

Water Works for Women (Incontinence)

By: [Jill Timm](#), MPT of OST Clintonville

Shhhhhhh. It's a huge secret...but I'll share it anyway. Women are leaking urine. They laugh, cough, sneeze and exercise while leaking urine. They are everywhere, from the women sitting next to you at bingo, to that woman who runs 5 miles every day around town.

13 million Americans are incontinent and 85% of those are women. According to recent consumer research, one in four women over the age of 18 experiences episodes of leaking urine involuntarily. 35% of women report changing their activities to accommodate the condition including avoiding exercise, traveling less frequently, and drinking fewer fluids. It is normal for an incontinent woman to spend more than \$900 per year purchasing pads and other products to cope with their leakage. Yet, after all of that, 62% of women waited a year or longer before even discussing their condition with a doctor.

However prevalent this is for women, treatment is much more diverse. There are multiple incontinent products to avoid embarrassing social leaking, medications to help control the overactive bladder, surgeries to help assist support of the bladder and related structures, and physical therapy.

What? Physical therapy? Aren't these the same people who promote pain and torture? The same people who get the basketball player back on the court, teach Aunt Elsie how to walk after her stroke, and make Uncle Bob's back feel better?

Yes. It is the exact same physical therapy. The above situations consist of working to control muscles. Control of leakage comes from multiple different places, but muscle control is a huge contributor. Believe, it or not, we have pelvic floor muscles "down there" that have a primary job for holding back urine. After being stressed for years, whether it is through childbirth, heavy lifting, weight gain or high impact exercise, these muscles get tired. They just get sick of having to work, and decide that they need a little rest and relaxation. However, rest and relaxation means that leakage is going to happen. Something needs to turn them on. That is where physical therapy comes into play.

Physical therapy for urogynecological conditions is two fold. The first is education. Since a significant number of women have no idea about appropriate bladder health, our job is to teach proper voiding (urinating) behavior and offer guidance for suitable diet and fluid intake habits. The second goal of physical therapy is muscle re-education. Muscles are generally pretty silly and don't realize that they should turn off or on at certain times. This is the same in most parts of the body – not just the pelvic floor. A urogynecological physical therapist can assess the ability of the pelvic floor muscles to work appropriately.

The goal of physical therapy, no matter what the diagnosis, is to improve function and reduce disabilities. A 2004 study found that 79% of patients receiving pelvic floor muscle training improved sufficiently to avoid surgery. A study in 1998 comparing medication to pelvic floor muscle exercise found significantly less leakage after completely just muscle strengthening. Another study found that after brief verbal instruction for Kegel exercises, only 49% of women could perform the contraction correctly. Worse yet, 25% of women were performing them in such a way to PROMOTE incontinence. That sounds like a good reason to talk to your doctor, don't you think so? This is a secret worth telling!

If you need physical therapy for incontinence, please look at our [Women's Health](#) page, and find the clinic nearest you.

