



When you are pregnant, you get a lot of advice from many people. One topic few people think about is bladder and bowel control problems during pregnancy and after the birth.

HOW DO I KNOW IF I HAVE A PROBLEM?

There are a few things that might happen if you have weak pelvic floor muscles. You might:

- leak urine when you cough, sneeze, lift, laugh or do exercise
- not be able to control passing wind
- feel a strong and urgent need to empty your bladder or your bowel
- not have good support for your bladder, uterus or bowel.

Pelvic organ prolapse

Without good support one or more of your pelvic organs might sag down into your vagina. This is called pelvic organ prolapse. Prolapse is very common. It happens to about one in ten women in Australia. Women feel a heaviness, or a bulge or dragging in the vagina. Across the lifespan, one in five women may require surgery if these symptoms are a bother.

Sexual problems

You may also have sexual problems. After the birth, you will be very tired and busy with your baby. Vaginal birth can cause weakness around the vagina. The vagina may lack feeling. Vaginal tears and trauma can cause pain for many months. While breast feeding, hormones can make the vagina dry. This can cause more problems.

Talk with a health professional about these things if they are a problem.

AM I LIKELY TO GET BLADDER AND BOWEL PROBLEMS?

Some women are more likely to have bladder and bowel problems than others. Even women who have quite an easy birth can have problems. We can't always tell which women are likely to have problems.

If a woman has bladder or bowel problems, such as irritable bowel syndrome or an urgent need to pass urine (overactive bladder) before pregnancy, these are likely to get worse after the birth. Women can also get new bladder or bowel problems after giving birth. Constipation, coughing and obesity can make things worse.

Certain things about the birth can make bladder and bowel problems more likely such as having:

- your first baby
- a large baby
- a long second stage of labour
- a difficult vaginal delivery with stitches after being cut
- a big tear with stitches around your vagina
- the baby helped out by a vacuum cap
- the doctor using forceps.

WHAT IF I HAVE A CAESAREAN BIRTH?

Choosing a caesarean birth might seem like a way to avoid these problems, but it is not that simple.

A caesarean birth might reduce the risk of severe bladder control problems from 10% to 5% for a first baby. But after the third caesarean birth there may be no benefit at all. Caesarean births carry their own risks to mother and baby.

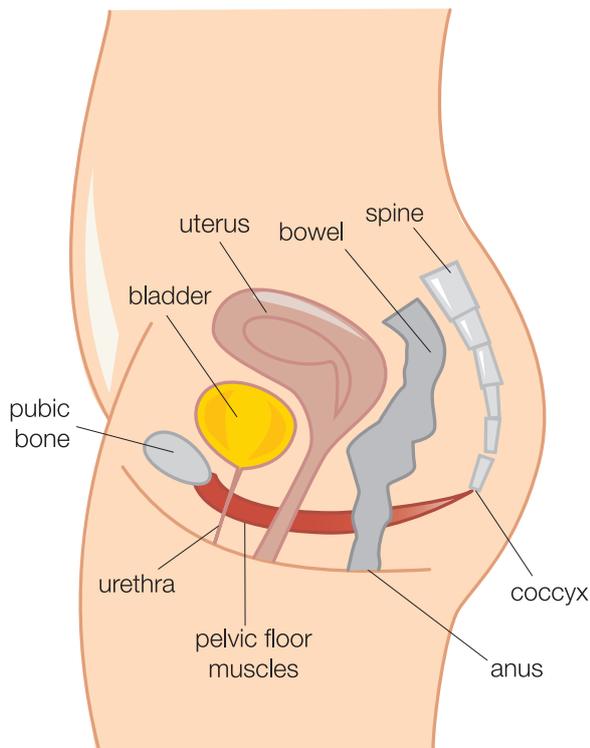
In many cases, a vaginal birth can run as planned however problems can still happen. We are still learning how we might prevent damage to the pelvic floor during birth. For now, pregnancy and birth mean making a choice between different risks. You and your partner need to think about these risks. You need to discuss them with your pregnancy care professional.

WHAT DO MY PELVIC FLOOR MUSCLES DO?

Look at the picture of the pelvic floor.

The pelvic floor muscles do a few things. They help to:

- support the bladder
- squeeze around the vagina and the rectum (back passage)
- hold the bladder, the uterus (womb) and bowel (colon) in their proper place.



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WHAT CAN I DO ABOUT WEAK PELVIC FLOOR MUSCLES?

The birth of a baby might have stretched your pelvic floor muscles. Any 'pushing down' actions in the first weeks after birth might stretch the pelvic floor muscles again. Avoid 'pushing down' actions in the first weeks after the birth. This will protect them.

Here are a few ideas to help you.

- Try to squeeze, lift and hold your pelvic floor muscles. Do this to brace your pelvic floor muscles before every sneeze, cough, nose blow or lift. This is called having 'the knack'.
- Cross your legs and squeeze them tightly together before each cough or sneeze.
- Share the lifting of heavy loads.
- Don't strain when using your bowels.
- Avoid bouncing exercises.
- It's alright to get up once a night to pass urine.
- Make your pelvic floor muscles stronger through training.
- Ask for advice about bladder infections.

For more information, see 'Good Bladder Habits for Everyone' and 'Pelvic Floor Muscle Training for Women'.

WILL THINGS GET BETTER?

Do not lose heart. In the first six months after giving birth, bladder or bowel control may get better without help. Even if the bladder or bowel problem seems severe, the pelvic floor tissues, muscles and nerves can mend with time.

Regular pelvic floor muscle training kept up over the long term, as well as the right advice, will help.

Don't forget to look after yourself. At this time it is easy to neglect your own needs.

Seek help if things are not getting better after six months. Speak to your doctor, continence physiotherapist or continence nurse advisor.

EXPECTING A BABY?

SOME PREGNANT WOMEN CAN HAVE
BLADDER AND BOWEL CONTROL PROBLEMS.
YOU CAN GET HELP.

SEEK HELP

You are not alone. Poor bladder and bowel control can be cured or better managed with the right treatment. If you do nothing, it might get worse.

Phone expert advisors on the National Continence Helpline for free:

- advice
- resources
- information about local services.

1800 33 00 66* (8am–8pm Monday to Friday AEST)

To arrange for an interpreter through the Translating and Interpreting Service (TIS National), phone 13 14 50 Monday to Friday and ask for the National Continence Helpline.

Information in other languages is also available from continence.org.au/other-languages

For more information: continence.org.au, pelvicfloorfirst.org.au, bladderbowel.gov.au

* Calls from mobiles are charged at applicable rates.

