

Mind over Bladder & Unbind the Bowel



Now part of  **ADVOCATE**HEALTH

April 26, 2023 | Erica Vitek, MOT, OTR, BCB-PMD, PRPC

Presentation Objectives:

1. Describe the pelvic floor muscles
2. Define normal bladder and bowel function
3. Demonstrate how the pelvic floor muscle contributes to bladder & bowel functioning
4. Characterize the most common bladder & bowel symptoms experienced by people with Parkinson disease (PD)
5. Explore the cause of bladder & bowel symptoms in PD
6. Summarize lifestyle tips that can improve bladder & bowel behavior
7. Learn how to find your pelvic floor and ways to use it for better bladder & better bowel function
8. Participate in techniques to help with successful daily bowel movements



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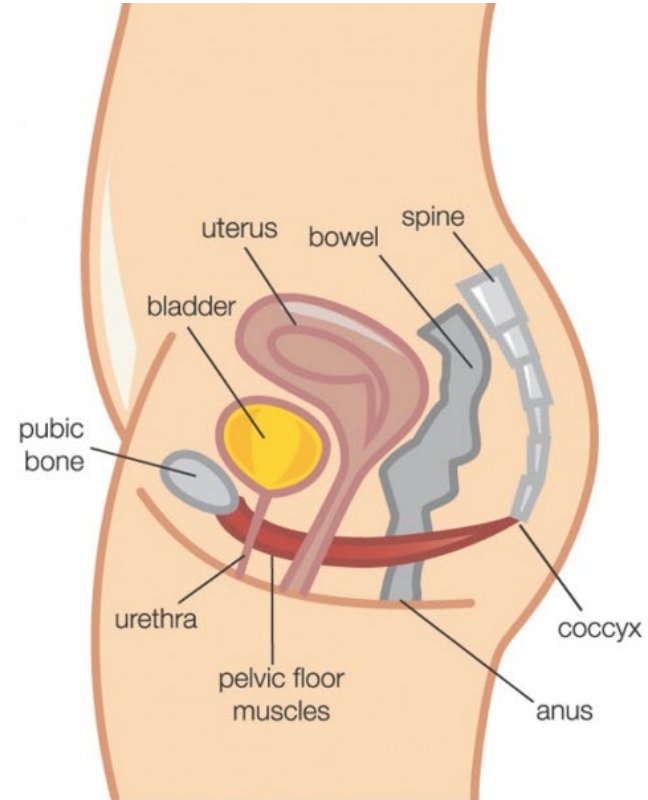
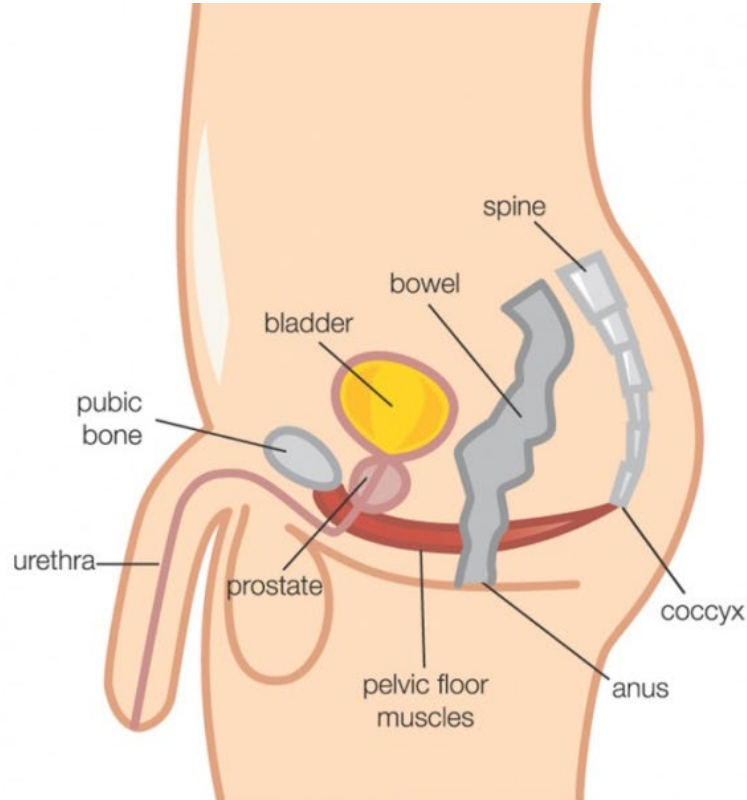
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Pelvic Floor Muscles

