



Urinary Incontinence

– a problem for many



This leaflet gives information on urinary incontinence and the problems arising from the various types of urinary incontinence. It also gives advice on how to relieve the problem by means of incontinence aids and exercises you can do on your own.

What is Urinary Incontinence



The International Continence Society has defined urinary incontinence as: "The complaint of any involuntary leakage of urine."

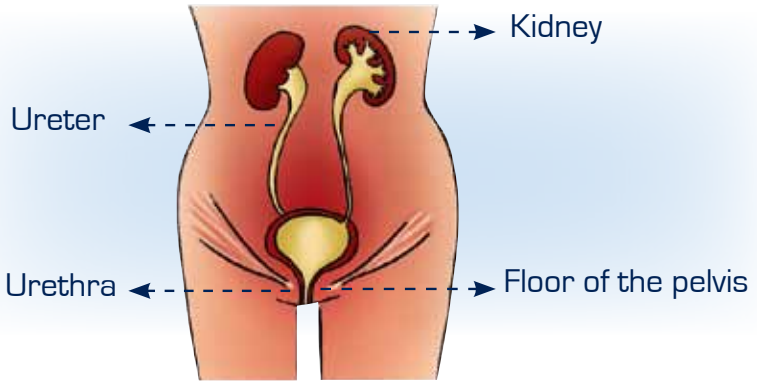
According to official statistics an average of 10% of the population suffers from incontinence. However the true figure is even higher, as urinary incontinence is not openly discussed, and it is therefore difficult to achieve accurate statistics.

Due to a reluctance to discuss their problem, a lot of the people who suffer from incontinence do not know what kind of help is available or where to turn to for help.

Each person experiences incontinence differently. Even slight levels of leakage are embarrassing and can lead to social isolation.

Historically, urinary incontinence has been considered a female problem, but this is only partly true.

Among younger age groups, more women than men are incontinent. 10-15% of women of childbearing age experiences incontinence, whereas the figure is only 5% of men in the same age group. This balances out at around the age of 70, where almost as many men as women suffer from incontinence.



A Little Anatomy

Urinary incontinence problems often arise in the lower urinary system, i. e. in the urinary bladder and/or urethra. An enlarged prostate in men might also be the cause of urinary incontinence.

Two sphincters situated around the urethra help to close it and control urination. Dysfunctioning sphincters might cause urinary incontinence.

The action of the pelvic muscles is very important. They need to contract quickly and support other organs when leakage risks occur, for example, when coughing and sneezing. It is therefore very important to maintain the elasticity and strength of these muscles, for instance by means of pelvic floor exercises as described later in this leaflet.

People suffer from different kinds of incontinence. The most common types are mentioned below.

What is Stress Incontinence ?

Stress incontinence is the most common type of incontinence. It mainly occurs in younger people, especially women. Stress incontinence is defined as the complaint of involuntary leakage on effort or exertion, e.g. sneezing or coughing. The leakage might vary from a few drops to larger amounts, but never a full volume. The cause of such leakage might be slack or weak pelvic muscles, reduced contraction properties of the sphincter around the urethra or hormonal changes. The cause might also be a combination of these.

Treatment Options

There are various treatments of stress incontinence. Bladder training is often one of the first treatments that is offered. Other possibilities are to induce hormones (local oestrogen treatment), electric stimulation and an operation.

Irrespective of the treatment provided, pelvic floor exercises are equally important. It might be necessary to apply smaller incontinence products such as Abri-San 1 or Abri-San 2 during the treatment.

Speak to your trained nurse, Continence Advisor or General Practitioner to learn more.

