Exercises for bowel incontinence

Colorectal Department and Therapy services

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And Clinical Specialist Physiotherapists May 2011
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You have been referred to either a colorectal nurse specialist or physiotherapist for help with your bowel problem. Both can help in this area and will understand how you are feeling. Discussing your bowel problems can often be embarrassing but you will be put at ease and offered support.

This booklet will provide you with information about bowel incontinence and its treatment with anal sphincter and pelvic floor muscle exercises. Your nurse specialist or physiotherapist will have already discussed with you the issues in this leaflet. If you have problems doing the exercises or if you do not understand any information given ask your nurse specialist or physiotherapist for help.

- Avoid constipation as straining to empty your bowels may make bowel symptoms worse. Maintain a balanced diet and drink eight cups (approximately two litres) of any fluid per day.
- Make getting to the toilet as easy as possible. If you have difficulty getting about, consider special adaptations like a handrail or a raised seat in your toilet. Advice can be gained from your Practice Nurse or GP.
- Smoking and asthma can cause coughing which can aggravate symptoms. Your GP will be able to give advice on your cough and how to stop smoking.

### Individual exercise diary

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- Hold tight for as long as you can, (up to ten seconds).
- Rest for 4 seconds
- Repeat the exercise, up to ten times

**Fast exercise**
- Tighten your pelvic floor muscles as before, as quickly as you can, hold the contraction for one second before relaxing.
- Repeat this exercise up to ten times.
- Use this exercise to tighten your pelvic floor muscles before you cough, sneeze, bend over or exercise to prevent leakage

Repeat both of these exercises four times per day for six months. This will enable your pelvic floor to work more effectively and stronger.

When you are confident that you are doing your pelvic floor exercises correctly you will be able to do them whilst standing, lying or sitting and you can carry out the exercises anytime, anywhere. After six months you can maintain your pelvic floor strength by doing these exercises once a day, for the rest of your life.

**Tips**
- Use ‘triggers’ through the day to remind you to do your exercises, for example when boiling the kettle, or whilst sitting on the bus.
- If you feel the urge to go to the toilet or to pass wind, try to hold on for a few minutes extra. Gradually increase the time until you can hold and not have to rush to the toilet.
- Tighten the pelvic floor muscles during exercising and before you cough, laugh, sneeze or lift anything heavy, to avoid strain.

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**Introduction**

Bowel incontinence is the involuntary loss of flatus (wind), liquid or solid stool. It is usually unpredictable and can be a very isolating and embarrassing problem. The severity of bowel incontinence and how it affects daily life varies from person to person. Many people live with the problem for a long time before they seek help.

Symptoms vary and people may experience one or a combination of problems. Incontinence can occur for several reasons and maybe due to a problem with the muscles, nerves or structure of the bowel. The most common reasons which cause muscles damage or weakness include: childbirth, aging, coughing and constipation. However sometimes there is no obvious reason why you maybe experiencing problems.

**Symptoms of bowel incontinence**
- Needing to go to the toilet urgently or being unaware of passing a stool
- Unable to get to the toilet on time before passing a stool
- Unable to control wind
- Difficulty in passing a stool
- Leakage after passing a stool
- Needing to support the muscles with your hand when passing a stool
- Difficult in wiping the anus clean, often needing to use lots of toilet paper
- Experiencing marking on underwear or pads, which may be worse when exercising or going for a long walk.
- Incontinence of urine

Research suggests that anal sphincter and pelvic floor exercises are an effective treatment for bowel incontinence. They can help strengthen the muscles surrounding the bowel and improve its function. This can help prevent or reduce episodes of incontinence. These exercises are appropriate for all people except women who have had pelvic floor surgery in the past six weeks.
Anal sphincter and pelvic floor muscles
The lower end of the bowel is called the back passage or anus. The anus is surrounded by two muscular rings known as the external and internal sphincter muscles. Lying above these sphincters is the pelvic floor.

The pelvic floor muscles are the firm supportive muscles that stretch from your coccyx bone at the base of your spine to the pubic bone at the front of your pelvis. The pelvic floor muscles are important to help to hold your bladder, womb and bowel in place.

The pelvic floor works with the anal sphincter muscles. When the muscles are well toned the internal sphincter and pelvic floor are automatically gently contracted, closing the anus to prevent leakage. You do not usually have to think about contracting these muscles. They squeeze more firmly when you laugh or cough to avoid leakage. If you experience a loose stool or need to “hang on” you can squeeze your external anal sphincter and if your muscles are strong enough you should be able to wait until you reach a toilet. When you are ready to go to the toilet and are sitting these muscles relax and a stool is passed.

If one or either of these muscles has been damaged or is weak incontinence may occur.

How anal sphincter and pelvic floor muscle exercises help improve bowel weakness
As a result of carrying out specific exercises the external anal sphincter can strengthen and improve the ability to hold on. It can take several months for the muscles to improve your incontinence problem therefore exercising requires your commitment.

How do I do anal sphincter and pelvic floor exercises?
You can choose which position you would like to do your exercises. You can either
- Lie down with your knees bent and feet flat on the bed
- Sit comfortably upright with your feet touching the floor or with your back straight and slightly leaning back or standing up.

It is not always easy to find your pelvic floor muscles. Exercising them should not show at all ‘on the outside’. It is important that you should not pull in your tummy, tighten your buttocks excessively, nor hold your breath.

There are two types of pelvic floor exercises, slow (endurance) and fast.

Slow exercise
- Tighten and pull up the muscle firstly around your back passage and secondly towards your front passage. This squeezes the muscle upwards and forwards. Imagine that you are trying to stop yourself from passing wind, and at the same time stopping your flow of urine.