- Sling of muscles that supports the pelvic organs
- Attaches to bones of the front, back and sides of the lower pelvis
- Functions (5 S's):
 1. **Sphincteric**: to help control urination, bowel movements, and gas (sphincter around urethra and anus)
 2. **Support**: provides 'shelf' to the bladder, uterus, prostate, and rectum/colon
 3. **Sexual**: engorgement and orgasm
 4. **Stabilization**: works with the core musculature
 5. **Sump pump**: circulation of blood and fluid back towards the heart



Pelvic Floor Muscles











Normal Bladder Function

- Bladder can hold 2 cups of urine (400-600cc)
- Urinate 5-8 times per day or once every 2-5 hours
- 1st sensation to urinate when bladder is approximately half full (200-300 cc)
- Complete emptying of the bladder
- No leaking of urine at any time
- Waking 0-1 time during the night to void



Am I Hydrated?

Urine Color Chart

1	
2	
3	
4	
5	
6	
7	
8	



Normal Events for Bladder Continence

Bladder stores urine

- Bladder remains relaxed
- Sphincter and *pelvic floor muscles* contract

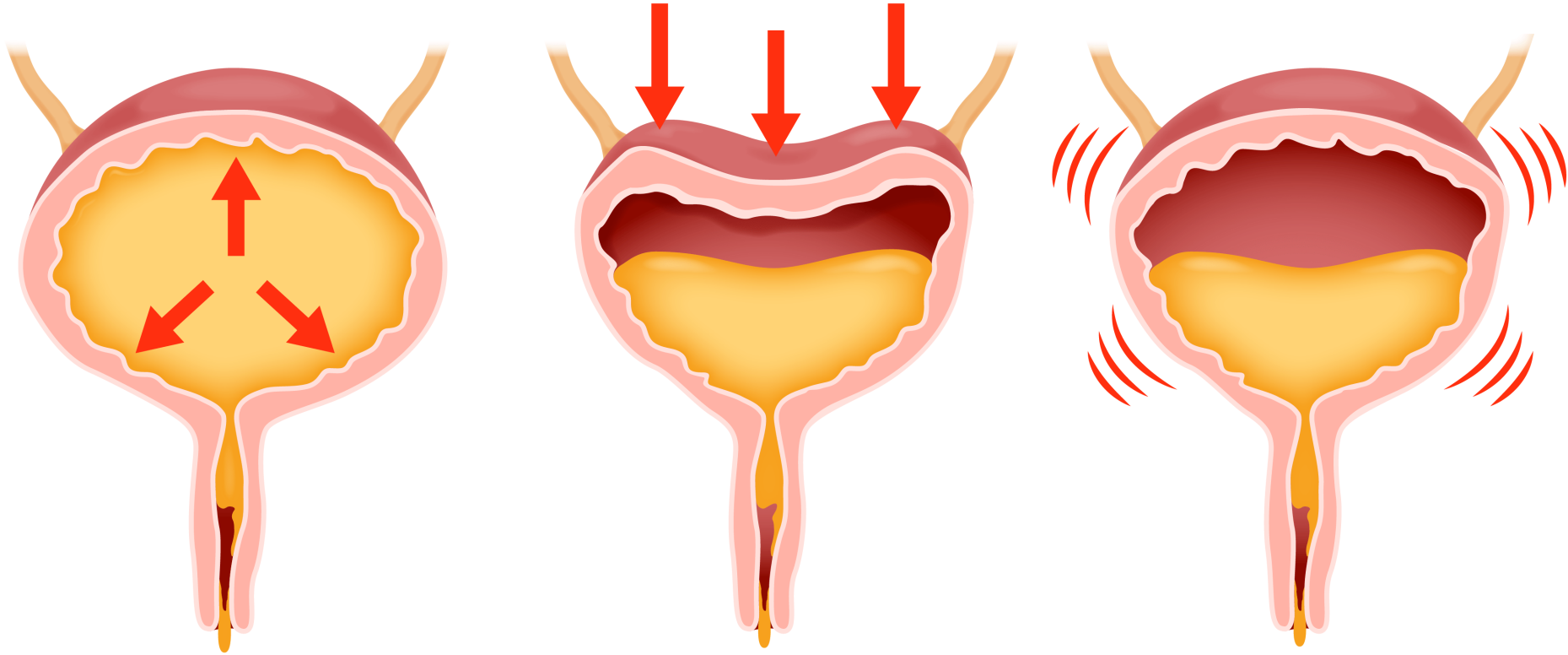
Transition stage

- Recognize signal of fullness (can ignore or go)
- To inhibit, contract the sphincter and *pelvic floor muscles*

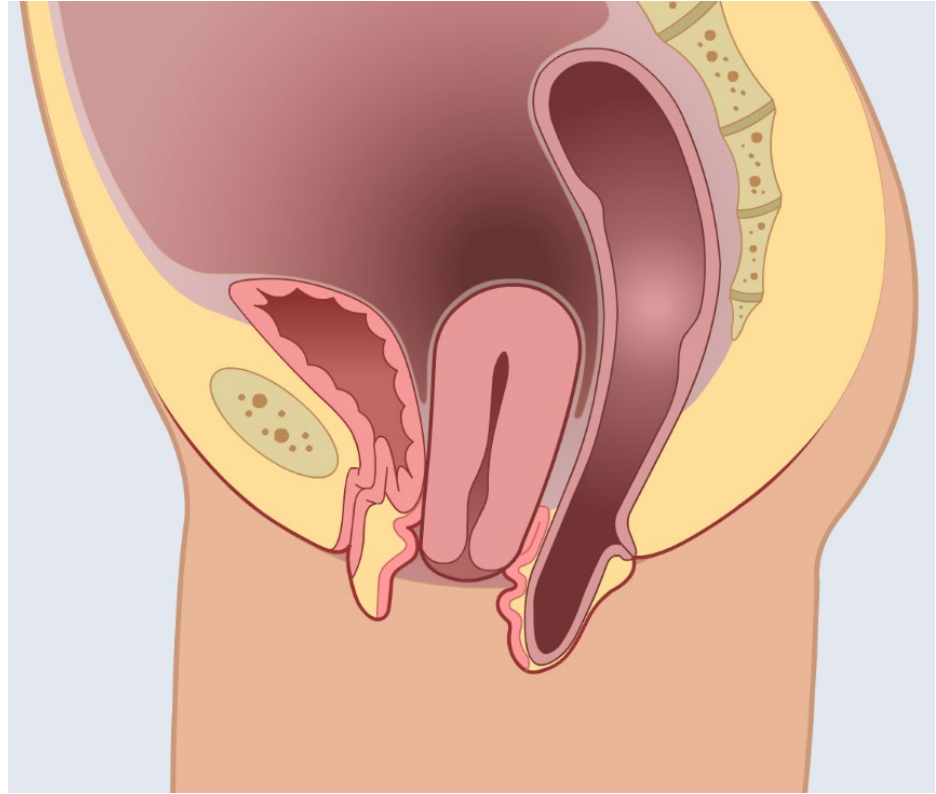
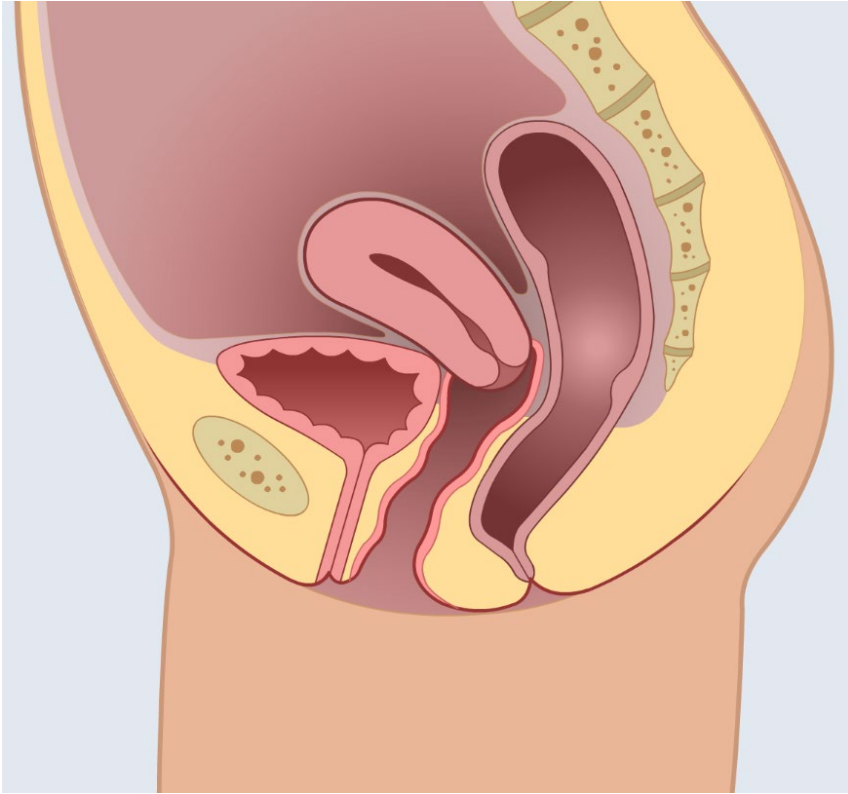
Emptying

