# You Can Go With the Flow

Has it been suggested to you to see a physical therapist for pelvic floor dysfunction?

Annette Kornasiewicz

## **Urgency or Urge Incontinence**

### **URGENCY OR URGE INCONTINENCE**

Please read this health disclaimer before applying any of the information on the website.

This website, the information contained herein, is for people who have been examined by their medical professional and have been diagnosed with pelvic floor dysfunction. This site is providing education and information about exercises; however it is not providing physical therapy. Regular exercise is not always without risk. You are responsible for your own health and safety at all times. As such, by visiting and using the information on this website you are agreeing to the following:

You acknowledge and agree that you have been assessed by a qualified professional (i.e. your doctor) who has given you consent to take part in pelvic floor health and has ruled out more serious conditions that warrant further testing.

These exercises should not be painful. Please stop and seek the advice of your medical professional if you suffer any kind of adverse reaction to the exercises proposed on this website.

Your purchase of any workshop from youcangowiththeflow.com assumes your agreement to the above disclaimer.

#### INTRODUCTION TO URGE AND URGE INCONTINENCE VIDEO

Have you ever been at a new store, one you are unfamiliar with, and suddenly you feel the intense feeling that you must find a restroom NOW? Or, have you ever been in your car after a long day at work, hit the garage door opener, and out of nowhere you feel that you must go immediately or you will literally leak in your pants? You panic, and try to reach the toilet as quickly as you can, fumbling with your zipper, only to make it just in the nick of time (or not). These are the classic symptoms of urge or urge incontinence. There are TRIGGERS like running water, getting close to home or being in a store, that are so POWERFUL that you simply cannot stop the flow. This workshop is here to help!

Hello, it's Annette, your virtual Pelvic Floor Health Therapist! Welcome to the Urgency or Urge Incontinence Workshop! I am so glad you are here and ready to begin your journey to PERFECT HEALTH!

We will start our class by introducing you to what the PELVIC FLOOR is, HOW TO FIND IT AND HOW TO PERFORM A POWERFUL KEGEL. Once you have this technique down, we will show you how to condition and exercise your pelvic floor to SPECIFICALLY TARGET your problem area. Let's start with a quick anatomy lesson:

#### PICTURES AND VIDEO OF PELVIC FLOOR FOR MEN AND WOMEN

This may be an uncomfortable picture of our private parts, but I wanted to illustrate to you that it is the only thing between our innards becoming our "out-ards." Imagine that you are sitting on this piece of paper (in fact, you can print it out with this lecture and do just that) with the pointy part forward. Just think of the responsibility of this wonderfully powerful group, who work in concert together, to keep all those delicate functions up and in! There they are, suspending our organs in our bodies against gravity trying to pull everything down and out. Chances are you never thought about this perfect hammock of warriors until something went awry – either you started leaking a bit or you started having pain down there. The reason these muscles are so incredible is because of the delicate balance of two types of muscle (fast and slow twitch – I'll get to that later) that are responding to what we want them to do (volitional) and what our brain and organs want them to do (autonomic).

Now pick the video of the pelvic floor and how to find it...

#### VIDEO ON THE PELVIC FLOOR AND HOW TO FIND IT

basically, as you sit here in your chair or on an exercise ball, lets feel the boundaries of this pelvic floor everyone is talking about. Arch your back and roll forward; you can feel the anterior portion (pubic bone). Now start to have a rounded back or poor posture (don't ever have poor posture by the way) some can feel their coccyx or tail bone, which is the posterior portion of the floor. To the left and right sides are those bony sits bones that you can feel if you rock to one side and the other. This can be called your saddle area, all the places you would have pressure on while riding a horse. Delicate tissue, nerves and muscles are in this area and they have a BIG job to do!

OK, now that you know what your pelvic floor looks like and where to find it, let's move on to the video called "Performing a Powerful Kegel."

