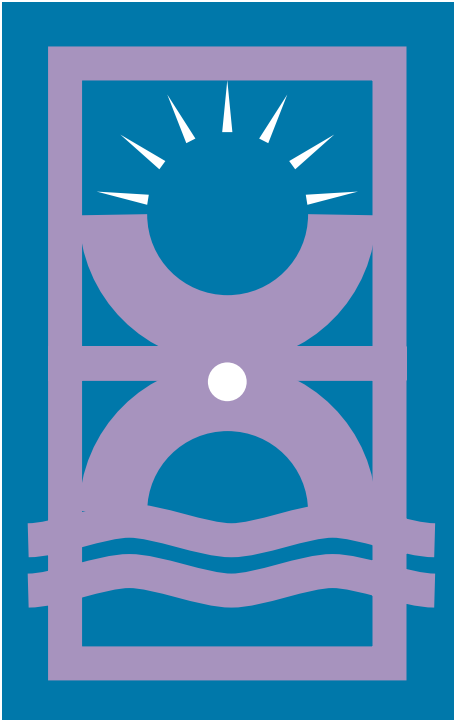


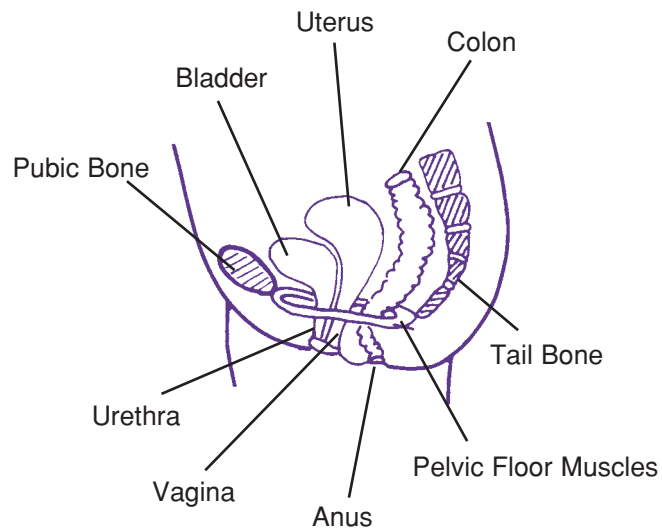


Pelvic Floor Exercises for Women



What are the pelvic floor muscles?

The floor of the pelvis is made up of layers of muscle and other tissues. These layers stretch like a hammock from the tail bone at the back to the pubic bone in front. A woman's pelvic floor supports the bladder, the womb (uterus) and the bowel. The urethra (front passage), the vagina (birth canal) and the rectum (back passage) pass through the pelvic floor muscles. The pelvic floor muscles play an important role in bladder and bowel control and sexual sensation.



Why the pelvic floor muscles may weaken

The pelvic floor muscles can be weakened by:

- pregnancy and childbirth;
- continual straining to empty your bowels (constipation);
- persistent heavy lifting;
- a chronic cough (such as smoker's cough or chronic bronchitis and asthma);
- being overweight;
- changes in hormone levels at menopause (change of life); and
- lack of general fitness.



The benefits of pelvic floor exercises

It is important for women of all ages to maintain pelvic floor muscle strength.

Women with stress incontinence, that is, those who regularly lose urine when coughing, sneezing or exercising should especially benefit from these exercises.

For pregnant women these exercises help the body to cope with the increasing weight of the baby. Muscles that are healthy and fit before the birth of the baby will recover more readily after the birth.

As women grow older it is important to keep the pelvic floor muscles strong because at menopause the muscles change and may weaken. A pelvic floor exercise routine helps to minimise the effects of menopause on pelvic support and bladder control.

Pelvic floor exercises may also be useful in conjunction with a bladder-training program aimed at improving bladder control in people who experience the urgent need to pass urine frequently (urge incontinence). Bladder training is explained in the 'Bladder Training' leaflet in this series.

