

Strengthening the pelvic floor is key

By SARAH GREEN
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IT IS spoken of in hushed tones as one of the prices paid for being a woman.

This 'secret women's business' attitude has led many, and not exclusively women after childbirth or menopause, to readjust their lifestyles.

Frequent trips to the toilet "just in case" are familiar, and sneezing, laughing, lifting and exercise are considered high risk activities.

Physiotherapist Jayne Webb conducts hydrotherapy antenatal classes at the Curzon Medical Centre and said it does not have to be this way.

"It is not normal to have bladder problems and to have to wear a pad in case of any leakage," Jayne said.

"Women should not have to give up sport or activities that they enjoy because they are worried about losing control of their bladder. Trials have shown that up to 80% of women can improve their bladder control by doing the correct pelvic floor exercises."

Jayne said it was a topic that women often found awkward to talk about, but it was imperative to seek help and learn how to do the pelvic floor exercises correctly.

"It's important for woman to recognise that they are not alone. One in three women have some problems after childbirth — and that there is help out there. Just having someone to talk to and to realise that it is treatable is a huge relief."

The pelvic floor muscles play a major role in bladder and bowel control.

They can be weakened by childbirth, being overweight, having a chronic cough, chronic low back pain, constipation, frequent heavy lifting and by the general muscle weakness that comes with age.

Pelvic floor dysfunction is the most common cause of the two types of incontinence.

There is stress incontinence which is when you laugh or cough and urine escapes, while urge incontinence is when you have a sudden need to urinate that cannot wait.

For pelvic physiotherapist Mary O'Dwyer, who is based at the Sunshine Coast, educating women was the driving force behind her book, *My Pelvic Flaw*, which is based on 30 years of clinical and teaching experience. "Today, there is an epidemic of pelvic floor dysfunction that women generally accept as part of being female. Great emphasis is placed on training our bodies, while the pelvic floor is completely ignored," she said.

Women after childbirth, pelvic surgery and around menopause are the majority, but young and child free are also at risk.

Mary said teenage girls can develop problems and up to 52% of elite female athletes have types of incontinence.

"Today, women's worst habit contributing to pelvic floor problems is constantly drawing back the waist to flatten their stomach. Researchers show that narrowing the abdomen at the waist, increases pressure inside the abdomen which in turn puts pressure down on the pelvic floor," Mary said.

The pelvic physiotherapist is now recognised as an expert in this field. She is a physiotherapist, lectures at the Bond University and also conducts seminars to inform women, physiotherapists, medical practitioners and gym trainers about pelvic floor training and risk factors.

Mary's book will show you how to find and control your pelvic floor muscles, regain bladder control, prevent and control vaginal collapse, recover after pelvic surgery and control your stomach muscles after childbirth.

Mary hopes that all women can benefit from her expertise and talk about it to their mothers, daughters, friends, cousins and aunts to help prevent pelvic floor problems throughout life.



▶ A strong pelvic floor may make the difference between being able to do what you want and staying at home.

PICTURE: ADBUILDER

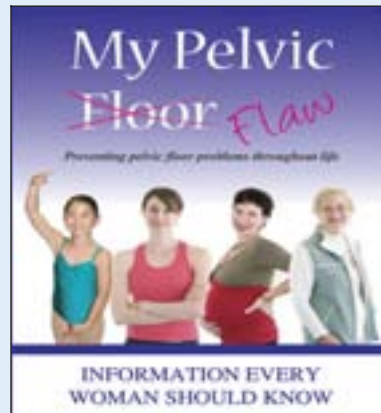
Avoid pelvic flaws through just a little preparation

THE book *My Pelvic Flaw* highlights the following flaws:

● **Lifting heavy objects.** Recent Scandinavian study showed that when compared with the normal population, assistant nurses had a 60% increased risk of developing lumbar disc or vaginal prolapse due to heavy lifting.

● **Thinking that a Caesarean delivery protects a woman from pelvic floor damage.** Studies show that 42% of women who deliver vaginally have incontinence and prolapse, compared to 35% of women who deliver by a C section.

● **Thinking that female athletes have strong pelvic floors.** Studies show that up to 52% of elite female athletes have stress and/or urge in-



You can order *My Pelvic Flaw* for \$29.95 (plus postage and handling) at www.mypelvicfloor.com.au

A percentage of the profits from the sale of *My Pelvic Flaw* will go to the Hamlin Foundation for Fistula Surgery in Ethiopia.

Toowoomba physiotherapist Jackie Robertson also stocks the books at the St Andrews practice.

For more details, call 5443 8005 or visit the website.

Studies show that up to 52% of elite female athletes have stress and or urge incontinence (these women had no children).

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● **Accepting sexual dysfunction.** Loss of vaginal sensation, a weaker orgasm or urine loss with intercourse can lessen a woman's desire to have sex. Research has shown marked improvements in their sexual dysfunction after improving their incontinence and prolapse.

Tips for a healthy pelvic floor

● **PERFORM** pelvic floor exercises every day. A regular exercise program is key.

● **DRINK** plenty of water — decreasing fluid intake will only lead to other problems.

● **AVOID** constipation — diet must be high in fruit and vegetables to provide fibre.

● **TRY** not to go to the toilet "just in case". Learn to wait until you have 250-300ml in the bladder.

● **SEEK** help early if there is a problem.

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