

1. Welcome to Total Control and introduction to class, goals

The New Year usually brings a new set of resolutions, whether it's to exercise more, manage stress or take time for self-care.

Total Control, a pelvic health program for women of all ages, addresses all three plus gives you the tools to take control of your bladder and learn prevention strategies for lifelong pelvic health.

The evidenced-based exercise and educational program allows women with incontinence and other pelvic issues to begin moving in a safe and non-strenuous way. Each class in the seven-week session teaches you powerful basics about your bladder and pelvic health in a fun, informative and noncompetitive environment. You can talk about your setbacks and successes in a confidential, friendly atmosphere and know you aren't suffering alone.

The class is progressive and combines exercises to strengthen the pelvic floor, yoga and Pilates-inspired moves to stabilize and lengthen your core, lower spine and pelvis, gentle stretches and resistance-band arm toners for a low-impact, yet energizing and effective total body workout.

While the focus is on improving the strength of your pelvic floor, the program is built around the Pelvic Pyramid. Participants learn much more than how to properly do a Kegel. You will learn how to activate, isolate and strengthen some of the deepest muscles in your core, back and pelvic floor, which all work together to decrease urinary urgency and frequency, increase core strength, improve posture, reduce back pain and improve sexual function.

West Michigan women are lucky to have access to this unique outreach program offered through Mercy Health Bladder Clinic. Consider it a first line of defense if you want to prevent bladder problems, improve your bladder control or prevent symptoms from getting worse and reduce leaking and full-blown accidents.

Think of it as exercise from the inside out – without ever breaking a sweat!

2. Intro to the Pelvic Pyramid

Besides getting well-acquainted with your lady parts, Total Control teaches women how to connect to their core, pelvic floor and feminine energy.

The class works muscles you didn't know you had. But in a gentle way.

Missy Lavender, founder of the Women's Health Foundation in Chicago, developed this one-of-a-kind program after struggling with stress urinary incontinence after her first child. She worked with physical therapists, OB-GYNs, nurses and exercises professionals to design exercises built around the Pelvic Pyramid.

Exercises work together to strengthen deep abdominal muscles and your spine and back, which help to tone your tummy and improve posture. A strong pelvic floor helps to hold back urine.

Transverse abdominals (TVA): The deepest layer of abdominals, think of the TVA like your body's natural corset. It wraps around the trunk and is the only abdominal muscle that attaches to spinal joints, helping to stabilize the spine and pelvis and support your internal organs prior to movements of the trunk and limbs. Strong TVA muscles can help you with everyday activities – laundry, raking leaves, picking up your toddler – and give you a flatter tummy.

Multifidus: This muscle, technically a group of spider web-like muscles, is underneath your big back muscles and hidden from view. It runs from vertebra to vertebra, starting at your sacrum and extending to the mid-thoracic spine between your shoulder blades. This muscle is very deep, but it's a key stabilizer of the back and pelvis and facilitates all bending and twisting. Keeping it strong is important for good posture and living pain free as you age.

Pelvic floor muscles: Imagine a hammock supporting your pelvic organs. These are the muscles in the pelvis that join with connective tissue (fasciae and ligaments) to support the bladder, rectum, urethra and uterus. Strengthening these muscles directly impacts stress and urge incontinence

because they weave around the urethra, vagina and anus like a web. The urethra has to close tightly to hold back urine, so the muscles around the urethra need to be taut and strong.

3. Types of Incontinence (stress, urge, mixed)

A properly functioning bladder is often overlooked because urinating is so automatic – you often do it without thinking about it. Until you have your first accident. Or you try to watch a movie and realize you’ve gone three times in two hours. Or you can’t sleep through the night.

Contrary to what you may think, properly voiding is a voluntary action. Your pelvic health matters because it can greatly affect your quality of life as you age. The fear of an “accident” keeps many people from doing activities they formerly enjoyed, such as dancing, laughing and traveling, and can lead to isolation, depression and a dependence on pads.

