TENA°

Module 1: Introduction to Bladder Weakness

This learning module for pharmacists and pharmacy teams, is designed to provide fundamental information on the different types of bladder weakness customers may be experiencing.

OBJECTIVE

- Help identify the different types of bladder weakness
- Aid your conversations with customers experiencing bladder weakness











Bladder weakness

Although many people in the UK experience bladder weakness, it's a subject that many feel uncomfortable talking about.

This stigma often stops people from seeking the help they need. The sort of support that could dramatically improve their quality of life.

But pharmacies like yours can help.

By staying up to date with the latest advice, guidance and products on offer, you and your team can provide these customers with the reassurance and advice they need to manage their condition.

Q WHAT IS BLADDER WEAKNESS

Q HOW TO KEEP A HEALTHY BLADDER

Q TYPES OF BLADDER WEAKNESS

Q UNDERSTANDING CUSTOMERS NEEDS



+6 million UK women

experience bladder weakness



1 in 4 UK women

aged 35+ experience bladder weakness



approx. 5.4 million UK men

experience some form of urine leakage.



So what is bladder weakness?

Also called **'incontinence'**, it's when the bladder leaks urine involuntarily.

It can be as little as a drop or as much as a full bladder.

It happens when the muscles and nerves that normally work together to hold and release urine from the bladder stop working as they should.

If the bladder muscle suddenly contracts or the sphincter muscles aren't strong enough to hold urine back, it'll simply leak out.

Disease, injury or health problems can cause the condition, such as long term diabetes, stroke, Parkinson's disease and multiple sclerosis. But damaged or weakened pelvic floor muscles can also cause bladder weakness.

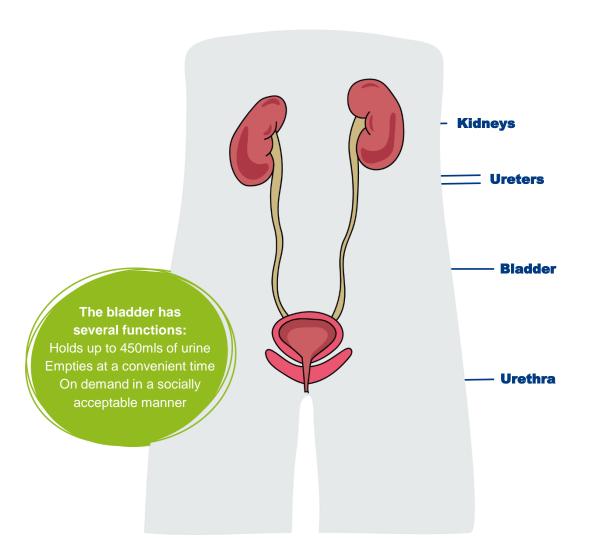
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The bladder at work

The body's urinary system is a complex made up of organs, nerves, and muscles all working in sync to control and release urine from the bladder.

It's made up of two kidneys, the ureters, the bladder and the urethra. Urine is made by the kidneys and carried to the bladder by the two ureters where it's stored until nature calls — usually when the bladder is half full.





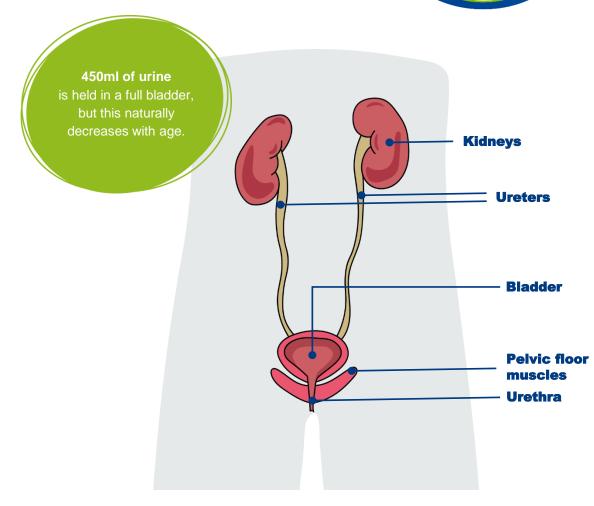
The bladder at work

Pelvic floor muscles in both men and women play a big role in bladder control.

Several layers of muscle hold the bladder in place and support the pelvic organs.

These muscles also support openings in the pelvic floor – the vagina, anus and urethra in women and anus and urethra in men. If the muscles are weak they can't support these openings effectively.

In men, the prostate gland also surrounds and lies in the wall of the urethra, just below its connection with the bladder.











Different types of bladder weakness

Urinary incontinence varies from one person to another. It can happen at different times, at different degrees for different reasons. But these are the most common types of conditions.

Stress incontinence

Happens when the pelvic floor muscles and ligaments are damaged or weakened

Urge incontinence

A person with an overactive bladder needs to urgently pass urine often.

Underactive bladder

When muscle contractions aren't strong enough to empty the bladder, urine can collect and sits in bladder

Outflow obstruction

A blockage of the urethra can make it difficult for urine to pass through.