#### VIDEO ON PERFORMING A POWERFUL KEGEL

Now, most of you have heard of Kegels or have tried them in the past without much luck. Kegels are usually described as clenching your urinary sphincter area, the one that you would use to stop and start your flow of urine. Some may have suggested finding these muscles while on the pot, as this would be an obvious cue to those who have trouble, however, it is not recommended to perform Kegels in this way due to the interrupting of the complex physiological process of elimination. If you must try it this way to see if you can stop your urine, only do so a few times a month. I have found it much more helpful for people to concentrate on contracting the anal sphincter. The reason for this is that those muscles surrounding that area are generally more powerful and have more sensory information in them. Remember every muscle down there works as a team, so as you think about your anal sphincter the whole floor will pull up and in.

So let's try it. Here is a weird but effective visual – please do not actually try this, as it would be an uncomfortable and awkward discussion at the ER. Let's say I put a stack of 10 pennies on your chair before you sat down here for this class (and for some reason you have thin enough clothes on, or no clothes on, to do what I am going to ask next). Now try to pick up one penny with your anal sphincter, the one that you would pucker if you had to pass gas in a room with just you and me and I know it was not me. It's important that you do not push the pelvic floor toward the actual floor – so never push out and down, even when performing a bowel movement. Remember, gravity is trying to pull everything down and out of you, and you would like to keep things up and in. You also want to act like no one can tell that you are actually doing this, so if you are contracting your glutes and are moving up and down – that is not a Kegel. Also, if you are holding your breath or contracting your abdomen at all, keep practicing. Just your sphincter should be contracting. Do this a few times to get the hang of it.

FAST KEGELS - Now, the pelvic floor is made up of slow twitch fibers (think long distance running) AND fast twitch fibers (think Usain Bolt). To work on those speedy muscles, let's use our penny analogy again (just imaginary pennies, please). Now try to pick up 6-10 pennies one at a time as quickly as possible. It may be hard to do this at first, as those quick fibers may have not been asked to partake in this pelvic floor game lately, but you will get better with practice! If I asked you to sprint across the yard, you may not move as fast as you have in the past, unless you are being chased by a knife wielding cheetah and you happen to be coming home from the meat store. Think of snapping your fingers- work up to doing it this fast. Try ten now.

Now, back to the lecture!

#### VIDEO FOR WHAT SHOULD HAPPEN

The bladder and it's communication with the brain is a very intricate and complex sequence of events. These events typically happen with little or no acknowledgement from us – it happens AUTOMATICALLY. Here is what **SHOULD** happen:

Urination (micturition) involves processes within the urinary tract and the brain. The slight need to urinate is sensed when urine volume reaches about one-half of the bladder's capacity. **The brain suppresses this need until a person initiates urination**.

Once urination has been initiated, the nervous system signals the muscle that surrounds the bladder to contract into a funnel shape and expel urine. Once empty, pressure falls and the bladder relaxes and resumes its normal shape.

- The average bladder can hold up to 2 cups of urine before it needs to be emptied. It is normal to pass urine 5-7 times during a 24 hour period. Eight times is normal as we age, waking once at night.
- Urine should flow easily without discomfort in a good and steady stream until empty.

Now, let's talk about how to handle your specific issue....URGE AND URGE INCONTINENCE!

#### WHAT IS GOING WRONG VIDEO

If you are suffering from URGE or URGE INCONTINENCE, the bladder is an organ that has its own agenda. It is insecure, so to speak, and once it "thinks" it has to go, it sends a five-alarm-fire signal to the brain that it is super full and cannot wait one second longer. We rush as quickly as we can to get to the nearest restroom, trampling over any innocent bystander, even if it is our kids or unsuspecting pet. Often time throughout the years we have employed different tactics, such as URINATING JUST IN CASE, OR BEFORE WE LEAVE ANY AND ALL PLACES. It seems that the faster we run, the stronger the urge symptom becomes.

#### WHAT TO DO?

This may sound crazy, but the secret to controlling urge is to do **THE EXACT OPPOSITE OF WHAT YOU HAVE BEEN DOING!!** 

That's right. The powerful tool you are looking for is to STOP the FIGHT OR FLIGHT RESPONSE that your bladder is demanding. You have formed a strong habit loop that keeps replaying the old tapes which causes your bladder to react in the same way it has been for months, perhaps years. Here is how you break the habit!

