

Pelvic Floor Dialogues

So I pee a little
when I laugh. That's
normal right?

How has my body
changed "down there"
since I had my baby?

Everyone talks about
Kegels. Do they really work?
How much is enough?

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PFD Awareness

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Bladder Health Week—November 9-13



Go ahead, do it. Do it now. Register today for a "Break Free from PFDs" event! Together with AUGS, the PFD Alliance and national health institutions, local hosts are offering special educational events across the country during Bladder Health Week, November 9-13, 2015.

Register today!

- Find a 2015 Bladder Health Week event in your area on www.voicesforpfd.org/bladderhealthweek
- Learn about prolapse, the dropping of the pelvic organs caused by the loss of normal support of the vagina.
- Gather info on incontinence, the unintentional leakage of urine or feces.
- Up your know-how on pelvic floor disorders, a group of conditions that affect the pelvic floor.
- Build confidence about discussing pelvic health issues with your doctor.

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Advancing Female Pelvic Medicine and Reconstructive Surgery

Voices for PFD

Check out these helpful resources available online at www.voicesforpfd.org:

- Watch—the 2014 Bladder Health Week webinar with Drs. Amy Park and Cheryl Iglesia.
- Download—a factsheet providing an overview of pelvic floor disorders.
- Read—five tips to start a conversation and Break Free From PFDs!

PFD Risk Factors Quiz—True or False

How aware are you about your risk for pelvic floor disorders? Test your knowledge about lifestyle choices that may reduce your risk.

Smoking increases your risk for pelvic floor disorders	Losing weight may help control urinary incontinence	Couch potatoes are at greater risk for incontinence	High-impact sports reduce your risk for incontinence	Keeping diabetes in control helps to reduce risk for UI
<p>True. Research links cigarette smoking with UI. Plus, the greater the number of cigarettes smoked, the higher your risk.</p> <p>_____</p> <p>If you smoke, quit: smokefree.gov.</p>	<p>True. Being overweight puts added pressure on your pelvic organs. By losing as little as 5 to 10 pounds, you can help combat PFDs, such as UI.</p> <p>_____</p> <p>Find a nutritionist: www.eatright.org.</p>	<p>True. Research shows that ongoing, moderate levels of activity may help to reduce the number of episodes of UI.</p> <p>_____</p> <p>Get moving: www.letsmove.gov.</p>	<p>False. High-impact activities, such as jump-roping and intensive weight training, may strain the pelvic floor and increase your risk for PFDs.</p> <p>_____</p> <p>Exercise safely: www.helpguide.org.</p>	<p>True. For women with diabetes, uncontrolled blood glucose levels can increase their risk for urinary incontinence.</p> <p>_____</p> <p>Learn more: www.diabetes.org.</p>

Do Nuns Get UI, Too?

For many women, childbirth prompts the onset of urinary incontinence. So, what about women who do not have kids? Are they at a lower risk for developing UI? To answer that question, a group of researchers from the University of Rochester looked at the medical histories of 149 nuns. The average age of these sisters was 68 years. Nearly all of them were postmenopausal.

Indeed, many of the nuns had UI:

- **33%** had stress urinary incontinence (SUI), leakage of urine with physical activity or motions such as laughing, coughing, lifting, or with exercise.
- **24%** had urinary urge incontinence (UUI), leakage of urine accompanied by a sudden sense of needing to get to the bathroom to urinate.
- **5%** had mixed urinary incontinence (MUI), a condition where both stress and urge urinary incontinence exist.

Thus, even though they did not experience childbirth, this group of celibate women also struggled with UI. In fact, the number with incontinence was similar to a group of their peers who had given birth!

What's Your Incontinence Nutrition Knowledge?

In four separate studies, researchers in the US and United Kingdom asked women about foods and beverages that appear to trigger urinary incontinence symptoms. Here's what women on both sides of the Atlantic said!

POTENTIAL TRIGGER FOOD OR DRINK	
Stress Urinary Incontinence (SUI)	<ul style="list-style-type: none"> • CARBONATED DRINKS • CAFFEINE (TEA AND SODA) • HIGH INTAKES OF SATURATED FATS
Urge Urinary Incontinence (UUI) a.k.a. Overactive Bladder (OAB)	<ul style="list-style-type: none"> • ALCOHOL • CAFFEINE (COFFEE, TEA, COLA) • VITAMIN C SUPPLEMENTS (IF EATING LOTS OF FOODS HIGH IN VITAMIN C) • CALCIUM SUPPLEMENTS (IF EATING LOTS OF FOODS HIGH IN CALCIUM) • EXCESSIVE FLUID INTAKE
Nocturia (waking up twice or more at night to pee)	<ul style="list-style-type: none"> • ALCOHOL • CAFFEINE • NIGHT TIME FLUIDS, ESPECIALLY IF YOU ALSO HAVE SEVERE UUI • HIGH PROTEIN DIETS

The research on diet and UI is very limited. There is still much research needed in this field. At this time, we do not have strong evidence on the relationship between foods and drinks and UI symptoms. So, yes, here's our disclaimer: Exactly which foods or beverages and how much of these items may affect UI symptoms, may vary from woman to woman.

FDA Approves New Non-prescription Device to Help Ease UI

It's a tampon. It's a pessary. It's an Impressa! The FDA recently approved a new device to help women control UI symptoms. Like a tampon, a woman inserts the Impressa into her vagina with an applicator and it has a string for easy removal. And, like a pessary, the Impressa supports the bladder and applies pressure on the urethra. The Impressa is a disposable device worn for up to eight hours. It has a flexible core with support poles and a sling.

Constipation—When You May Need More than Fiber and Fluids Approves New Non-prescription Device to Help Ease UI

Increase fluids and fiber. That's what you need to do to relieve constipation, difficulty passing bowel movements or the need to strain for bowel movements—right? Actually, for women with PFDs, these strategies may be helpful, but may not be enough.

Women who take pain medicines, such as opioids, and have a PFD and irregularity, may need constipation medicines, too. Plus, some women have a type of constipation called a motility problem. They may also need medicine to promote regularity. Laxatives are the drugs used for constipation. Your doctor may prescribe a laxative or suggest buying a product at a local drug store.

And, don't be surprised if your doctor recommends you see a physical therapist (PT). If you have abnormal pelvic floor tone, physical therapy can be helpful. PTs use pelvic floor massage techniques to improve the tone. This can also relieve constipation.

The Rest of the Story

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