- Bladder contracts
- Sphincter and *pelvic floor muscles* relax

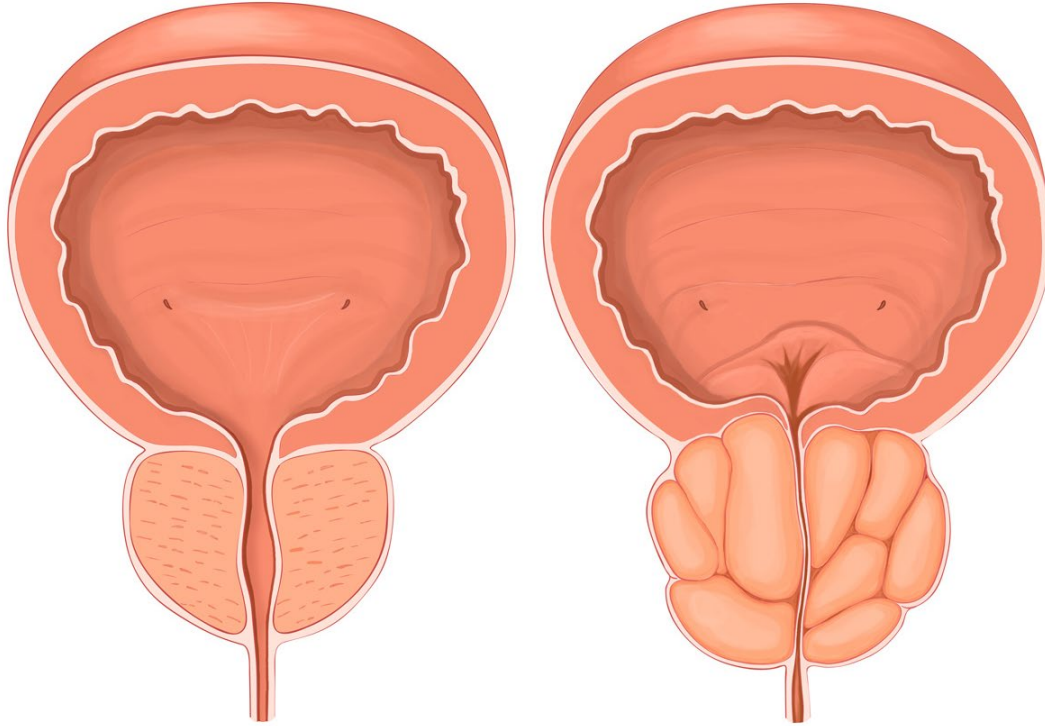
Urinary Incontinence Types



Prolapse

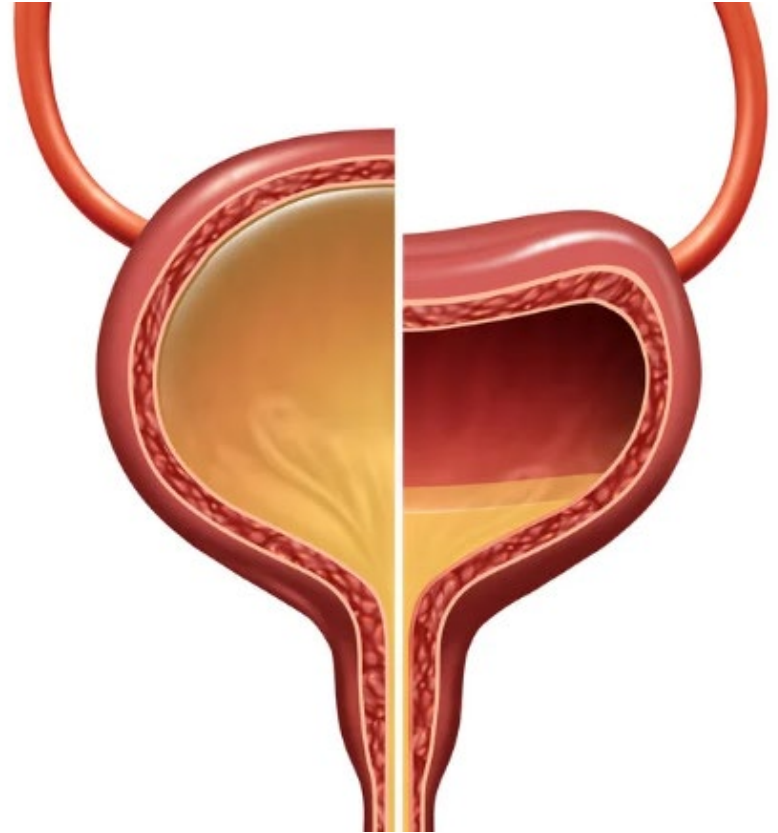


Prostate



Parkinson disease & Bladder

- Small volumes
- Urgency/Frequency
- Incontinence
- Nocturia



Normal Bowel Function

- Bowel movement 3x/week to 3x/day
- No leaking of stool at any time
- Consistency soft and formed
- Awareness indicating presence of stool in the rectum










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Bristol Stool Chart

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. Entirely Liquid



Normal Events of Bowel Continence

Gastrocolic reflex:

Arising in the morning and/or ingestion of food may initiate mass peristalsis
Sphincter and *pelvic floor muscles* contract

Awareness:

Rectum stretch receptors send urge impulses
Voluntary contraction of the *pelvic floor muscles* to inhibit/retain feces until conditions are appropriate

Evacuation:

Rectum contracts
Sphincter and *pelvic floor muscles* relax

Completion:

Rectum relaxes
Sphincters and *pelvic floor muscles* contract closing the anal canal



Parkinson disease & Bowel

- Slow motility
- Abdominal use
- Emptying coordination



Lifestyle Tips for a Better Bladder

- Drink water
- Limit fluids after dinner
- Avoid bladder irritants (caffeine, carbonation, acidity)
- Avoid regular “just in case” bathroom trips
- Take your time when on the toilet
- Daily bowel movements
- Don’t rush when you have an urge
- Squeeze before you sneeze