#### URGE RELAXATION – THE MAGIC WAND VIDEO

#### URGE RELAXATION TECHNIQUE- THE MAGIC WAND

- When you feel the urge to urinate, sit or stand calmly and perform deep belly breath.
- Perform 6-8 quick flicks with your pelvic floor these are the fastest Kegels you can muster, like snapping your finger fast THAT WE PRACTICED AT THE BEGINNING OF THE CLASS – remember: the muscle that surrounds the bladder is innervated with sensors that cause

contraction. Quick contractions inhibit this signal – like, "Get ahold of yourself, buddy. You can make it!"

- Do another big belly breath. You may have to perform another few sets of quick flicks of your pelvic floor until the urge calms. Remember, at first, you may not be able to perform these fast enough to get your bladder to behave, but keep trying! You will get the hang of this!
- Distraction technique: Think "MY HANDS ARE GETTING WARMER" This slows or stops the "fight or flight" response and calms the bladder.
- Sit quietly until urge calms or disappears slowly walk to the restroom as if you are confident that you will make it. Positive self-talk is helpful also.

Now, I know you have questions and I can sense that one eyebrow is raised on your face...but it is SUCH a powerful technique. I have witnessed many patients who have conquered this habit who have suffered from urge for years! You can, too! Think of your bladder like a puppy that may be almost peeing on your new, white carpet. If you lightly tap his nose with a newspaper, he may not respond. But a quick firm tap will get his attention! (Ok, please don't turn me in to an animal rights group – it's just an analogy).

#### URGE RELAXATION MAGIC WAND AT NIGHT VIDEO

#### IF YOU AWAKEN AT NIGHT FREQUENTLY WITH THE URGE

Please DO keep track of your voiding habits for a three day period (see BLADDER TRACKER KEEPER at the end of this workshop). My recommendation is to track a few days of the week and one weekend, just because our behavior and habits may differ, especially if you are still working. Once you notice your patterns, you can work on a targeted but realistic schedule that is right for you. Please do not ever sit or lie there in urge pain. My hope is that you are able to use the technique above to calm the feeling of having to urinate, and then that feeling goes away for a time. You may even be able to return to sleep without getting up!! This is a powerful habit loop breaker!

Instead of measuring the amount of urine you are voiding each time, you can count your urine stream in seconds to get a good idea of what a full bladder "feels" like for you. I would recommend counting "one one thousand, two one thousand," and so on, during your first void of the day. This typically is when our bladder is the most distended, so you can use that as your guide for both feeling and what a true full bladder feels like (or if you're a beer drinker, how long does that first pee after you "break the seal." My personal best is 26 seconds, but that was after a few). Also, this will help you find the "fake" trips to the restroom, when you felt you had to go

but there was just a three-second trickle.

For nighttime wake ups, track for some nights what these "second" volumes are and when. We can awaken once per night with a fairly full bladder, so find out which voiding time for you is the actual full, true wake up is. Your job is to try to get rid of the other "fakes" (The wake ups that send you to the restroom with just a tiny dribble of urine) using the urge calming technique above. So, for example, if you typically awaken at 11 pm, 1 am and 3 am and you have a 5 seconds stream at the 11 pm and 3 am time slot, but the 1 am time slot you have a 15 second stream, you may want to try to target the 11 pm wake up urge call first. Once that wake up is taken care of, try to eliminate (pun intended) the 3 am one. Waking once as we age is normal, so maybe let your body have the 1 am time slot. Certainly do not lay there in the pain of urgency – just try the technique, wait until you feel the urge calm, and if you must, walk slowly to the restroom. Before you know it, you may be able to fall back asleep in a few days. If you do this enough times, YOUR BLADDER WILL STOP WAKING YOU UP!! I'm not kidding. You will have broken the habit!! Sweet dreams, my beautiful subscribers!!

