



**Medical Conditions
Patient Information Leaflets (PILS)
Pelvic Floor Exercises**

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Pelvic Floor Exercises

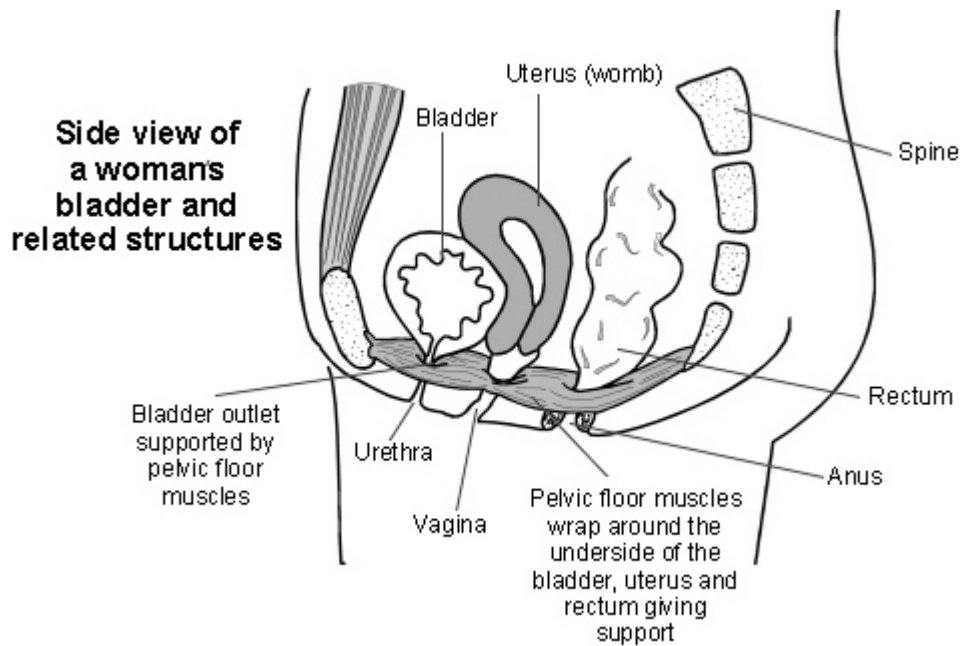
If you develop stress incontinence, there is a good chance that it can be cured with pelvic floor exercises. Pelvic floor exercises are also useful to prevent incontinence, particularly for women who have had children.

What are the pelvic floor muscles?

The pelvic floor muscles are a group of muscles that wrap around the underside of the bladder and rectum. Your doctor may advise that you strengthen your pelvic floor muscles:

- **If you develop stress incontinence.** Stress incontinence is when urine leaks when there is a sudden extra pressure ('stress') on the bladder. Urine tends to leak most when you cough, laugh, or when you exercise (like jump or run). Strengthening the pelvic floor muscles can often cure stress incontinence.
- **After childbirth.** The common reason for the pelvic floor muscles to become weakened is childbirth. If you do pelvic floor muscle exercises after childbirth, it may prevent stress incontinence developing later in life.

In addition, some people feel that having strong pelvic floor muscles heightens the pleasure when having sex.



Pelvic floor exercises to treat stress incontinence

It is important that you exercise the correct muscles. Your doctor may refer you to a continence advisor or physiotherapist for advice on the exercises. The sort of exercises are as follows:

Learning to exercise the right muscles:

1. Sit in a chair with your knees slightly apart. Imagine you are trying to stop wind escaping from your anus (back passage). You will have to squeeze the muscle just above the entrance to the anus. You should feel some movement in the muscle. Don't move your buttocks or legs.
2. Now imagine you are passing urine and are trying to stop the stream. You will find yourself using slightly different parts of the pelvic floor muscles to the first exercise (ones nearer the front). These are the ones to strengthen. If you are not sure that you are exercising the right muscles, put a couple of fingers into your vagina. You should feel a gentle squeeze when doing the exercise.

Doing the exercises:

1. You need to do the exercises every day.
2. Sit, stand or lie with your knees slightly apart. Slowly tighten your pelvic floor muscles under the bladder as hard as you can. Hold to the count of five, then relax. Repeat at least five times. These are called slow pull-ups.
3. Then do the same exercise quickly for a second or two. Repeat at least five times. These are called fast pull-ups.
4. Keep repeating the five slow pull-ups and the five fast pull-ups for five minutes.
5. Aim to do the above exercises for about five minutes at least three times a day, and preferably 6-10 times a day.
6. Ideally, do each five-minute bout of exercise in different positions. That is,

sometimes when sitting, sometimes when standing, and sometimes when lying down.