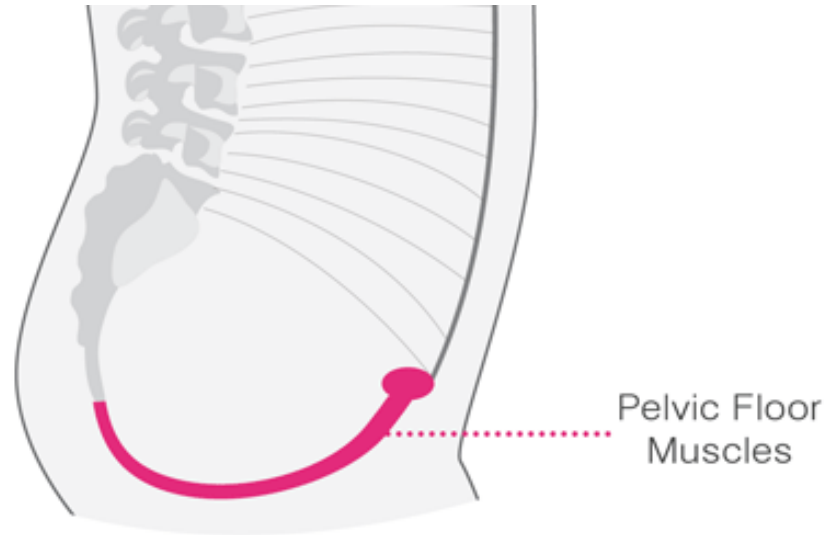
Lifestyle Tips for a Better Bowel

- Drink water
- Eat 25-35 grams of fiber per day
- Have a warm drink in the morning
- Sit on the toilet at a routine time, best 15-20 minutes after a meal
- Place a stool under your feet and lean forward on your elbows
- Relax and take slow, full breathes
- Refrain from straining
- Don't avoid the urge to go