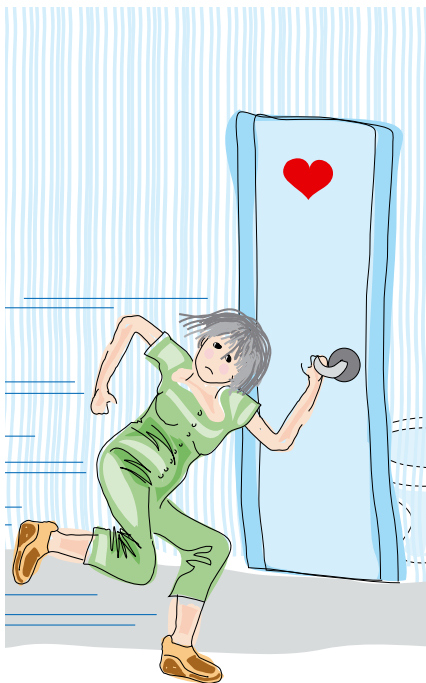
What is Urge Incontinence/ Overactive Bladder



Urge incontinence and overactive bladder mean the same: The bladder is overactive and signals an urge to empty the bladder even though the urine volume it contains is very small. Urge incontinence is defined as the complaint of involuntary leakage accompanied by or immediately preceded by urgency. A person suffering from severe urge incontinence might visit the toilet up to 40 times a day compared to the normal average of 7 visits a day. People suffering from urge incontinence find it hard to tell when the urge occurs and the urination starts. They feel more of a sudden, uncontrolled urination often starting with a strong urge that may be more or less painful.

The leakage might vary from a relatively small quantity of drops to a complete voiding of urine. Nor is it unusual to experience urge without leakage.

There might be several causes of urge incontinence, such as infections, gynaecological problems, and neurological illnesses.



Treatment Options

Urge incontinence can be treated in various ways.

One way of treatment is bladder training, by which you try to increase the bladder capacity. If the bladder can hold more urine, you do not have to visit the toilet so often.

Medicine can also calm bladder overactivity, and this treatment is often combined with bladder training. Other possibilities are to induce hormones (local oestrogen treatment), electric stimulation or acupuncture.

It is normal to use absorbent products during the training period. These products should be tried out individually according to your needs.

Suitable products for urge incontinence include Abri-San, Abri-Form and Abri-Flex.

Always speak to your local nurse, General Practitioner, or Continence Advisor to find the cause and receive the correct treatment.

What is Overflow Incontinence ?



The symptoms related to overflow incontinence are typically continuous loss of urine or urinary leakage connected to movement. It may occur in both men and women.

In men, an enlarged prostate causes the problem. The prostate gland is normally the size of a chestnut and only found in

men. Placed under the bladder around the urethra, the gland grows in size with age in most men. This might involve urination difficulties as the gland blocks the passageway through the urethra.

It is always important to find the cause of urinary incontinence.

50% of all men at the age of 50-60 years develop an enlarged prostate. The percentage is approximately 80% at the age of 80, making an enlarged prostate one of the most common medical disorders in men. An enlarged prostate is normally no serious disorder, although it might cause the following urination problems:

- Problems with starting urination in spite of a strong urge to urinate
- A weak stream, requiring more strength to empty the bladder
- Sensation of the bladder as if it is still not empty
- Frequent urination both in the day and night time
 - often causing sleep disorder
- Dribble after urination



It is always important to find the cause of urination problems. Consult your own General Practitioner.

Urination disorders and difficulties make it harder to empty the bladder properly, so a little urine will remain at the bottom of the bladder after urination.

This residual urine is a fertile environment for bacteria and increases the risk of urinary tract infections.

Treatment Options

An enlarged prostate involves either medical or surgical treatment. Your own General

Practitioner can provide more information. Minor leakage might occur before, during and after the treatment, and the use of smaller incontinence products specially intended for men, such as Abri-Man or Abri-Gentleman, might also be necessary.

What is Mixed Incontinence



Mixed incontinence is a combination of stress and urge incontinence. Leakage occurs in connection with stress and may start with a strong and sudden urge.

Due to its combined characteristics, mixed incontinence can be a bit more difficult to diagnose and treat than other types of incontinence.

Treatment Options

Treatment is based on the individual problems and symptoms found. Start treating one of the incontinence types first. The leakage is often somewhat larger in case of mixed incontinence, so small incontinence products might not suffice: and the use of smaller incontinence products, such as Abri-San, Abri-Form or Abri-Flex.