Although the probability of incontinence increases with age, loss of bladder control isn’t just an “old lady” problem. Many new mothers struggle after giving birth. Runners and athletes also find repetitive pounding and pressure on the pelvic floor can cause leakage.

Here are the three main types:

Stress Urinary Incontinence (SUI) occurs with activity such as coughing, laughing, sneezing, jumping, lifting and running. Sudden pressure or stress exerted on the bladder and urethral sphincter causes leaking. If the pelvic floor muscles and the urethral sphincter become weak, they have trouble holding back urine during times of increased pressure on the bladder.

Urge Urinary Incontinence (UUI) is related to an overwhelming urge to urinate, sometimes unexplained, that is so strong you cannot hold back the flow of urine. You can have urinary urgency without leaking. Certain things can “trigger” an urge sensation. Many women experience urge symptoms when they get close to a bathroom, come home, or are in or near water or the cold. Urge incontinence can develop from over activity of the bladder muscle, due to neurologic damage or from irritation to the bladder itself - like drinking tons of coffee. People can also have a learned urgency where they are afraid of leaking so they void frequently and the bladder learns to want to be emptied all the time.

Mixed Urinary Incontinence (MUI) is a combination of the two and most common in older women.

4. Be Fit, Be Sexy, Be In Control – Article/Tidbits and Photos

Pelvic floor and organs and why they matter

What are the three openings in your pelvic floor and how do they relate to bladder control?

If it takes you a few minutes to answer that, or you have no clue, taking Total Control will help you understand your female anatomy and explain the intricacies of your pelvic floor – where it’s at, what it does and why weak pelvic floor muscles lead to stress and urge incontinence.

The pelvic floor acts like a hammock that supports the pelvic organs. It includes the openings of the urethra, for urination, the vagina, for intercourse and child birth, and the anus, for fecal elimination.

The pelvic floor consists of pliable muscles that wrap around these openings in a figure-eight shape.

These are muscles that stretch during child birth, which is why many new moms struggle with leakage after a vaginal delivery. There are slow and fast twitch muscle fibers that can be strengthened through Kegels, or pelvic floor muscle exercises, and increase blood flow for stronger orgasms.

The pelvic floor also helps support the pelvic organs:

- Bladder/urethra: Hollow, muscular pump that sits just behind the pubic bone and holds urine. If you imagine your pelvis, the bladder sits in front of the uterus and rectum. As it fills, it becomes pear shaped and rises into the abdomen.

- Uterus: Sits behind the bladder and expands to accommodate a growing baby. It can put pressure on the bladder while pregnant, creating a sense of urgency. In non-pregnant women, it is about the size of an orange.
- Rectum: This includes the last six inches of the large intestine and ends at the anus. It is behind the uterus and has internal and external sphincters that play a role in fecal continence. Constipation can lead to fecal matter backing up and displacing the bladder.

There are a lot of organs in a tiny space and they can prolapse or shift due to child birth, a hysterectomy, other surgeries and age. Thanks, gravity!

A lifted and taut pelvic floor helps reduce frequency and urgency because it helps provide good support for the pelvic organs and less pressure on the bladder.

5. Total Control natural alternative, exercises do help

If you're looking for alternatives to medication and surgery, or take a holistic approach to health, Total Control gives you the tools to make physical, behavioral and lifestyle changes.

Loss of bladder control isn't a natural part of aging. It's not something you have to just accept. And you don't have to suffer in silence.

When it comes to incontinence, it's not enough to think "I'll just take a pill" and the problem will go away. Medication and surgery can help. But you also have to look at behaviors that increase trips to the bathroom, whether it's what you're eating and drinking, smoking, obesity, or strenuous exercise, or physiological and structural problems related to the pelvic floor from child birth, surgery or other illness.

The program has been proven in both research and in clinical studies to actually improve incontinence symptoms, and in some cases, totally alleviate the "laugh, cough, sneeze" leaking or the "gotta go, gotta go" urgency.