7. As the muscles become stronger, increase the length of time you hold each slow pull-up. You are doing well if you can hold each slow pull-up for a count of 10 (about 10 seconds).
8. Do not squeeze other muscles at the same time as you squeeze your pelvic floor muscles. For example, do not use any muscles in your back, thighs, or buttocks.
9. In addition to the times you set aside to do the exercises, try to get into the habit of doing exercises whilst going about everyday life. For example, when answering the phone, when washing up, etc.
10. After several weeks the muscles will start to feel stronger. You may find you can squeeze the pelvic floor muscles for much longer without the muscles feeling tired.

It takes time, effort and practice to become good at these exercises. It is advised that you do these exercises for at least three months to start with. You should start to see benefits after a few weeks. However, it often takes 8-20 weeks for most improvement to occur. After this time you may be cured from stress incontinence. If you are not sure that you are doing the correct exercises, ask a doctor, physiotherapist or continence advisor for advice.

If possible, continue exercising as a part of everyday life for the rest of your life to stop the problem recurring. Once incontinence has gone, you may only need to do 1-2 five-minute bouts of exercise each day to keep the pelvic floor muscles strong and toned up, and incontinence away.

Other ways of exercising pelvic floor muscles

Sometimes a continence advisor or physiotherapist will advise extra methods if you are having problems or need some extra help performing the pelvic floor exercises. These are in addition to the above exercises. For example:

- **Electrical stimulation.** Sometimes a special electrical device is used to stimulate the pelvic floor muscles with the aim of making them contract and become stronger.
- **Biofeedback.** This is a technique to help you make sure that you exercise the correct muscles. For this, a physiotherapist or continence advisor inserts a small device into your vagina when you are doing the exercises. When you squeeze the right muscles, the device makes a noise (or some other signal such as a display on a computer screen) to let you know that you are squeezing the correct muscles.
- **Vaginal cones.** These are small plastic cones that you put inside your vagina for about 15 minutes, twice a day. The cones come in a set of different weights. At first, the lightest cone is used. You need to use your pelvic floor muscles to hold the cone in place. So, it helps you to exercise your pelvic floor muscles. Once you can hold on to the lightest one comfortably, you move up to the next weight, and so on.
- **Other devices.** There are various other devices that are sold to help with pelvic floor exercises. Basically, they all rely on placing the device inside

the vagina with the aim of helping the pelvic muscles to exercise and squeeze. There is little research evidence to show how well these devices work. It is best to get the advice from a continence advisor or physiotherapist before using any. One general point is that if you use one, it should be in addition to, not instead of, the standard pelvic floor exercises described above.

Pelvic floor exercises if you do not have incontinence

The type of exercises are exactly the same as above. If you are not used to pelvic floor exercises then perhaps do the exercises as often as described above for the first three months or so. This will strengthen up the pelvic floor muscles. Thereafter, a five-minute spell of exercises once or twice a day should keep the muscles strong and toned up which may help to prevent incontinence from developing in later life.

Further help and information

The Bladder and Bowel Foundation

SATRA Innovation Park, Rockingham Road, Kettering, Northants, NN16 9JH
Nurse helpline: 0845 345 0165 Counsellor helpline: 0870 770 3246
General enquiries: 01536 533255 Web: www.bladderandbowelfoundation.org

Association of of Chartered Physiotherapists in Women's Health

Web: www.acpwh.org.uk

If you are thinking of seeing a physiotherapist privately for incontinence then members of this Association may be of particular help. Their website enables you to find a member of the Association nearest to where you live and gives some general information about issues such as incontinence and pelvic floor exercises.

References

- [Urinary incontinence: the management of urinary incontinence in women](#), NICE (2006)
- [Dumoulin C, Hay-Smith J](#); Pelvic floor muscle training versus no treatment for urinary incontinence in women. A Cochrane systematic review. *Eur J Phys Rehabil Med.* 2008 Mar; 44(1):47-63. [abstract]
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- [Lagro-Janssen TL, Debruyne FM, Smits AJ, et al](#); Controlled trial of pelvic floor exercises in the treatment of urinary stress incontinence in general practice. *Br J Gen Pract.* 1991 Nov; 41(352):445-9. [abstract]
- [Bo K, Talseth T, Holme I](#); Single blind, randomised controlled trial of pelvic floor exercises, electrical stimulation, vaginal cones, and no treatment in management of genuine stress incontinence in women. *BMJ.* 1999 Feb

20; 318(7182):487-93. [abstract]

- [Shamliyan TA, Kane RL, Wyman J, et al](#); Systematic review: randomized, controlled trials of nonsurgical treatments for urinary incontinence in women. Ann Intern Med. 2008 Mar 18; 148(6):459-73. Epub 2008 Feb 11. [abstract]

Comprehensive patient resources are available at www.patient.co.uk

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