

Pelvic Health Physiotherapy Bowel Control Exercises and Advice

Anal incontinence (AI) is defined as the involuntary loss of wind, solid or liquid faeces, and may affect 10 percent of the adult general population.

Causes

The causes AI can be multifactorial and related to:

- Trauma during childbirth
- Lower bowel or gynaecological surgery
- Conditions which affect how your nerves function (examples: diabetes, stroke, spina bifida, multiple sclerosis)
- Ageing (due to the decrease of muscle bulk)
- Radiotherapy
- Severe long lasting diarrhoea, constipation or piles
- Irritable bowel syndrome or inflammatory bowel disease

Anal Sphincter/Pelvic Floor Muscle Training

Exercising your external anal sphincter and pelvic floor muscles will help you resist the urge to defecate and give you the confidence to hold on long enough to make it to the toilet. If committed to multiple, daily exercises you should notice an improvement within three months. Missing days and not being consistent with exercise will delay your improvement. Try to time your exercises around a daily activity such as sitting on the toilet after passing urine or when sitting down with a drink.

The Basic Exercise

Sit comfortably on a firm chair.

Imagine that you are trying to stop yourself from passing wind. You should feel the back passage drawing in. Try to visualise the movement as a lift upwards and forwards, like an escalator or a plane taking off. Another visualisation technique is to imagine that you are 'zipping up' from your tailbone to the front of your pelvis.

By focusing on your back passage closing and continuing with a lifting movement you are working both your pelvic floor muscles and your external anal sphincter muscle.

Your Home Exercise Programme

The aim of exercising these muscles is to increase muscle resting tone, strength, speed, bulk and endurance. To achieve this you must carry out three different types of contractions. Your physiotherapist may suggest different timings and repetitions based on your individual assessment.

Complete the following regime 3 to 5 times per day:

1. **Strength** - hold a **maximum strength** squeeze. Aim for at least 5 seconds (relax 4 seconds or more) x5 repetitions
2. **Endurance** - hold **half a maximum squeeze**. Aim to hold as long as you can. Relax for 10 seconds x 2 repetitions *Keep in mind that duration in excess of 20 seconds is needed to control faecal urgency due to liquid stool.
3. **Speed - Quickly and tightly squeeze**. Aim for a minimum of x5 repetitions

5 x strong, 2 x long, 5 x quick

Ensure Complete Emptying

Sit comfortably on the toilet with your legs slightly apart. Check that your knees are higher than your hips. A foot stool may help especially if your toilet seat is high. Rest your forearms on your knees and relax your jaw. As you relax your pelvic floor to open your bowels, widen your waist by expanding your rib cage. Gently bulge your abdomen forward and breathe out through pursed lips while applying a gentle downward pressure.

You may find that applying pressure to the perineal area or any bulging area of the vagina with your fingers may help to empty the bowels more effectively. Once you have completed your bowel movement, briefly squeeze your external anal sphincter muscle to aid the closing reflex.

Stool Consistency

A loose stool is more difficult for the sphincter muscles to control. Please see the Bristol Stool Chart for stool classification guidance. It may be necessary to review your diet to ensure you have an appropriate intake of soluble and insoluble fibre (18 to 30 grams per day). You may also benefit from the ingestion of probiotics and prebiotics. Several medications exist to help bulk the stool, decrease the speed of stool transit time, cleanse the gut, or to stimulate a bowel movement. Speak to your GP for further advice or a referral to a dietician.

'Holding on' Programme

If you struggle to control faecal urgency, you may benefit from trying a 'Holding on' programme. The aim is to practice holding on for a few extra seconds when needing to open your bowels in a safe environment (eg. at home). Gradually increase the amount of time you are able to hold by engaging your anal sphincter and pelvic floor muscles. Over time this will allow you to calmly walk to the toilet without rushing when needing to open your bowels.

Other Management

- The effects of AI can have a large impact on your emotional well-being. Please know that you are not alone and that psychological support is available via your GP.
- You may find the use of sprays or other odour control methods to be helpful
- Disposable pads and skin barrier creams (Sillesse, Cavidon, Ilex) may provide extra protection and comfort
- Conservative management could include the use of plugs, biofeedback, electric stimulation, balloon sensory retraining, or rectal irrigation may be advised based on your individual symptoms
- If you struggle with constipation please refer to the trust's Pelvic Health Physiotherapy Constipation leaflet.

Sources of information

Pelvic, Obstetric and Gynaecological Physiotherapy Courses and Publications
St Mark's Hospital NHS UK
Bladder and Bowel Community
NHS Information

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4500 x734434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

Pelvic Health Physiotherapy Department

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Responsible clinician/author: Pelvic Health Physiotherapy Team Directorate: OOH

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