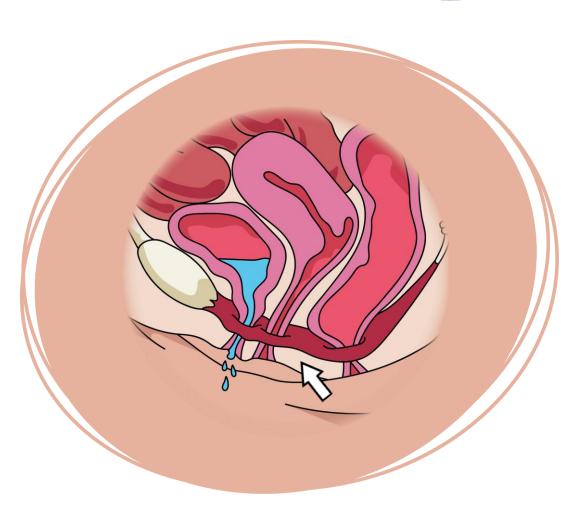
Stress incontinence

The most common form of bladder weakness in women, stress incontinence happens when the pelvic floor muscles and ligaments are weakened or damaged.

This often happens during childbirth, but menopause, obesity, chronic constipation and a chronic cough can also cause weakness.

As a result, urine leaks out by coughing, laughing, sneezing or exercising.





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Stress incontinence

Treatments

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Pelvic floor exercises performed several times a day can make a big difference, but it can take up to three months before an improvement is seen. So patience and persistence is key.



Physiotherapy can also help, with a more in-depth assessment and specific treatment advice.







Urge incontinence

(overactive bladder)

A person with an overactive bladder needs to urgently pass urine often. As well as going to the toilet throughout the day, they may also go more than once a night. If they can't get to a toilet in time, they may become incontinent. Others – particularly men – may also leak after urination.

Conditions of the nervous system, such as stroke and Parkinson's disease, can cause these symptoms. And while some people think reducing fluid intake will help relieve symptoms, it generally makes them worse with concentrated urine aggravating the bladder.

The bladder senses it needs to empty and sends strong signals to the brain to contract the bladder to empty.



This leads to an unstoppable urge to pass urine – called urgency

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Q TREATMENTS

Tap on the numbers on the image to find out more



Urge incontinence

Treatments

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Bladder retraining can help restore normal bladder function by teaching the bladder to hold on for longer. **Kegel exercises** for pelvic muscles can also help in some cases of urge incontinence



Adjusting fluid type and intake can relieve the frequency and urgency of urination.



Medication prescribed by a GP can help 'relax' the bladder so it can store more urine.





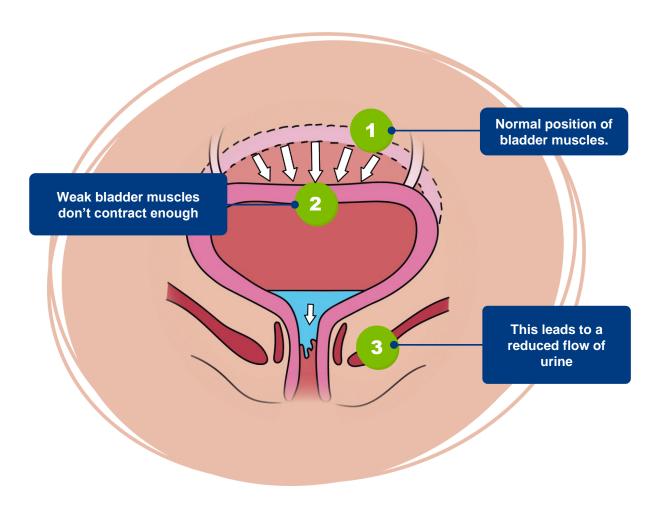
Underactive bladder

When muscle contractions aren't strong enough to empty the bladder, urine can collect and sits in the bladder. This then causes the bladder to overstretch and become enlarged.

Someone with an underactive bladder often dribbles, strains to pass urine, and gets recurrent urine infections.

As well as damage to the nerves that control the bladder, the condition can be caused by obstruction to the urethra or by the prostate in men.





Tap on the numbers on the image to find out more

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Toilet techniques can help empty the bladder more effectively, such as 'double voiding' where a person tries to urinate a second time a few minutes after the first attempt.



Intermittent catheterisation can help, where a small catheter is inserted into the bladder to drain the urine several times a day.



An indwelling catheter can be a preferred last resort, where a catheter is inserted into the bladder to continuously drain the bladder.