#### JUST THE TIPS VIDEO ONE AND TWO

#### SOME TIPS BEFORE AND AS YOU TRY THIS

1. I recommend that clients wear some protection, i.e. some form of adult undergarment to help with the confidence factor when starting this technique. If your bladder "knows" it is secure, it will behave better and you will have some time to develop the skill.

2. Please DO try this at home for some time before you try it in the middle of Lowe's (although, yes, if you are heading into the hardware store and are reading this and sprinting to make it to the restroom – TRY IT NOW!!). You should be confident you have some control. Heading out to your induction into your high school hall of fame may not be the time to give this a whirl. Start to tackle that "Garage door Opening" urge moment on a day you don't have a dinner party planned at your home with 18 of your closest guests coming in a half hour. Remember, your central nervous system and brain are supporting actors here. Chilling out is central to your success.

3. Once you are noticing your success, it is important that you do not "mess" with your bladder in other areas. For example, waiting 4-5 hours to use the restroom at work then wondering why your system is cranky is on you. Conversely, using the restroom when you do NOT have to go starts to signal the bladder to contract at a lower and lower volume. Try to drink enough fluids that you are voiding every 2-3 hours or so.

4. Have a little fun with this – some of my clients have had a "Me vs Bladder" win ticker when they first start out. Sometimes they "win" and are able to calm the urge, and sometimes the

bladder wins. You will get better and better at it.

5. Occasionally, the urethra will have a little bit of urine still in the pipe or the bladder feels as if it has not fully emptied. This is called a Post Void Residual and may be complicit in that feeling of urge. My recommendation is to, after your initial voiding, stand up (if you are normally sitting) or sit down (if you normally are standing) to retilt the bladder. Do this a few times and try again (never push out). One could also while standing bend your body at with waist forward and backward a few times. Think of it this way: if a pen had a bubble of water in it, to coax the water out you would gently rock the pen back and forth. This can help the post void to mechanically drip out without straining.

#### TIPS TO MAINTAIN GOOD BLADDER/BOWEL HEALTH VIDEO

#### TIPS TO MAINTAIN GOOD BLADDER/BOWEL HEALTH

**Take your time when emptying your bladder/bowel.** Make sure you empty your bladder completely each time. Do not rush the process!

- **Do not avoid going to the bathroom for long periods of time.** Ignoring the urge for more than 4-5 hours between daytime voids may be convenient but not healthy for your bladder.
- Avoid going "just in case," or more often than every 2 hours. It is usually not necessary to go when you feel the first urge. Try to go only when your bladder is full. Retrain your bladder to perform on a schedule.
- Maintain a good fluid intake. Try to drink 4-8 8oz glasses of water per day unless otherwise advised by your doctor.
- Limit the amount of caffeine, citrus foods and alcohol you consume (see "Common Bladder Irritants" below)

• Avoid constipation. Never strain when defecating. Let things come out naturally. If you try to push everything SOUTH when you are going and the rest of the time you want things to stay NORTH, well, gravity is going to win eventually.

#### COMMON BLADDER IRRITANTS

The things we eat and drink affect our bladder and its "behavior." Common irritants include caffeine, alcohol (sorry), chocolate (sorry again), carbonated beverages, cranberry juice and citrus fruits and juices, tomato products, processed foods, artificial sweeteners and spicy foods. There are also some studies that suggest that quitting smoking, in addition to all the other reasons why one should, stopped stress incontinence symptoms almost entirely.

I usually will not suggest a diet change to my clients (at the risk of being stabbed if I take away their morning coffee) unless we have tried the exercise programs or techniques above and have had limited success. There may be a dietary component that is irritating the bladder in some way, and perhaps trying to eliminate one item from the list would further their success.