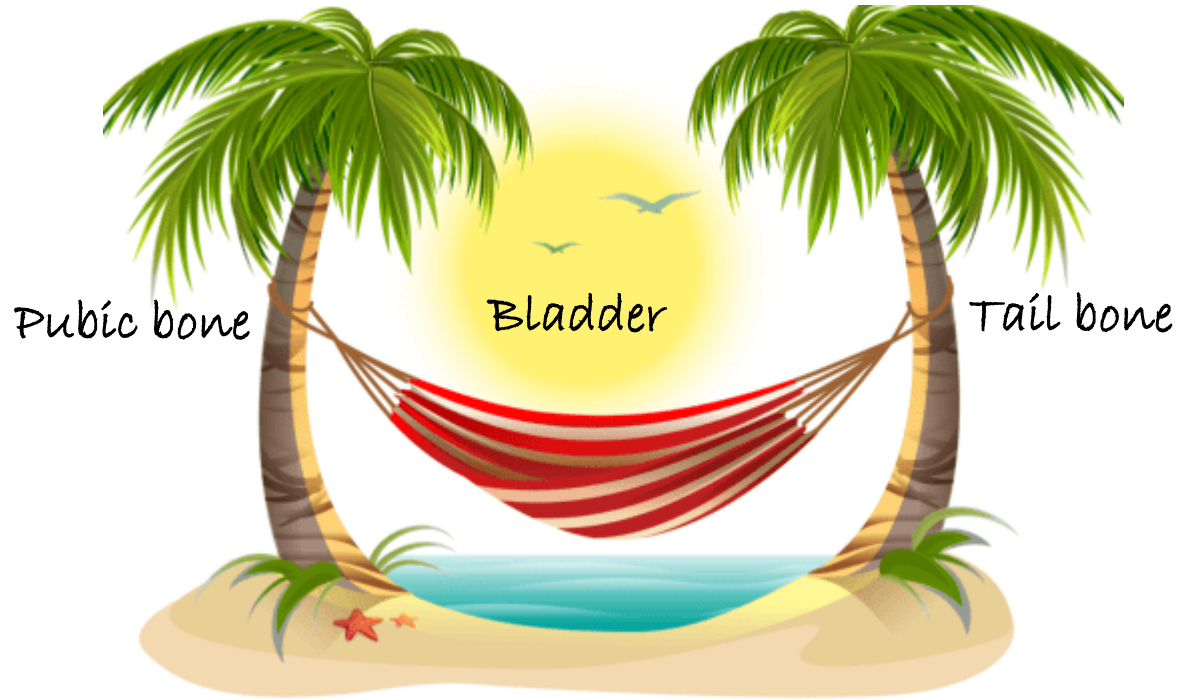
Finding Your Pelvis



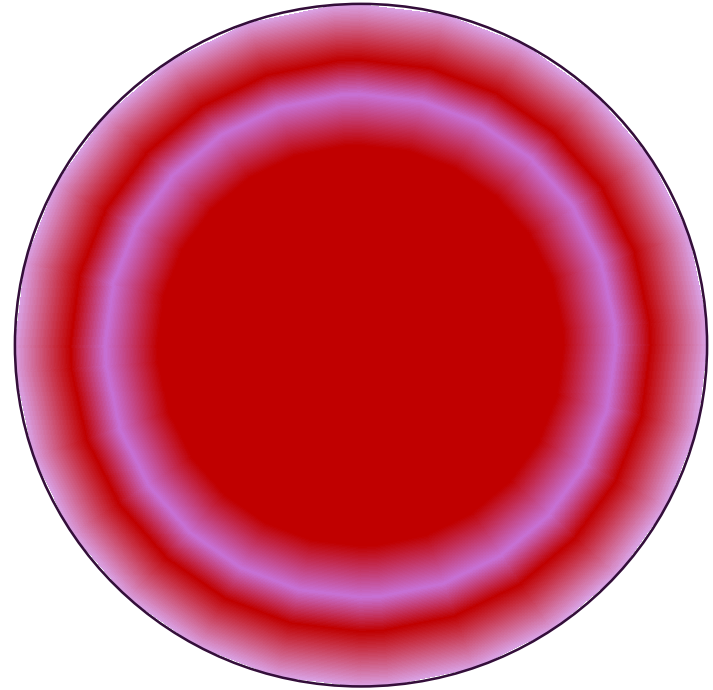
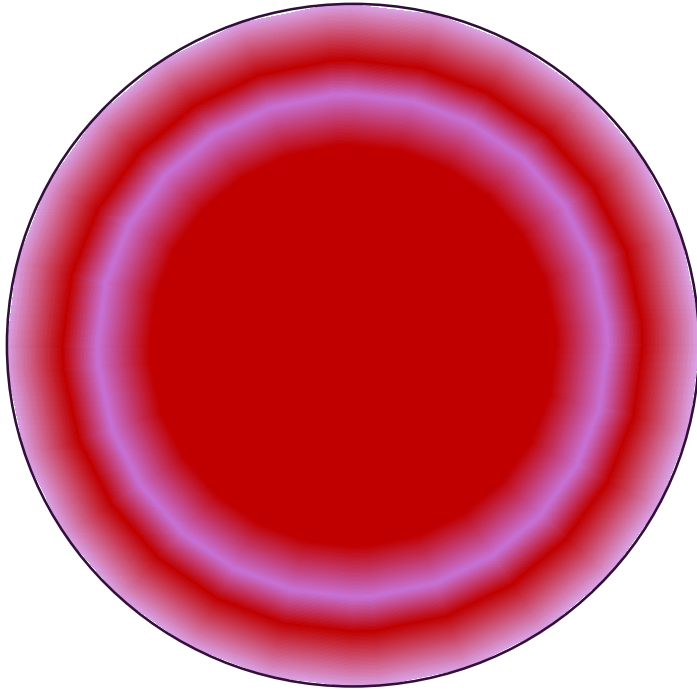
Pelvic Floor Muscle (Kegel)