The muscles of the Pelvic Pyramid – transverse abdominals, pelvic floor and multifidus – are often overlooked in cardio and strength training sessions. But they are a powerful group of muscles that help to support and stabilize the lower spine and pelvis, support the organs in the pelvis, and help to optimize bladder function and control.

Class participants learn to isolate and engage these muscles so they can activate them during daily activities.

Total Control provides a natural alternative to improving symptoms of bladder incontinence by lifting and squeezing your pelvic floor through Kegels, or pelvic floor muscle exercises. Doing these exercises on a regular basis – standing, sitting, side lying, on hands and knees or child's pose – helps to squeeze the urethra shut so urine is less likely to leak out. Contracting these muscles also helps decrease the feeling of urgency and improves blood flow to the vaginal area. You should actually feel these muscles lifting, as well as squeezing.

Just like any other muscle, the pelvic floor needs to be worked. Use it or lose it!

6. Bladder irritants, why it matters what you eat and drink

Coffee, Diet Coke, sugary drinks and even beer and wine – some of your favorite drinks – often wreak the most havoc on your bladder.

Total Control not only addresses the physical reasons for loss of bladder control, but helps you become more conscious of your body, behaviors and lifestyle habits. What you eat and drink does matter.

Irritants in foods and beverages can make the urge to urinate stronger and the ability to hold it harder, which increases urinary frequency. Even drinking too much water can have you in the bathroom every hour.

It's important to pay attention to what you are drinking, when, how often and how soon it had you in the bathroom. Keep a food/drink diary if it helps. This will help you know your triggers and the foods and fluids to avoid.

The worst culprits are caffeine, artificial sweeteners and carbonation – known as the “Triple Whammy.” So, having too much coffee, tea, soda and alcohol will have your bladder working in overdrive. Other bladder irritants include spicy and acidic foods, sugar, chocolate, citrus fruits and juices, tomatoes, and medicines with caffeine.

You don't want to limit your fluid intake to the point you become dehydrated. But it's possible you may be drinking too much, or too much of the wrong thing. Try to have one cup of coffee or one Diet Coke rather than five.

The rule of eight, eight-ounce glasses of water per day does not account for various ages, body sizes, activity levels and temperature changes. The best way to determine hydration is by thirst level and the color of your urine. If you are drinking the right amount, your urine should be a light, straw color. Dark urine can indicate dehydration or illness. Also, certain foods, medication and vitamins can affect the color of your urine as well. Another side effect of many medications is “dry mouth” and excessive thirst, which may cause you to drink more and contribute to urinary frequency.

As the Total Control class progresses, you will become more aware of your body and behavioral habits that are impacting your bladder health. It puts you in control to make the necessary changes to reduce symptoms. And you can give yourself a pat on the back when you make a three hour car trip without stopping.

7. Mind over bladder, why just in case peeing is bad

The bladder is an amazing, yet temperamental organ. Most people pee without putting much thought into how much time has passed between bathroom trips.

Parents tell children they better go “just in case.” Women worried about having an accident do the same thing. But urinating when you don't really have to is detrimental to the long-term health of your bladder.

Bladder control requires many parts of the body to work properly – brain, spinal cord, branch nerves, blood vessels, bladder, urethra, hormones and pelvic muscles – which makes it such a complex process.

Total Control gives participants the tools to be more mindful of their bathroom habits – from how often you go to if you rush through it. Truly, it is the brain, not the bladder, in control.

Peeing too frequently can confuse your bladder. It's not good to hold your urine until it hurts, but unnecessary voiding can make you feel like you always have to go.

You should aim to void every two to three hours, or six to eight times a day and try to sleep through the night.

There's a simple mantra to keep in mind during your daily activities: Mind over bladder. Ask yourself if you really have to go or are you going because you always go on your work break, or before you leave the house, or there's a bathroom nearby, or you're worried about being caught out and about without access to one?

