The Pelvic Floor

Incontinence

It is estimated that approximately 27% of Australians over the age of 15 experience some form of incontinence. Most of these are women, and over half are under the age of 50. Considering that in many cases this problem can be resolved, this number is far too high!



Incontinence can be separated into many different classifications and while it is often attributed to pregnancy or menopause, incontinence can occur due to a myriad of factors. The reasons incontinence is so common are somewhat contradictory – on one hand, people can be embarrassed by it, so they choose not to discuss it. On the other hand, in many women post-pregnancy, it is seen as 'normal' and just simply accepted as a part of life after children. While both reasons are valid, neither are necessary when you may be able to improve the problem simply though some well prescribed exercises/activities!

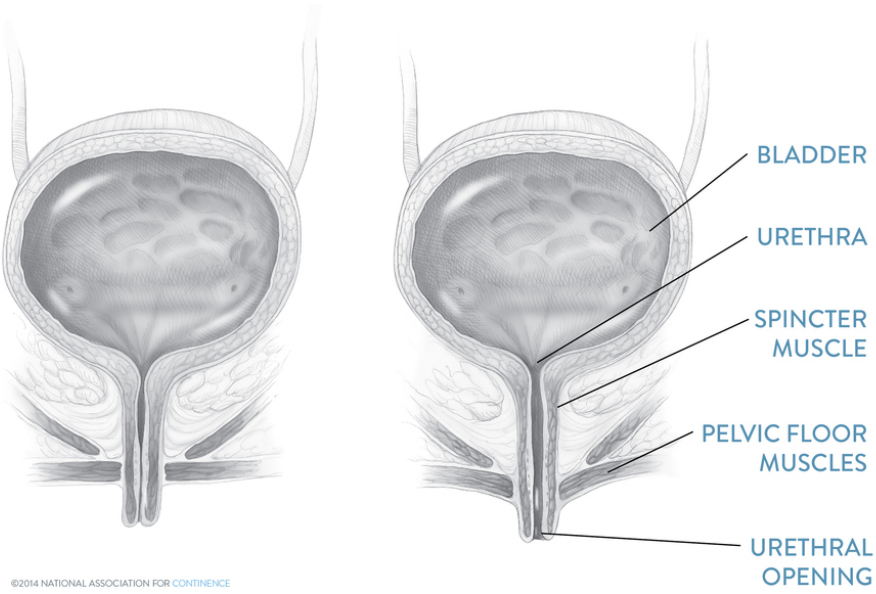
Basic Anatomy and Physiology

The bladder is a large organ that stores waste/urine from our kidneys. It has a muscular wall that we call the 'detrusor muscle' that contracts to pass the urine through the urethra. As you can see in the diagram, the urethra has sphincters that help us hold the urine in our bladder until we are ready to go. When the detrusor muscle contracts, the sphincter muscle will

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relax to allow the urine to pass through. Now is the part you were all waiting for, the pelvic floor.

Our ‘pelvic floor’ describes the base of our pelvis. It is made up of connective tissue, fascia and muscles. The muscles, like any other muscles in our body, contract and relax to help with movement and bodily function. The pelvic floor muscles contract and relax at specific times to help us void or hold in urine or faeces. Any weakness, or incorrect timing and control, can affect how well we can keep urine in, and how easily we can let it out.



Understanding how the bladder and bowel work in conjunction with the pelvic floor muscles and their own specialised sphincter and smooth muscles, gives you an idea of how physiotherapy may be able to help you. When your shoulder is sore and you are not able to use the muscles to reach overhead, you call your physio to work on the muscles and help strengthen. The same goes for the pelvic floor muscles, we can use physical and ‘brain’ training type exercises to help reduce or resolve the issue completely! So if you have been putting up with incontinence and the decreased quality of life that it can bring, don’t wait any longer. Speak to a trained professional today to get some advice on the steps you can take to get you back on track and living life to the full.

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