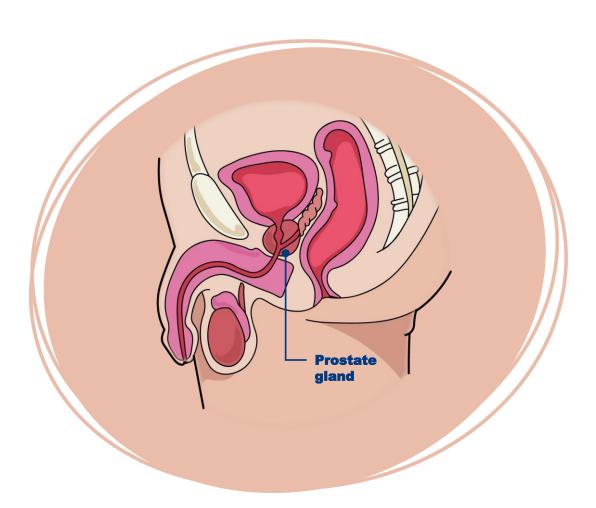
Outflow obstruction

A blockage of the urethra can make it difficult for urine to pass through.

This is most commonly caused by an enlarged prostate gland, which sits at the base of the bladder and surrounds the urethra.

With age the prostate gland grows larger, compressing the urethra and causing frequency, urgency, straining, poor stream, dribbling after urination, and the need to urinate at night.

In older people, another common cause of blockage is constipation. Infection or trauma can also narrow the urethra and cause incontinence.







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Outflow obstruction

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Medication can help relax the muscle of the bladder neck.



Surgery where the prostate gland is partially or totally removed.



Dilation of the urethra to allow urine to pass normally.





Keeping the bladder healthy

Eating well, drinking enough and staying fit can go a long way to keeping the nerves and muscles involved in bladder control healthy and strong.



Drink

Drink 1-1.5 litres of fluid a day (including fluid in food) and avoid alcohol, caffeinated and fizzy drinks that can aggravate the bladder.



Eat

Eat a healthy diet to maintain a healthy weight, helping reduce the risk of bladder conditions caused by obesity.



Health checks

Health checks can help identify specific causes, such as medication, that could be causing bladder problems or making them worse.



Exercise

Exercise such as pelvic floor strengthening can help to reduce bladder leaks and reduce the need to urinate at night



Pelvic floor exercises

Shaped like a sling, pelvic floor muscles hold the pelvic organs in place, supporting the bladder and bowel and controlling urination. Keeping them strong can help prevent leaks.

To workout the **back part** of the pelvic floor, squeeze muscles around the back passage as if trying not to pass wind.

To workout the **front part** of the pelvic floor, squeeze muscles as if trying not to pass urine.

If you find yourself squeezing your legs together, tightening your buttocks or holding your breath, you've engaged those muscles instead of the pelvic floor.



Try to do the following exercises six times a day for 12 weeks.

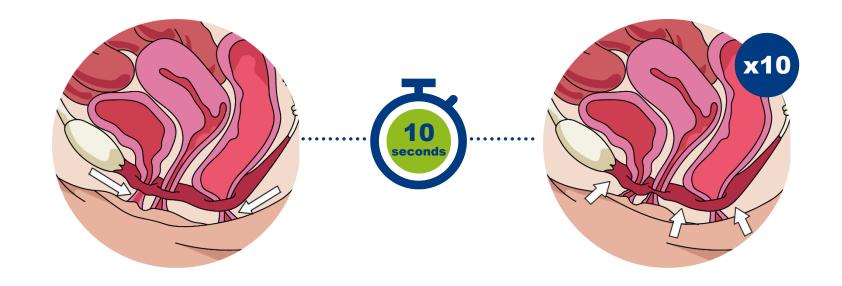






Exercise 1





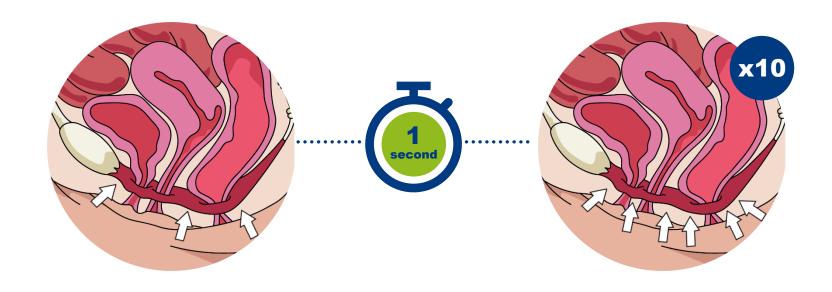
Tighten the pelvic floor as long and as hard as you can.

Try to build up 10 seconds max

Rest for a couple of seconds and repeat 10 times

Exercise 2





Draw in the pelvic floor

Hold for one second then relax

Repeat in short successions up to ten times.



Further Resources & Advice for customers

TENA Website:

www.TENA.co.uk

NHS

- Urinary incontinence NHS (www.nhs.uk)
- What are pelvic floor exercises? NHS (www.nhs.uk)

Bladder Health Charities:

Bladder Health UK



You Have completed this Module

Now you have completed this module, proceed to the next screen to test your knowledge and record your learning. You can use this as one of your revalidation activities.

TAKE THE QUIZ



FURTHER RESOURCES