

Frequently Asked Questions - FAQ's

Here is a list of some of the questions we find many sufferers regularly ask.

Question:

I am a young Mum and embarrassed that when I have joined my children playing on their trampoline I have wet my pants. It has also happened when I have been running. What can I do?

Answer:

A common cause of leakage on exercise is pelvic floor muscle weakness and effective pelvic floor exercises should help. Some women need expert advice to be able to manage an individual programme and to be helped to identify the pelvic floor muscles.

Question:

I am a middle-aged man. When I go to the toilet, think that I've finished and have pulled up my trousers, I have a further dribble: wetting my clothes. What can I do?

Answer:

This usually means the urethra (bladder tube) is not being emptied completely. "Milking" the urethra may help the problem. Wait a few seconds after emptying the bladder then with the fingertips of one hand behind the scrotum, apply gentle upward pressure. Keep the pressure on and move toward the penis. This milks the urine forward in the urethra where it can be emptied by gentle shaking in the usual way.

Question:

I am a retired gentleman and have difficulty in starting to pass urine. Sometimes I feel I want to go - more frequently at night - but then cannot commence. What can I do about it?

Answer:

Have a chat with your family doctor. The prostate gland undergoes changes with age. In some men these changes may be associated with urinary symptoms such as a slow and/or interrupted stream, difficulty starting to pass urine, increased need to pass urine more frequently, a feeling of incomplete emptying and, in some cases, loss of urine control - that is incontinence.

Question:

I am a retired lady and experience dryness and irritation which makes sexual activity uncomfortable. What can I do about it?

Answer:

Often after menopause, because of a decrease in the level of oestrogen, the urethra and the vagina can become atrophic (dry) and irritable. This can be helped by applying oestrogen cream in small amounts around the affected area.

Question:

Is stress incontinence related to anxiety?

Answer:

No it is caused by physical stress such as coughing, sneezing, lifting, running etc. It has nothing to do with mental stress. If the pressure rise inside your abdomen which occurs with these activities is greater than the pressure keeping your bladder outlet closed, leakage occurs.

Question:

Can I do anything to improve? I feel I am becoming a hermit. I can't go out anywhere new as I need to know where the nearest public toilets are. As soon as I have the urge to go to the toilet, I must go and find a toilet immediately and it seems so frequent and urgent I often go to the toilet just in case I wet myself.

Answer:

It sounds as though your bladder is the boss of you when it should be the other way round! A bladder training programme may well help so that, with time, you can choose when and where to go to the toilet and be able hold on longer and feel safe to do so. It will take time, but you need to stop going "just in case" and try to become the boss again.

Question:

When I laugh, cough or sneeze, and sometimes when I bend to pull a weed in the garden, I wet my pants. Why?

Answer:

This is known as stress Incontinence. Pelvic floor muscle strengthening is usually the first line of treatment.. If done regularly and correctly over several months, they can help significantly. Some people need expert advice to do these exercises effectively. Both men and women can suffer from stress incontinence although it is more common in women.

Question:

I've done pelvic floor exercises on and off for years and they've never helped me?

Answer:

It may be that your problem will not be fixed through pelvic floor exercises, but it is also possible that you are not doing them correctly. To be sure that you are exercising correctly contact a Continence Physiotherapist or Continence nurse who will design an exercise programme for you.

Question:

How quickly should I see an improvement when I start exercising?

Answer:

You may notice an improvement within the first 2 weeks as your coordination improves. To actually strengthen muscles can take several weeks to several months.

Question:

Could my being overweight make my bladder control worse?

Answer:

Yes if you are very overweight this may be a contributing factor, but being moderately over weight has not been proven to be a contributing cause.

Question:

I sometimes notice that when I drink a lot of coffee and tea my bladder urgency is worse, why is this?

Answer:

Yes the caffeine in tea and coffee can be a bladder irritant and make urgency worse. You should drink plenty of water between 1500 and 2000mls per day. It is O.K to drink decaffeinated coffee and herbal teas.

Question:

Do I have to get on the floor to do my pelvic floor muscle exercises?

Answer:

No, they can be practised any position you like - standing, sitting, kneeling, lying, etc.

Question:

I get up to the toilet four times through the night. What can I do about it?

