

## Actions

Although continence issues are more common as people get older, they are

### not an inevitable part of aging.

Speak to your GP or another health professional if you have any concerns – there is often something that can be done or recommended to help and related health concerns can be addressed.

### Further information:

NHS - <https://www.nhs.uk/conditions/urinary-incontinence/>

NHS Inform Scotland - <https://www.nhsinform.scot/illnesses-and-conditions/kidneys-bladder-and-prostate/urinaryincontinence#about-urinary-incontinence>

If you need help to understand this leaflet or would like it in a different language or format such as large print, Braille or audio, please ask our staff or email:

[Llrcrct.services@nhs.net](mailto:Llrcrct.services@nhs.net)

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# Urinary incontinence

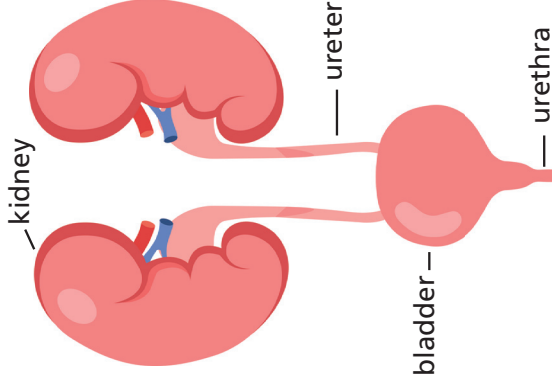
Problems with urinary continence cannot only affect someone's quality of life but can also increase their falls risk.

For example this may be as a result of rushing to the toilet, walking around the house at night, clearing up after an accident or the effects of having to wake frequently throughout the night.

**Kidneys:** Filter blood to make urine. Prevent build up of wastes and fluids in blood.

**Bladder:** Balloon shaped muscular bag. Collects and stores urine. When you go to the toilet it contracts. When empty it's the size of a pear. Normal capacity is 400ml-600ml. When urinating the bladder muscles squeeze.

**Urethra:** Passageway from bladder to outside world. The pelvic floor muscles keeps it shut until it is time to urinate.



Community  
Falls Prevention Service  
Legion House, South Street  
Ashby de la Zouch  
Leicestershire. LE65 1BQ

[www.leicspart.nhs.uk](http://www.leicspart.nhs.uk)

Email: [ipt.feedback@nhs.net](mailto:ipt.feedback@nhs.net)

## A normal bladder:

- Empties every 3-4 hours. Approx. 4-7 times a day.
- Holds up to a pint of urine.
- May go to the toilet once or twice a night.
- You know when it is full and have enough time to get to a toilet.
- Does not leak.

## Types of Incontinence:

Around nine in every 10 people with urinary incontinence have either stress incontinence or urge incontinence.

### Stress incontinence

When the bladder is put under sudden pressure causing you to leak urine.

- For example - sneeze, cough, laugh or exercise (could even be when walking).
- Pelvic floor muscles can be stretched and weaken in childbirth or after surgery in the pelvic area.
- Muscles lose their elasticity as you get older.

### Urge incontinence

Sudden or intense need to pass urine.

- Can be only a few seconds between recognising the need and urination.
- May be triggered by movement or sound of running water.

### Overflow incontinence

Passing small amounts of urine frequently but still feeling bladder is full but cannot empty it.

## What can I do to help with continence issues?

### Have a healthy lifestyle

- Maintain a healthy weight.
- Avoid or cut down on alcohol consumption and smoking.
- Keep active.



### Keep hydrated

- You should aim for 3-4 pints or 6-8 glasses a day.
- Urine should be a pale straw colour – any darker indicates dehydration.
- Not drinking enough can make you feel unwell but also make continence problems worse.
- Drink throughout the day unless advised by a professional to make restrictions.
- Caffeinated, acidic (e.g. fresh juices) or fizzy drinks can irritate the bladder.
- Water, decaffeinated drinks, squash and herbal teas don't irritate the bladder.

## Pelvic floor exercises

You can feel your pelvic floor muscles if you try to stop the flow of urine when you go to the toilet.

It's not recommended that you regularly stop the flow of urine midstream as it can be harmful to your bladder.

To strengthen your pelvic floor muscles, sit comfortably and squeeze the muscles 10 to 15 times.

Do not hold your breath or tighten your stomach, bottom or thigh muscles at the same time.

When you get used to doing pelvic floor exercises, you can try holding each squeeze for a few seconds. Every week, you can add more squeezes, but be careful not to overdo it, and always have a rest between sets of squeezes. After a few months, you should start to notice results. You should keep doing the exercises, even when you notice they're starting to work.