Do a Kegel, or pelvic floor contraction (think squeeze and lift), turn your attention to something else and see if you can wait another 15 or 30 minutes. You should not hold it until it hurts, but running to the bathroom every 30 minutes when you really don't have to go isn't helping, either.

8. Prevention strategies, proper voiding techniques

The beautiful thing about the bladder is you can retrain it. And behavior modifications do help in improving incontinence symptoms.

It is recommended to limit your intake of caffeine, stop drinking after 8 p.m. and do your best to sleep through the night.

If you wake up feeling like you “gotta go, gotta go,” or get a sudden urge to urinate as you are trying to get in your door, try a prevention strategy called “The Knack.” Practice doing a kegel, or pelvic floor muscle contraction, before and during activities that cause leakage. Squeeze and lift before you cough, laugh or sneeze or prior to heading to the bathroom.

Often urge incontinence strikes as you are waiting in line in the bathroom or rushing to get to the toilet. Pay attention to your triggers.

Proper voiding is another behavioral modification that can impact your time on the toilet, but hopefully minimize trips there.

Urinating isn't a race, and it's okay to own the throne. Taking your time can help you to be more aware of your body, the actual process of urination, and if you're getting it all out.

Follow these tips to optimally void and get the most out of your bathroom visit:

- Sit down all the way. Don't hover. This can be challenging for germaphobes, especially when using public bathrooms or port-a-johns. Put down some tissue or use a disposable seat cover. Sitting allows the bladder and urethra to have proper alignment and the pelvic floor muscles to relax.
- Take your time. Forget the line outside if you are in a busy public restroom. Don't rush. Hurrying can lead to bearing down, or trying to push urine out. This is hazardous to the long-term health of your pelvic floor muscles.
- Rock n' roll is a technique to make sure you get all the urine out. The bladder wall has crevices that can hold urine. It helps to rock back and forth or side to side after peeing to make sure you fully empty your bladder.
- Double voiding is another way to make sure you expel all the urine from your bladder. After you urinate, relax and try to void again without pushing. It may be helpful to stand up and sit back down. You may be in the bathroom a little longer, but it beats having to go back in 30 minutes.

9. Prolapse and constipation

When it comes to bladder control, starting an early prevention program that includes daily pelvic floor muscle exercises is important because gravity isn't a woman's friend.

And certain age-related changes can increase the risk of incontinence: Loss of estrogen and other hormonal changes; decreased muscle tone and strength; increased bladder contractions, but with less effectiveness; decreased sensation of nerves, delaying signal it's time to urinate; less mobility so it takes longer to get to the bathroom; decreased heart contraction strength and fluid retention; taking many medications, including those that affect bladder contractions; and co-existing ailments, surgeries and pelvic prolapse.

What is prolapse? The pelvic organs continue to drop and a weak pelvic floor can lead to a falling or bulging of internal pelvic organs.

Sometimes it's simply due to age. A hysterectomy or removal of other organs can create space and cause shifting of internal pelvic organs. In worst-case scenarios, the bladder or vagina can prolapse outside of the body.

There are three types of pelvic prolapse and none are fun:

Cystocele – A dropping or bulging of the bladder into a weakened anterior vaginal wall.

Rectocele – A bulging of the rectum into a weakened posterior vaginal wall.

Uterine prolapse – Uterus and cervix dip down towards the opening of the vagina.

Women also underestimate the importance of regular bowel movements for their overall health and don't realize how constipation can impact bladder control. The pelvic floor muscles also support the bowels and are responsible for effective bowel control and evacuation. Remember, the anus is the third opening and connects to the rectum. When it's full of stool, the bladder can be displaced and prevent the bladder sphincter from closing tightly.

Chronic bearing down, or pushing to encourage a bowel movement, also weakens the pelvic floor muscles due to the force and pressure. This contributes to sagging of pelvic organs and bladder leakage.

Constipation can be caused by a variety of things, including medications, lack of exercise, dehydration, a bad diet and illness. A diet high in fiber, plenty of water and even a magnesium supplement can help with regularity. It is important to address constipation along with bladder concerns.