
Hawkes Bay Today Vital Signs Column, June 2012.

World Continence week in 2012 is designed to increase the awareness of incontinence and urge those suffering to seek help. As part of this awareness campaign, we are delighted to be able to *offer free, private appointments with Continence Clinical Nurse Specialist, Cushla on Wednesday 27th June.*

Continence

Needing to get the toilet in a hurry and wanting to go to the toilet often are common bladder control problems and affect approximately 600,000 New Zealanders twice or more a month. It is predicted that 1 in 4 Kiwi's will have incontinence by 2030.

The bladder itself is a hollow, muscular pump. It fills slowly from the kidneys and the pelvic floor muscles sit at the base of the bladder to maintain control of the valve. When the bladder is getting full, messages pass between the brain and the bladder to let you know to pass urine. The pelvic floor muscles then relax and the bladder squeezes the urine out. In an overactive bladder, the bladder muscle contracts when the bladder isn't full and/or the muscle works overtime causing frequent, strong, sudden urges and bladder leakage.

Urinary incontinence is four times more common in women than men. Stress and urge incontinence are the two most common types. Stress incontinence is the involuntary leakage of small amounts of urine with exertion such as coughing, sneezing, straining or playing sport. Urge incontinence is when a person is unable to get to the toilet in time. Many people suffer from a combination of the two.

Some factors that contribute to bladder control problems:

- Childbirth
- Constipation
- Certain medications
- Chronic cough
- Urinary infection
- Diseases that make it difficult to get to and use the toilet such as arthritis, stroke, Parkinson's disease and dementia
- Diabetes
- Obesity
- Menopause
- Prostate gland enlargement in men

There are many health professionals qualified to assist you with bladder control problems. Your doctor may offer treatment directly, refer you to a specialist or a continence advisor.

So how do we get good bladder control?

Drink 6-8 glasses of water per day to ensure urine does not become concentrated and limit your intake of tea, coffee, sugar, cola drinks and alcohol. Prevent constipation by increasing your intake of fibre in wholemeal bread, whole grain cereals, fruit and vegetables. Avoid straining while opening your bowels as this can overstretch the muscles of the pelvic floor and may eventually result in weakness occurring. Limit your use of laxatives so your bowel doesn't get lazy. Avoid becoming overweight, as this puts extra strain on the pelvic floor muscles.

The combination of calcium and magnesium may help prevent bladder spasms, whilst zinc-rich foods, such as fish and dark green vegetables, may help improve bladder function. Schedule toilet visits to help increase the length of time between passing urine, so the bladder muscle gets stronger and can hold more without emptying. Regularly do Pelvic Floor exercises to strengthen these muscles that support all pelvic organs. Tighten pelvic floor muscles for 3-5 seconds, increasing to ten seconds as the muscle gets stronger. Relax for as long as the muscles were tightened. Do this 5-7 times, three times a day to start and increase to fifteen exercises three times a day.

Incontinence is not a normal sign of aging and 70% of women with bladder control problems can become dry or experience significant improvement with these measures. Surgery and medications can be helpful too. Vesicare is an interesting medicine available in NZ. It helps control the bladder muscle to reduce frequent, sudden urges and leakage. It is subsidised by the government with a special authority prescription.

Pads may help people with bladder control problems to catch the leaking urine. Select pads specifically for incontinence as they are around three times more absorbent than period pads. Many pharmacies will have a selection available with samples for you to try to see which size is best for you.