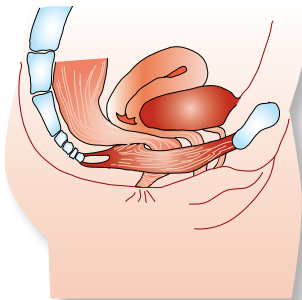
A Little on Pelvic Floor Muscles

This comparatively small group of muscles have a very important bodily function, carrying and supporting the lower abdominal organs. If pressure increases in the abdominal cavity when coughing or sneezing, impulses are sent to the pelvic muscles to contract and shut off the

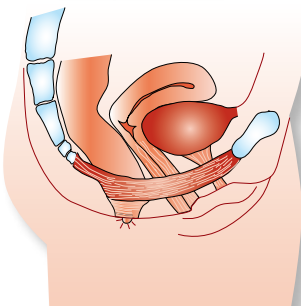
urethra, anus and vagina. Untrained or weak muscles are not able to shut off properly, resulting in leakage. Regular training is therefore the best way to keep the pelvic muscles in shape.

Training designed for stress incontinence should make it easier to react to increased abdominal pressure by “squeezing” to avoid leakage.

Endurance training – the length of the squeeze – helps to restrain the urge to urinate.



Contracted pelvic floor



Relaxed pelvic floor

You are never too old to exercise your pelvic floor muscles!

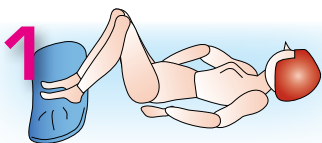
Pelvic Floor Exercises

Firstly it is necessary to find the right “squeeze” muscle. A relaxed position is important: for example, lie on the floor on your back and slightly bend your legs or place a pillow under your legs and feet. Put a hand on your stomach to check that the muscles are relaxed. Start with small, short squeezes to build up the strength of your muscles. Squeeze for 2 seconds and relax for 2 seconds. Repeat 10-15 times. Once you master the squeeze training technique and have found the right squeeze muscle, you can start endurance training. Commitment to training regularly is important. Please be aware that

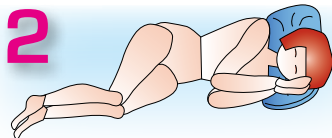
pelvic floor muscles tire easily, so always remember to rest between every long squeeze. Squeeze as hard as you can for about 6-8 seconds and relax between squeezes. Squeeze only for as many times as you have the strength to keep up the squeeze for 5 seconds.

Another squeezing method is to squeeze as hard and as long as you can. The length of these squeezes should vary between 30 seconds and 2 minutes. Quite a number of people can squeeze for even longer.

This is a guidance for the training of the pelvic floor muscles for 6 different exercises.



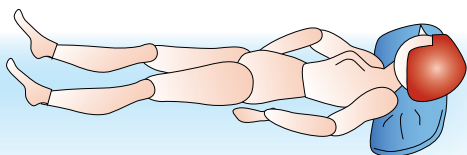
1 Lie on your back with your feet on the floor, and your legs bent and slightly spread apart. Squeeze the pelvic floor slowly and close your rectum as if to prevent air from escaping. Hold the squeeze for 6-8 seconds, relax and rest.



2 Perform the same exercise while lying on your side or flat on your stomach.

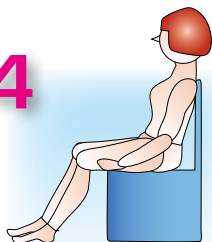
Repeat 10 times, max. 30 times.

3



Lie on your back. At a later stage try other positions too. Squeeze the pelvic floor and close your rectum, do a few long squeezes, preferably 30 seconds or longer, relax and rest for a longer time.

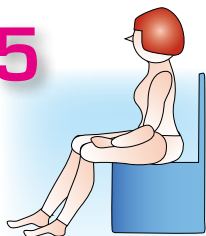
4



Sit on a chair with your legs slightly spread apart. Lean back a little and slightly bend the small of your back. Squeeze your pelvic floor and sense how it closes around the anus. Hold the squeeze for 6-8 seconds, relax and rest.

Repeat 10 times, max. 30 times.

