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patient.information@addenbrookes.nhs.uk



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For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169

Addenbrooke's Hospital Outpatient Physiotherapy

Patient Information

Advice for male patients with pelvic floor dysfunction

Document history

Authors	Outpatient Physiotherapy
Department	Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number	01223 216633
Publish/Review date	November 2011/November 2014
File name	Advice_for_male_patients_with_pelvic_floor_dysfunction
Version number/Ref	1/PIN2840

Introduction

Many men of all ages find that they develop bladder problems. A common complaint is the need to pass urine frequently and without much warning, sometimes a leakage of urine will occur. There are many reasons for this happening and occasionally no cause will actually be found.

Stress incontinence is the involuntary loss of urine during activity, coughing or sneezing.

What is normal?

The kidneys are continuously filtering blood to produce urine, which is stored in the bladder. The bladder will hold approximately 400-500mls of urine, an urge to pass urine is often felt when the bladder is half full in order to give us time to reach the toilet. For various reasons this message or urge may become blurred and your bladder will contract wanting to empty without warning, leaving little or no time to reach the toilet as the urge is over whelming.

Privacy and dignity

We are committed to treating all patients with privacy and dignity in a safe, clean and comfortable environment. This means that you will be treated in a private room and offered a chaperone.

Further advice

Please be aware that this handout is to be used as a guide. If you are suffering high levels of pain please seek advice from your pharmacist or GP.

Contacts

Please contact our reception on 01223 216633 to leave a message for your physiotherapist or enquire about an appointment.

This information has been compiled by the physiotherapy team at Addenbrooke's Hospital. You may receive this information during an appointment with a physiotherapist, from your GP or via our website at www.cuh.org.uk/outpatient-physio

How do we work the pelvic floor muscles?

You need to be able to contract these muscles quickly, to prevent sudden leakage on coughing, sneezing and lifting and slowly to build endurance.

A pelvic floor contraction is performed by closing and drawing up your front and back passages. Start by tightening around the back passage as if you are stopping yourself from passing wind, then at the same time draw your hammock muscles up and imagine that you are trying to stop yourself from passing urine.

The feeling is one of 'squeeze and lift', along with an upward movement of the scrotum. Avoid clenching your buttock muscles or excessively pulling in your tummy, squeezing your legs together or holding your breath.

You can do this in lying, sitting or standing. It is important to relax the muscles fully after a contraction.

Endurance contractions

Perform a pelvic floor contraction at about half of your maximum squeeze. Try and hold this on for 3 seconds whilst continuing to breath. Aim to increase the number of seconds you hold for up to 10 seconds and repeat the exercise up to a maximum of 10 times.

Quick contractions

Contract your pelvic floor muscles firmly and then let go completely. Rest a second and then repeat. Aim to do 10 in a row. Do not hold your breath.

Repeat the quick and endurance contractions a minimum of three time a day.

What can I do to help reduce frequency and urge incontinence?

Techniques to help control your bladder

- Contract your pelvic floor muscles to help calm your bladder when the feeling of urgency develops. Pelvic floor exercises are explained later in the leaflet.
- Stop. Do not hurry. Rushing to the toilet will aggravate your ability to hold on.
- Sit on a firm surface.
- Go up and down on your toes.
- Concentrate on something different, such as counting backwards or recite a poem.

Bladder retraining

You retrain your bladder to hold a greater quantity of urine. This should result in decreasing the frequency of urination.

- Try and avoid 'just in case' visits to the toilet.
- Empty your bladder every three to four hours. If you are emptying your bladder more frequently then you need to use the techniques outlined above, to try and 'hold on' a little longer. Gradually increasing the time between visits.
- Do not 'hold on' for longer than four hours as this can lead to the bladder not emptying properly in the long term.

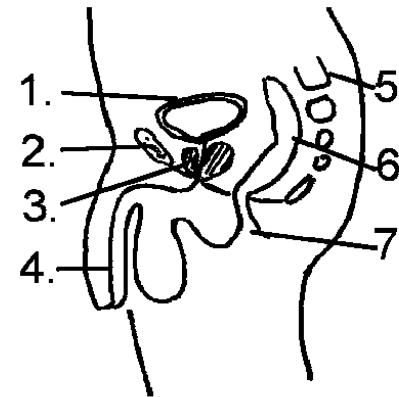
Fluid management

- A fluid intake of 1.5 – 2 litres a day is recommended to maintain tissue health and to keep your kidneys filtering. This is approximately 8-10 mugs.
- Ideally urine should be light straw coloured, very strong dark urine may mean it is too concentrated and you should drink more. Alternatively, if your urine is pale with no smell then you may be drinking too much. During hot weather, air travel, exercise and sickness you will need to drink more.
- If you are tempted to cut down on your fluids to reduce frequency then your urine will become more concentrated which will also irritate the bladder. You will also be more prone to urinary tract infections and constipation, both of which may exacerbate your symptoms.
- Caffeine may be an irritant to your bladder and increase your frequency of visits to the toilet. It is recommended to gradually reduce your caffeine intake. Caffeine is found in tea, coffee, Ovaltine, high energy drinks, Lucozade, Coco Cola and cocoa. Substitute these drinks with water, squash or decaffeinated drinks.
- Large volumes of drink at one time and fizzy drinks may cause frequency and urgency. Drinks should be paced throughout the day.
- If you need to get up at night to go to the toilet then try and avoid drinking after about 20:30.

Treatment for stress incontinence

Pelvic floor exercises

The pelvic floor muscles help to support the bladder and good pelvic floor function will help to promote normal bladder function. Exercising your pelvic floor muscles may help to reduce your symptoms.



Male Pelvic Organs

1. Bladder
2. Pubic Bone
3. Prostate
4. Bladder Outlet
5. Spine
6. Bowel
7. Anus

The pelvic floor muscles form a hammock underneath the pelvis providing support and control for the bladder and bowel.

Drug management for problems with frequency and urgency

A number of medications can be prescribed by your doctor to help control an over-active bladder. These should only be tried having failed conservative bladder management. The drugs are called anti-cholinergics or anti-muscurinics. They do have some side effects including a dry mouth, headaches and some visual problems. Sucking a sweet may help the dry mouth.

Taking a prescribed anti-diuretic or water tablet will cause you to go to the toilet more frequently than normal for a few hours after you have taken it. If this is causing problems then please consult your GP who may be able to review the dose or suggest an alternative medication.

A number of drugs and remedies may contribute to bladder symptoms. Please seek advice from your GP or pharmacist.

Treatment

You will be assessed by a specialist physiotherapist. You may have a pelvic floor examination on assessment in order to find out how well your pelvic floor muscles are working. A specific exercise programme will be prescribed to suit your needs. This may involve a rectal examination.

Possible irritants on the bladder

- Caffeinated drinks
- Fizzy drinks
- Grapefruit juice
- Alcohol
- Stronger brands of tea contain more caffeine and tannins
- Spicy foods
- Tomatoes

N.B. Cranberry juice should be limited to two glasses a day.

Bad habits

- Going to the toilet 'just in case'.
- Straining to empty your bladder.

Good tips

- Give your bladder time to empty properly. Make sure you have fully emptied by leaning forwards towards the end of emptying. Then wait a few seconds and try again. Finish by doing a strong active pelvic floor contraction to avoid a post void dribble.
- Avoid drinking directly before bed time if you normally have to get up to empty your bladder in the night. If you are thirsty in the night then have a few sips of water.