Answer:

As adults with a good healthy bladder, we usually go to the toilet 4-6 times during the day and maybe once at night. Older people may get up more often. If you don't have a urinary tract infection and there is no medical cause for this increased frequency, you may have an unstable or overactive bladder and need to become the "boss" of it again. Don't be controlled by your bladder. If the urge sensation is not strong, then ignore the desire to get up and try to go back to sleep. If you are consistent over time you may well beat the habit.

Question:

When I wake up during the night I automatically get up and go to the toilet, even though I don't really feel the need to. Is this o.k.?

Answer:

It is not good practice to get up and go to the toilet if you don't have a sensation of needing to go. By getting up and going, you are training your bladder to hold smaller volumes. This could lead to problems of "learned" frequency. Try to turn over and go to sleep and not give in to unnecessary trips to the toilet.

Question:

What is a Bladder Training Programme?

Answer:

Bladder training gradually increases the bladder's ability to hold more urine comfortably. It is an individual programme to achieve a normal bladder voiding pattern, and to learn to suppress the desire to pass urine when the bladder is giving strong messages to empty. Results are gradual and may take three months or more to achieve better bladder control. The aim of bladder training is to decrease the number of times you go to the toilet each day and to increase the amount your bladder can hold.

Question:

To prevent going to the toilet so frequently I always restrict my fluid drinks especially before I go out. Is this okay?

Answer:

You should not restrict your fluid intake as this results in the kidneys producing concentrated urine. It can be an irritant to your bladder and you may need to go to the toilet more frequently. Restricting fluid may also result in constipation which can also contribute to bladder problems.

Question:

I have heard you should drink 6-8 cups of fluid a day. Does it matter what type of fluid I drink?

Answer:

6-8 cups of fluid is recommended as an adequate fluid intake. Naturally water is best, but other kinds may be included. Some people find that drinks that contain caffeine (e.g. coffee, coke, cola and some other fizzy drinks, cocoa and tea) are kidney stimulants and a bladder irritant. Alcohol makes the kidneys produce more urine and tends to dehydrate the body. All of these are best in moderation.

Question:

I think I am far too old for exercises to work for me?

Answer:

Pelvic floor exercises can be very beneficial for elderly people. As long as you are well motivated and can perform the exercises correctly your coordination and strength can improve.

Question:

I'm scared if I go to my doctor with my incontinence problem he/she will say I have to have surgery.

Answer:

There are many treatment options that do not include surgery, for example exercise, medication, and bladder retraining. Your Dr can explain to you the pros and cons of these choices.

If surgery is an option for you, discuss all your concerns with your specialist. Together with them you can decide if surgery is a treatment pathway you wish to take.

Question:

If my doctor gives me medication to try to help calm my bladder so I don't go to the toilet so frequently, are there any side effects?

Answer:

The drug most commonly prescribed for this is called Oxybutinin (or Ditropan which is a trade name) which will cause dryness of the mouth and may also cause indigestion, constipation and dizziness in older people when standing up from a seated or lying down position. It is a medication which works well for some people but should be carefully monitored by your doctor.

Question:

Will my stress incontinence get better if I keep doing pelvic floor exercises?

Answer:

Providing the exercises are being performed effectively, and there is no other cause of your leakage there is an excellent chance your stress incontinence will be significantly improved or cured. If you are unsure if you are doing the exercises correctly or make no improvement in eight to twelve weeks of regular exercise you are advised to seek professional help from a physiotherapist (with a special interest in incontinence) or continence advisor.

Question:

At what age should my child be dry at night?

Answer:

There is a large variation in the way children develop. Just as some children walk or talk earlier than others, there is an age range in becoming dry at night. Most children achieve day and night dryness by 5 years of age, usually being dry by day first.

Question:

My sixty year old mother is very reluctant to go anywhere that is strange to her in case she is unable to find the toilet quickly. She has been like this for a while but lately it has got worse, and she has even had a mishap. How can we help her?

Answer:

There could be a variety of causes for this situation. She should be encouraged to see a doctor, continence advisor or specialist continence physiotherapist who can assess her problem and advise her on appropriate measures to help. She should be reassured that this is a very common problem, not a normal part of ageing and that her quality of life can be significantly improved by seeking appropriate help.

The more we know about the things that afflict us, the more empowered we are to deal with them in a positive manner. Ignorance in relation to sickness that affects us, or our family, is as frustrating as it is detrimental to our recovery. Above all else, remember you don't stand alone with your problem. There are tens of thousands of continence sufferers in New Zealand alone many believing wrongly that nothing can be done! There are also many who are here to help you with your recovery.

Seek help now, and get more out of life!