Did you know that 25% of young women, 44-57% of middle aged women and 75% of older women in nursing homes have experienced incontinence?

These numbers are huge and most people think it’s normal. Well I am here to tell you it is NOT. It is common but common is NOT normal.

I’m also here to tell there is something you can do about it!

Let’s talk to about Bladder Health…. What is normal? What bad habits have we developed that are contributing? What can we do about it? How can we stop wetting our pants???

**There are three types of urinary incontinence:**
Stress Incontinence – urine leaking with lifting, laughing, coughing, sneezing or running.

Urge Incontinence – difficulty holding urine, “I need to go and I need to go now”. There are usually triggers, like I have the key in the door and I need to go now, or running water makes you need to urinate.

Mixed Incontinence – mixture of both stress and urge.

**What is the norm for urine output?**

- Urinate 5-8 times per day for about 8-10 seconds
- Urinate 0-1 time after bedtime
- Water intake 50% of your bodyweight in ounces
- 2-4 hours between voiding times
- Bladder can hold around 20 ounces of water

**Bad habits of our bladder:**

- JIC-ing or “just in case” urination
- Hovering/semi squatting on toilet or not sitting on the seat
- Straining
- Doing pelvic floor muscle exercises interrupting my urine stream
- Fear of using public toilet
- Being dehydrated
Dietary things that affect our bladder:

- Caffeine
- Alcohol
- Spicy foods
- Acidic foods like tomato bases
- Chocolate
- Carbonated drinks
- Citrus fruits and juices
- Artificial sweeteners
- Milk

Pharmacological contributors

Things we can do to improve our bladder health:

- Bladder retraining
- Myofascial release
- Barrier methods (pessary)
- Physical therapy
- Surgical options

Pharmacological options

How can we stop wetting our pants?

- Retrain habits to avoid voiding too little or too often
- Don’t go to the bathroom just in case
- Develop health fluid intake habits
- Sip your water throughout the day
- Drink 50% of your body weight in ounces of water
- Bladder diary
- Keep a record of time you use the restroom
- Keep a record of fluid intake
- Voiding interval training
- Keep track of how often you void then increase that time by 5-15 minutes at a time
- Pelvic floor muscle retraining with and without biofeedback
- Kegel training
- Empty bladder completely
• Avoid or reduce bladder irritants
• Reduce intake of alcohol and caffeine

If you or someone you know is having incontinence issues, we can help! Ask your doctor about seeing a pelvic floor therapist.

Dr. Elizabeth McCarthy, PT, DPT
Beth graduated with her doctorate of physical therapy from the University of St. Augustine in 2012. She is working towards her PRPC in women’s health and specializes in orthopedic injuries. She currently works at our Palomar Health Outpatient Rehabilitation facility in San Marcos and teaches biophysical agents, movement science 1 and 2 at the University of St. Augustine. In her free time, she enjoys spending time with her one-year-old son, husband, two dogs and running.