast-iron pelvic floor and doing a few squeezes now and again. I recall practising the squeezes in my antenatal classes before I got SPD. Remember the ones? "Now, ladies, when you go the toilet, try stopping in mid-flow. Remember it's very bad to stop yourself half-way through going to the toilet but it is OK to do it once, just to find the right place. Those are the muscles you need to use. Squeeze, release; squeeze, release; squeeze, release. Very good! Not only will it help you not to leak in later life, but your partners will all be very pleased too." Snigger snigger. (What? Who cares if he's pleased or not? After those pregnancies and those deliveries, those stitches, those inflated, lumpy breasts, those sore nipples and every other pregnancy, SPD and baby-related problem, he's fulfilled his purpose and doesn't deserve ever to be pleased again...)

So, I was quite surprised when, my SPD having resolved, I started going to the gym to find skipping with both feet caused a slight leak. I started off not drinking before I went to the gym (not a good move as I got fitter and started sweating more and therefore dehydrating faster) then gave in and bought incontinence pads. Have you noticed how widespread the advertising is for those things? Those of us who leak are not alone; we just don't talk about it! One day I forgot the pad and had to go and get changed into different shorts half way through the class. Oh dear. It was beginning to get irritating.

Then I was talking to a slightly older friend who has three children and she casually related a tale which chilled my blood, or rather, clenched my buttocks. She had been late for a bus and decided to run to catch it. Breathlessly she legged it down the road and gasped her thanks to the driver. She didn't notice a thing until she sat down and found that her trousers were soaking... and the seat wasn't even plastic. Apart from making me sit down a tad more gingerly on the Park and Ride upholstery, this tale also made me realise I was at the top of the slippery slope. Today a mild leaking which you could stop if you weren't silly enough to go the circuit classes: tomorrow, pints of fluid escape and you don't even notice until you sit in it. The time had come to visit the G.P.

The G.P. referred me to the Incontinence Clinic, which is held at my local community hospital. What a catchy title. When I got there I immediately engaged an elderly lady in hearty conversation for the entire time I was waiting so that everyone would think I was only there to support her. She didn't even seem to mind when I called her Mum. But then, senility and incontinence do go hand in hand, don't they?

Anyway I saw the Incontinence Nurse who briefly examined me. This meant she put her finger in my vagina and told me to squeeze. Then she frowned, withdrew her finger and said I seemed to have a prolapse (i.e. the vaginal wall was collapsing and part of the bladder was poking through). She gave my squeeze a rating of one out of ten and referred me to the consultant for this kind of thing. She chatted to me about pelvic floor exercises and I described the squeeze, release business and was reassured that this was exactly the right thing to be doing.

I staggered home with my knees together and visions of internal organs falling out un-noticed whilst I skipped manically round the gym. Not to mention visions of my husband skipping off with a younger, tighter, model... the trauma of the pregnancies and births had faded by now and he was turning out to be quite a good husband and father so I didn't really want him to suffer too much any more. Surely one out of ten was too low a rating for a satisfactory marriage to be maintained?

So I went to see Mr Consultant (name changed), who was very nice and very reassuring. Just the sort of bedside manner you'd like if it had to be a man you were seeing. Although I was reading recently that we're all putting far too much emphasis on a good bedside manner when what we should be worrying about is how good they are at wielding the scalpel, I still appreciated seeing 'a nice man'. Maybe I'll write about my breast lump next time and you can compare and contrast consultants... but I digress.

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Mr Consultant gave my squeeze a rating of four out of five (thank goodness, I'd had enough of being nice to my husband) and said I didn't have a prolapse, I just had a slight weakening of the vaginal wall and wouldn't need an operation, just pelvic floor exercises. Pelvic floor exercises? I've been performing them religiously for years, I protested. So he referred me to Ms Physiotherapist (name removed so she's not inundated) for physiotherapy.

This is the woman we should all see. She is friendly, patient and completely professional with the perfect bedside manner for the job she does. Somehow we both got through the following procedures with far less embarrassment than I've felt being measured for a bra or trying on a dress in a shop.

I had to lie down and once again watch while the health professional squeezed out the clear jelly and put on the latex gloves. Are there any procedures for which men have to watch that preparation? Probably prostate examinations and that kind of thing, but nothing that happens regularly every three years.... But I digress again.

We then proceeded to have a long discussion, all with her fingers inside my vagina, as if it were the most natural thing in the world. And I wasn't even at all embarrassed! Anyway, the upshot of it all, and the reason I am writing this article, is it turns out that I was doing my pelvic floor exercises wrong. I bet most of you don't know this, but you can't just do any old squeezing and hope for the best, you have to squeeze properly. You've got muscles at the front and at the back (i.e. towards your anus and towards your bladder) and you have to squeeze all of them. I was only using the ones at the back. It took me quite a few goes but I finally found the front ones and found I could squeeze them a little bit, but not very well.

So Ms Physiotherapist sent me away to practise, which I did religiously five times a day, and I gradually got better and better until I could squeeze hard for a much longer time. It also turned out that I'd been doing sit-ups incorrectly and that had weakened my pelvic floor, maybe even causing the problem in the first place.

Unfortunately I can't say for definite whether I am fully cured, because I had a car accident (ironically on the way home from the physiotherapy) which meant I've had to stop going to the gym for the moment. However, experimental jumping up and down with a full bladder seems to indicate that I no longer need to buy shares in Tena-lady and I feel very optimistic about the whole thing.

I can't really think of a way to find the correct muscles without having an expert physiotherapist to help you. The best way I can think of to describe it is to squeeze your vagina and anus as tightly as you can and then try to squeeze above the entrance to your vagina as well. Someone else I know was told to tighten the anus then the vagina opening and holding them both up, lift up to the navel and hold for a count of ten. Repeat five of these and do those sets five times a day.

Another incontinent lady found a product called Aquaflex extremely helpful. This is basically a set of weights which you insert in your vagina whilst you're in the shower and use your muscles to hold in place, gradually increasing the weights as you get better at it. These can be very effective but you do need to make sure you are gripping the weights with the correct muscles in the first place. All these are instructions and ideas which other people found helpful: if you are incontinent, there may be something else you need to try. As with SPD, I recommend asking for professional help and if the first person you see isn't helpful, keep asking until you feel confident you've got a competent practitioner. Then you, too, can have a husband with a permanent smile on his face. (Good job this is anonymous, eh?)

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- Website: www.pelvicpartnership.org.uk
 - General enquiries: enquiries@pelvicpartnership.org.uk
 - Support for SPD: support@pelvicpartnership.org.uk
 - Membership: membership@pelvicpartnership.org.uk
 - Call The Pelvic Partnership on: 01235 820 921
 - If you are enquiring from Ireland: 028 4063 8116

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Tips to help improve your pelvic floor

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- 1 Hold your pelvic floor exercises for up to 10 seconds before slowly releasing. These should be done five at a time, and then five sets a day.
- 2 Get into the habit of tightening your pelvic floor prior to activities that are likely to make you leak - such as getting up from a chair, coughing, sneezing or lifting.
- 3 When walking around hold your tummy in by about 10%, no more, as this will do more damage than good.
- 4 Take time out to do your exercises and really concentrate on getting them right, 1 strong long held exercise is better than 10 small short holds.
- 5 Make sure you do sit-ups properly, it can weaken your pelvic floor.
- 6 Get into the habit of doing the exercises. Link doing them to some everyday activities.
- 7 Don't squeeze your legs together, tighten your buttocks or hold your breath whilst doing your exercises.