

Urinary Incontinence Facts

- Is a symptom or a sign, not a disease.
- It impacts 25 million Americans each year.
- Women 18 to 59: 26% have involuntary leakage.
- Women over 40 and postmenopausal women: 44 to 57% have an overactive bladder.
- Often the cause of pelvic floor dysfunction is childbirth, and incontinence doesn't show up until the mid-forties or later.
- Urinary incontinence (UI) correlates with the number of vaginal births; the more childbirths the higher incidence of UI.
- Sixty-five percent of female athletes have stress and/or urge urinary incontinence; 52% have pelvic pain.

What Do We Offer?

The pelvic floor specialist looks at:

- Dietary changes
- How medication affects bladder and bowel
- Bladder and bowel retraining
- Urge suppression techniques
- Teaching normal behavior of the bladder and bowels
- Ensuring Kegels are completed and prescribed correctly
- Decreasing pain in the pelvic floor area, low back, or legs
- Strengthening and retraining necessary pelvic floor, low back, core, gluteal, and leg muscles as indicated
- Posture

In Physical Therapy, we can treat all three types of urinary incontinence, fecal incontinence, fecal constipation, pelvic prolapse, pelvic pain, dysmenorrhea, dyspareunia, endometriosis, vulvar pain, pudendal neuralgia, and Interstitial Cystitis/Painful Bladder Syndrome.

What are some of the treatments?

- We have the Muscle Works Clinic EMG Biofeedback System to complete biofeedback for pelvic floor muscles
- We have the Pelvic Floor Stimulator which can help complete intravaginal/ intra-anal and external anal electrical stimulation
- Application of heat or cold to pelvic floor
- Perineal massage
- Pelvic floor internal trigger point techniques
- Vaginal/rectal dilators
- Vaginal weights or cones
- Bladder training

Physical therapy tailors treatment to meet the patient's individual needs, comfort level, and past experiences. We will complete an evaluation and treatment only to the level that the patient is comfortable. If you have urinary incontinence, you can make an appointment with your primary care provider, your OB/GYN, or your nurse practitioner. Your doctor or nurse practitioner will then work with you to treat your urinary incontinence and refer you to a specialist when needed, including physical therapy. A physician's referral is required by most insurances.

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Incontinence and Other Pelvic Floor Dysfunctions

You are never too old to retrain your bladder or bowels



BOONE COUNTY HOSPITAL

Rehabilitation Services

1015 Union Street, Boone, Iowa
(515) 432-7729
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Monday through Friday
7 a.m. to 5 p.m.

What is Pelvic Floor Rehab?

Pelvic Floor Rehab is the treatment of the bladder, bowel, sexual dysfunctions, and chronic pain. Over 17 million individuals in the United States have an overactive bladder. An overactive bladder can result in an urgency and frequency of going to the bathroom, frequently going to the bathroom at night, or a sense of incomplete voiding with or without pelvic pain and leakage.



Three types of urinary incontinence

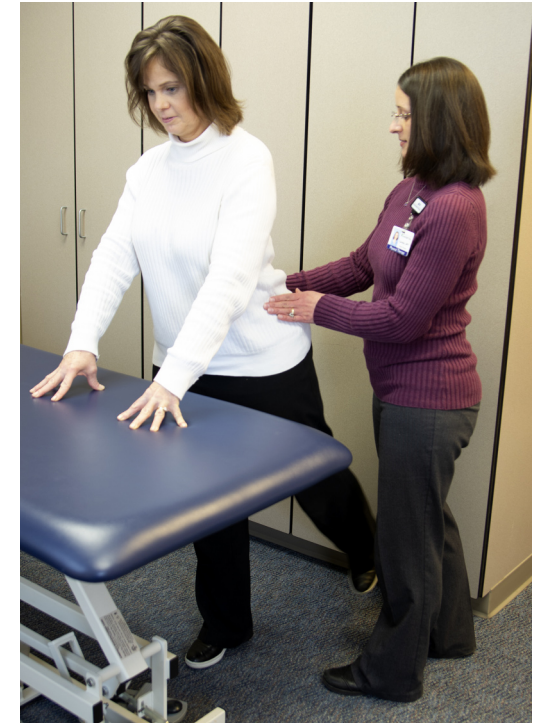
1. Stress incontinence—Do you leak urine with a cough, sneeze, laugh, or exercise? Does leakage occur immediately after exertion?
2. Urge incontinence—Do you leak urine on the way to the toilet or have a strong urge to go?
3. Mixed incontinence—Combination of stress and urge incontinence.

Fecal Incontinence

More than 5.5 million Americans have fecal incontinence. Fecal incontinence is the inability to control your bowels. When you feel the urge to have a bowel movement, you may not be able to hold it in until you can get to a toilet, or the stool may leak from the rectum unexpectedly.

Fecal incontinence:

- Affects children as well as adults.
- Affects more women than men and is more common in older adults than in younger ones.
- Is NOT a normal part of aging.
- Can make you feel ashamed, embarrassed, or humiliated.
- Can make you want to not leave the house, hide the problem, or withdraw from friends and family.



Physical therapy treatments can improve bowel control and make incontinence easier to manage.

Chronic Pelvic Pain

Chronic pelvic pain is when pain in the abdomen or pelvis lasts longer than three months and is not caused by diseases or conditions such as dyspareunia, dysmenorrhea, or endometriosis. It could be from trauma or abuse to the pelvic floor.

Pelvic pain affects one in seven American women ages 18 to 50; 61% have no diagnosis. Common complaints include pelvic pain, difficulty voiding, difficulty defecating, difficulty with intercourse, limited sitting, and difficulty wearing tight clothing and jeans.

Physical therapy can help with these symptoms through exercise, education, and special equipment.

Pelvic Floor Rehab is about eliminating bad habits, learning good habits, and giving you control back versus your bladder controlling you and your life.