

# Cystic Fibrosis all about physiotherapy

## Pelvic floor exercises (female)

A guide for strengthening the pelvic floor.

With thanks to Hannah Langman, University Hospital South Manchester, for preparing the information in this document.

<b>Patient name</b>			
<b>DOB</b>		<b>Hospital number</b>	
<b>Physiotherapy recommendations</b>			
<b>This leaflet was issued by:</b> (Physiotherapist name and contact details)		<b>This leaflet was issued on:</b>	

## Urinary incontinence in people with cystic fibrosis

Many people with cystic fibrosis (CF) have episodes of urinary incontinence. This is often exacerbated by periods of repeated coughing. This leaflet explains how urinary incontinence occurs and offers advice on how to minimise your symptoms.

### Pelvic floor problems can include:

- Leaking of urine
- Leaking from bowels
- Difficulty controlling wind
- Urgent and frequent need to pass urine

## What is the pelvic floor?

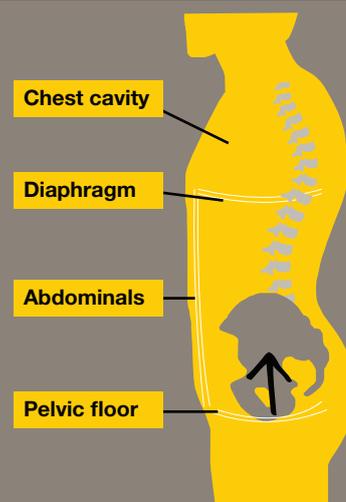
The pelvic floor consists of layers of muscles and tissue, and extends from the tail bone (at the back of the body) to the pubic bone (at the front of the body). The pelvic floor muscles support the womb, bladder and bowel. The urethra, vagina and rectum pass through the pelvic floor.

## What causes pelvic floor weakness in people with cystic fibrosis?

In cystic fibrosis the pelvic floor can become weak as a result of repeated coughing and continual straining to empty bowels when constipated. Other factors that can cause pelvic floor weakness include pregnancy and child birth, obesity, and a lack of general fitness.

## Contracting the pelvic floor muscles

1. Sit or lie in a relaxed and comfortable position.
2. Lift your pelvic floor by tightening the muscles around your back passage. Imagine you are stopping the passage of wind.
3. Lift the pelvic floor muscles upwards and forwards. Imagine you are pulling your tail bone towards your pubic bone.
4. Lift the pelvic floor muscles at the front at the same time. Imagine you are stopping the passage of urine.
5. Try not to squeeze your buttocks or tighten your thighs or stomach.
6. Try not to hold your breath.



## Pelvic floor exercises

- To improve stamina, contract your pelvic floor and hold for as long as you can. Build up to 10 slow contractions, holding each one for between two and ten seconds with four seconds rest in between.
- To improve strength, contract your pelvic floor as hard as you can and hold for one second. Repeat 10 times in succession.
- Aim to do a set of slow contractions followed by a set of quick contractions three to four times a day.
- Do exercises lying, sitting or standing.
- Maintain a good spinal posture (see our 'posture' guide).
- You should continue the exercises two to three times a week to maintain strength.

## Helpful tips

### The 'knack'

- The 'knack' is contracting your pelvic floor muscles to brace before you cough, sneeze, huff or lift anything heavy to help prevent leaking.
- Try to maintain a good spinal posture.
- Try to hold the contraction for the duration of the cough, huff, or lift. This should become a lifelong habit.

### Squeezy

- An app specially designed to help women remember to do their pelvic floor muscle exercises. To find out more visit [www.squeezyapp.co.uk](http://www.squeezyapp.co.uk).

### Bladder management

- Reduce caffeine: eg cola, tea, coffee, alcohol, hot chocolate and some energy drinks.
- If you drink caffeine have half a glass followed by a glass of water.
- Maintain fluid balance by drinking eight glasses of water a day.
- Drink naturally decaffeinated drinks, not artificially decaffeinated drinks.
- Fluid balance is important to avoid constipation. It is important to avoid straining.
- Avoid going to the toilet 'just in case'.

## Help is available

If you have any concerns or questions regarding this information sheet or any other aspects of incontinence, ask your physiotherapist or doctor for help. You may improve with advice and exercise, but a referral to a hospital specialist for investigations or surgery can sometimes be necessary.

**This leaflet should only be used if it has been given to you by your physiotherapist, who will have decided if this is a suitable treatment for you to undertake. Do not use this leaflet without first consulting with your physiotherapist.**

The information on this leaflet is based on clinical best practice and consensus of opinion by physiotherapists within the ACPCF. For a detailed review of the evidence for this technique, please review the 'Standards of Care and Good Clinical Practice for the Physiotherapy Management of Cystic Fibrosis' 2017. Third edition. To view our consensus documents please visit [cysticfibrosis.org.uk/publications](http://cysticfibrosis.org.uk/publications).

The Cystic Fibrosis Trust provides information about cystic fibrosis through our factsheets, leaflets and other publications. Most of our publications can be downloaded from our website or ordered from our helpline.

Our helpline can help you with a range of issues, no matter how big or small. Our trained staff can provide a listening ear, practical advice, welfare/benefits information or direct you to other sources of support. The helpline is open Monday to Friday, 9am–5pm, and can be contacted on 0300 373 1000 or at [helpline@cysticfibrosis.org.uk](mailto:helpline@cysticfibrosis.org.uk).

**For more information about the Association of Chartered Physiotherapists interested in Cystic Fibrosis please contact [ACPCFmembership@gmail.com](mailto:ACPCFmembership@gmail.com).**