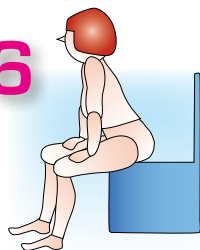
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Sit on a chair with your legs slightly bent and a straight back. Squeeze your pelvic floor and close your rectum. Please note that you can feel the squeeze around the vagina in this position. Hold the squeeze for 6-8 seconds, relax, and rest.

Repeat 10 times, max. 30 times.

6



Sit on a chair with slightly spread legs. Lean forward on the chair. Squeeze your pelvic floor and close your rectum. In this position, you can feel the squeeze around the urethra. Hold the squeeze for 6-8 seconds, relax, and rest.

Repeat 10 times, max. 30 times.

How do I know if I am doing it correctly ?



You can feel whether you are using the correct muscle by stopping your urine stream during a visit to the toilet. Only do this for a very short time and never train this way, as you are cheating the reflex that empties the bladder, so it might get difficult to empty the bladder totally.

Women can insert a finger into the vagina and in this way find out if they are squeezing correctly; in fact, this is how the Contenance Advisor controls how well women squeeze.

In the case of urge incontinence, it is important to increase bladder capacity. If you often visit the toilet and empty your bladder, the bladder gets smaller and loses a lot of its elasticity. Targeted training means that your bladder will contain the normal quantity of urine again. The aim is to prolong the interval between toilet visits.

Before you start the training for stress incontinence, it is very important that you get an examination and talk to your Contenance Advisor or General Practitioner.



Bladder Training

Bladder training means training yourself not to pass urine as a preventive measure, for example before you go out – always wait until you really have to go. When you feel the urge, sit down for a moment, and the urge might pass and you can wait a little longer.

Do not drink large quantities of fluids late in the evening, and remember that coffee, tea, and beer have a more diuretic effect than other beverages.

Sometimes, bladder training may cause increased leakage when you try to restrain yourself for longer periods. This is quite normal and will improve during the training.

Bladder training takes time and requires patience and commitment! But it works, and might rectify some of the continence problems you experience!

Abena offers a wide range of incontinence products with matching fitting products.

Wide assortment

All Abena incontinence products are specially developed to ensure leakage security, dryness, comfort and discretion to improve quality of life.

Our motto is:

- As small as possible,
- as large as necessary.

Abena offers a comprehensive Product range with various assortments: Abri-San, Abri-Form, Abri-Flex, Abri-Man, Abri-Wing and products for special purposes such as fecal incontinence.

Due to the wide assortment it is possible to cover almost every need.

Some people prefer Abri-San with fitting pants and for other Abri-Flex is a better solution.



Abri-San

For all kind of incontinence



Abri-Form

For moderate to severe incontinence



Abri-Flex

For light to moderate incontinence



Abri-Wing

For moderate to severe incontinence

Fitting – an important part of the security

All Abri-San and Abri-Man products should be worn in combination with special fitting products, such as Abri-Fix.

Compared to ordinary underwear the Abri-Fix products offer a wider crotch area and extra elasticity, in order to support the pad in the best possible way and to offer an optimum leakage security.

All Abri-Fix products are designed to offer the requested security in a secure, discrete and comfortable way.

Abena offers a wide assortment of fitting products and also covers the need for extreme sizes.

The Abri-Fix range is developed in a close cooperation with endusers, care staff and own specialists.



Abri-Fix
Pants Super



Abri-Fix Net



Abri-Fix Leaf



Abri-Fix
Soft Cotton

Continence fluid chart



Instruction:

This Continence fluid chart can be of great help when defining an incontinence problem. Please see Continence fluid chart page 17-19.

Therefore, it is very important to complete the chart very carefully.

It could be an advantage to start with the first urination in the morning.

Please enter in form:

- Quantity of each urination (you could use an measuring cup)
- Volume of the leakage. Enter +/- in the column "Leakage" if there was a leakage
- Activities in connection with a leakage, e.g. coughing, sneezing, washing-up, hand washing, cycling etc.
- Please state under activity, the time you go to bed/rise

■ This form helps documenting a chronic problem in an easy way.

