

Practical tips for improving bladder control

Urinary leakage also called urinary incontinence is defined as the accidental loss of urine caused by coughing, straining or not being able to get to the bathroom in time when there is a sudden urge to urinate. Millions of men and women experience some degree of urinary leakage. The steps listed below can help effectively manage urinary incontinence.

Step 1:

(1) Learn how to perform *pelvic floor exercises* (abbreviated *PMEs*) by contracting (squeezing) the muscles that are used to start and stop urine flow. These exercises can help prevent urinary leakage. Be sure not to contract facial, abdominal, or buttock muscles or lift your shoulders at the same time. Begin by contracting the pelvic muscles in “quick flicks” lasting 3-6 seconds at a time. Next, practice contracting pelvic muscles for longer periods of time until you can squeeze the muscles continuously for 10 seconds. Rest 10 seconds between each of the longer contractions. Gradually increase the number of 10-second contractions in a lying, sitting, and standing position. Try to perform 10 to 20 sets of the longer contractions three times daily in each position.

(2) If you smoke, quit.

Step 2:

(1) Record a three-day *voiding diary*. Make a list of 7 columns on a piece of lined paper. At the top of each column, list the time of day, type and amount of fluid intake, type and amount of food intake, amount voided in ounces, amount of leakage (small, medium, or large), activity when leakage occurred, and presence or absence of urgency. Record the appropriate information in each column for a total of three days.

(2) Avoid foods and beverages that are acidic or contain caffeine since they can irritate the bladder. Also drink at least a quart of water daily. Dehydration causes constipation and produces acid urine that irritates the bladder and increases urine odor.

(3) Refer to the bladder diary and identify things that cause urinary leakage and avoid them if possible. Also, try urinating “by the clock” at regular intervals *before* the onset of urgent urination. For example, if you leak when you wait more than 2 hours to urinate, set your watch and urinate every hour and a half. If you continue to experience urgent urination, ask your healthcare provider about prescribing anti-spasm medication.

(4) Practice **'freezing and then squeezing'** three quick *PMEs* (*quick flicks*) when a sudden urge to urinate strikes. Once the urgency sensation passes, proceed directly to a restroom and urinate. Before changing position or coughing, practice three quick flicks of *PMEs* and hold the last contraction while changing position.

(5) Use a moist wipe after urinary leakage to cleanse the skin, and apply a protective moisturizing skin cream or a film-like material if the leakage is severe or skin becomes irritated. Deodorizing sprays and liquids and tablets can help contain urine odor. A variety of disposable and reusable absorbent products are available for mild, moderate, and severe urine loss. Other devices to control urinary leakage are also available if necessary. Detailed information about products and where to buy them is available from the National Association for Continence 1-800-252-3337, www.nafc.org

(6) Assemble a "spill kit" with protective skin wipes, a zip-lock plastic bag for disposal, and a spare absorbent pad. Keep a spare kit in a pants or coat pocket, in the car, and at work.

(7) Wearing dark pants and using protective pads on upholstery and bedding can provide added security.

Step 3:

Spiritual Care: It is normal to experience mood swings when you have a chronic condition such as urinary incontinence. Share your concerns with your partner, health care provider, and spiritual counselor. Honest communication can dispel unspoken fears and make it easier to handle things.

Step 4:

Treatment: If urinary leakage doesn't respond to the measures listed above and it adversely impacts your quality of life, talk to Dr. McClure, Dr. McRackan or Cheri Elliott about other options that may be available.

Step 5:

Don't give up hope.