How to contract the pelvic floor muscles

The first thing to do is to correctly identify the muscles that need to be exercised.

1. Sit or lay down comfortably with the muscles of your thighs, buttocks and abdomen relaxed.
2. Tighten the ring of muscle around the back passage as if you are trying to control diarrhoea or wind. Relax it. Practice this movement several times until you are sure you are exercising the correct muscle. Try not to squeeze your buttocks.
3. When you are passing urine, try to stop the flow mid-stream, then restart it. Only do this to learn which muscles are the correct ones to use and then do it no more than once a week to check your progress, as this may interfere with normal bladder emptying.

If you are unable to feel a definite squeeze and lift action of your pelvic floor muscles or are unable to even slow the stream of urine as described in point 3, you should seek professional help to get your pelvic floor muscles working correctly. Even women with very weak pelvic floor muscles can be taught these exercises by a physiotherapist or continence advisor with expertise in this area.

Doing pelvic floor exercises

If you can feel the muscles working, exercise them by:

1. Tightening and drawing in around the anus, the vagina and the urethra all at once, lifting them UP inside. Try and hold this contraction strongly as you count to five then release and relax. You should have a definite feeling of 'letting go'.
2. Repeat ('squeeze and lift') and relax. It is important to rest for about 10 seconds in between each contraction. If you find it easy to hold for a count of five, try to hold for longer - up to ten seconds.
3. Repeat this as many times as you are able up to a maximum of 8-10 squeezes.
4. Now do five to ten short, fast, but strong contractions.
5. Do this whole exercise routine at least 4-5 times every day.



While doing the exercises:

- DO NOT hold your breath.
- DO NOT push down instead of squeezing and lifting up.
- DO NOT tighten your tummy, buttocks or thighs.

Do your exercises well

The quality is important. Fewer good exercises will be more beneficial than many half hearted ones.

Once you have learnt how to do these exercises, they should be done regularly, giving each set your full attention. It might be helpful to have at least five regular times during the day for doing the exercises. For example, after going to the toilet, when having a drink, when lying in bed.

Other things you can do to help your pelvic floor muscles

- share the lifting of heavy loads;
- avoid constipation and prevent any straining during a bowel movement;
- seek medical advice for hay-fever, asthma and bronchitis to reduce sneezing and coughing; and
- keep your weight within the right range for your height and age.

Seek help

Good results take time. In order to build up your pelvic floor muscles to their maximum strength you will need to work hard at these exercises. The best results are achieved by seeking help from a physiotherapist or continence advisor who will design an individual exercise program especially suited to your muscles.



Who can help?

- Your doctor.
- National Continence Helpline freecall 1800 33 00 66.
(The Helpline can arrange telephone interpreters.)
- Your community or health worker, or physiotherapist.
- Special continence advisers at hospitals, community health centres, continence clinics or at the Continence Foundation of Australia Resource Centres or Branches.

Interpreters. Some services can arrange an interpreter (of the same sex, if preferred), at no cost to you. Check with your service.

Telephone interpreter services are cheaper and often available immediately. For example, the Translating and Interpreting Services (TIS) Doctors Priority Line provides a free service for doctors in private practice to talk with patients with poor English skills. Your doctor can book this service by phoning 1300 131 450.

You can get more information from these other leaflets in this series:

- Urinary Incontinence. What is it?
- Good Bladder Habits for Everyone
- Bladder Training
- Constipation and Urinary Incontinence
- Pelvic Floor Exercises for Men
- Dementia and Urinary Incontinence
- Bladder Problems and the Prostate
- Incontinence Aids and Appliances
- Incontinence: Myths and Facts
- What is a Continence Assessment?
- A List of Ten Frequently Asked Questions
- One in three women who ever had a baby wet themselves
- Faecal Incontinence
- Surgery for Stress Incontinence in Women