#### BLADDER TRACKER KEEPER

Often times, it is helpful for people to track the food or liquids they consume and how often they had an urge or leakage episode. Please click on the BLADDER TRACKER KEEPER below if this sounds like something you would like to log to see how you are doing in the coming weeks. There is a column that is titled "Count your stream in seconds." This is just how it sounds. So, instead of measuring how much you have actually urinated (yuck, right?), you can just start counting "one one thousand, two one thousand, three one thousand," and so on, to see just how many seconds for you is a truly full bladder. If it is just a few seconds, you know your signal from the bladder was a ruse! Please watch the video for complete instructions.

#### BLADDER TRACKER KEEPER

#### BLADDER TRACKER KEEPER VIDEO

#### BLADDER TRACKER KEEPER PDF INSTRUCTIONS

#### GENERAL STRENGTHENING FOR THE PELVIC FLOOR

For an easy strengthening program for your pelvic floor, please see the GENERAL STRENGTHENING FOR THE PELVIC FLOOR video below. For you urge sufferers, please get really good at the technique for calming urge first. Chances are you are strong enough; you just have to get really good at stopping that habit loop!

#### GENERAL STRENGTHENING FOR THE PELVIC FLOOR VIDEO

#### DO THIS SEQUENCE DAILY - IT SHOULD TAKE YOU BETWEEN 7-10 MINUTES!

SITTING ON A BALL OR CHAIR WITH CUSHION, feet in neutral and knees about hip-width apart – try not to hold your breath.

1. Pick up with your anal sphincter 6-10 imaginary pennies one at a time as fast as you can. Try to contract your pelvic floor powerfully and quickly. Now hold your pelvic floor up and in for 10 seconds, rest for 10 seconds.

2. Squeeze your knees together comfortably and perform 6-10 quick flicks. Now hold your pelvic floor up and in for 10 seconds while squeezing your knees together, rest for 10 seconds.

3. Squeeze your knees apart comfortably and perform 6-10 quick flicks. Now hold your pelvic floor up and in for

10 seconds while squeezing your knees together, rest for 10 seconds.

4. Pull your pelvic floor up and in (anal sphincter) AND HOLD while you bounce gently 10 times. Rest for 10 seconds.

Do this sequence, numbers 1-4 above, FIVE TIMES WORKING UP TO TEN times DAILY (you may have to work up to this – do what you can)!

#### VIDEO FOR GENERAL STRENGTHENING LYING DOWN

DO THIS SEQUENCE DAILY - IT SHOULD TAKE YOU BETWEEN 7-10 MINUTES!

LYING DOWN (THIS DOES NOT HAVE TO BE DONE ON THE FLOOR – YOUR BED IS FINE) WITH YOUR HIPS RAISED ABOVE YOUR CHEST WITH PILLOWS OR A WEDGE, feet in neutral and knees about hip-width apart – try not to hold your breath.

1. Pick up with your anal sphincter 6-10 imaginary pennies one at a time as fast as you can. Try to contract your pelvic floor powerfully and quickly. Now hold your pelvic floor up and in for 10 seconds, rest for 10 seconds.

2. Squeeze your knees together comfortably and perform 6-10 quick flicks. Now hold your pelvic floor up and in for 10 seconds while squeezing your knees together, rest for 10 seconds.

3. Squeeze your knees apart comfortably and perform 6-10 quick flicks. Now hold your pelvic floor up and in for 10 seconds while squeezing your knees together, rest for 10 seconds.

Do this sequence, numbers 1-3 above, FIVE TIMES WORKING UP TO TEN times DAILY (you may have to work up to this – do what you can)!

I hope that this workshop has been helpful to you. Of course, visiting a qualified physical therapist who can guide you through your journey face to face is best. In my practice, I would place you on a biofeedback machine during your second visit to give you a visual on where your pelvic floor is, how strong or weak it may be and how to perform that powerful Kegel. A typical patient may find success after the first week or it may take three months. If you are still struggling with these concepts or develop pain or an adverse reaction to the exercises STOP IMMEDIATELY and please seek professional guidance.

Thank you so much for listening! I hope you are excited to begin your journey to PERFECT PELVIC FLOOR HEALTH!

Annette Kornasiewicz, PT, MDT