Pelvic Floor Muscle Hammock



Pelvic Floor Squeezing Closed

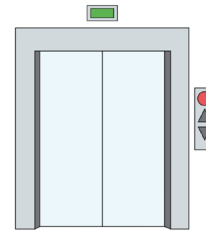


Pelvic Floor Imagery

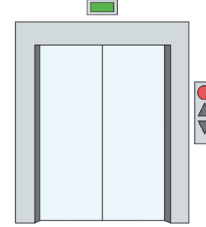


Pelvic Floor Lift

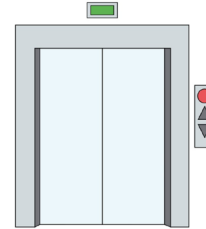
4th Floor



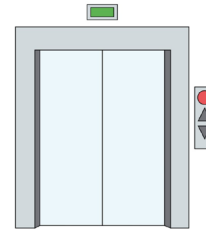
3rd Floor



2nd Floor



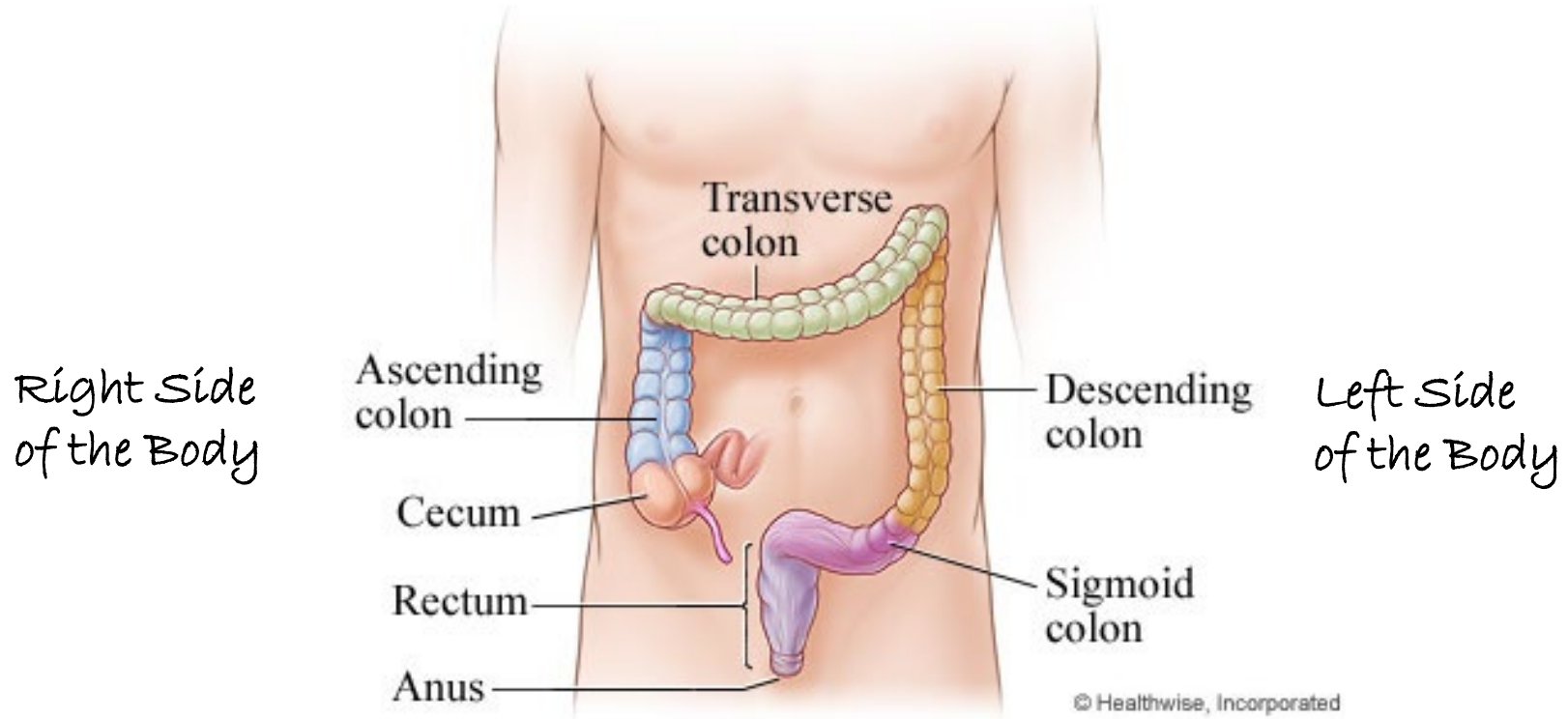
1st Floor



Pelvic Floor with Movement



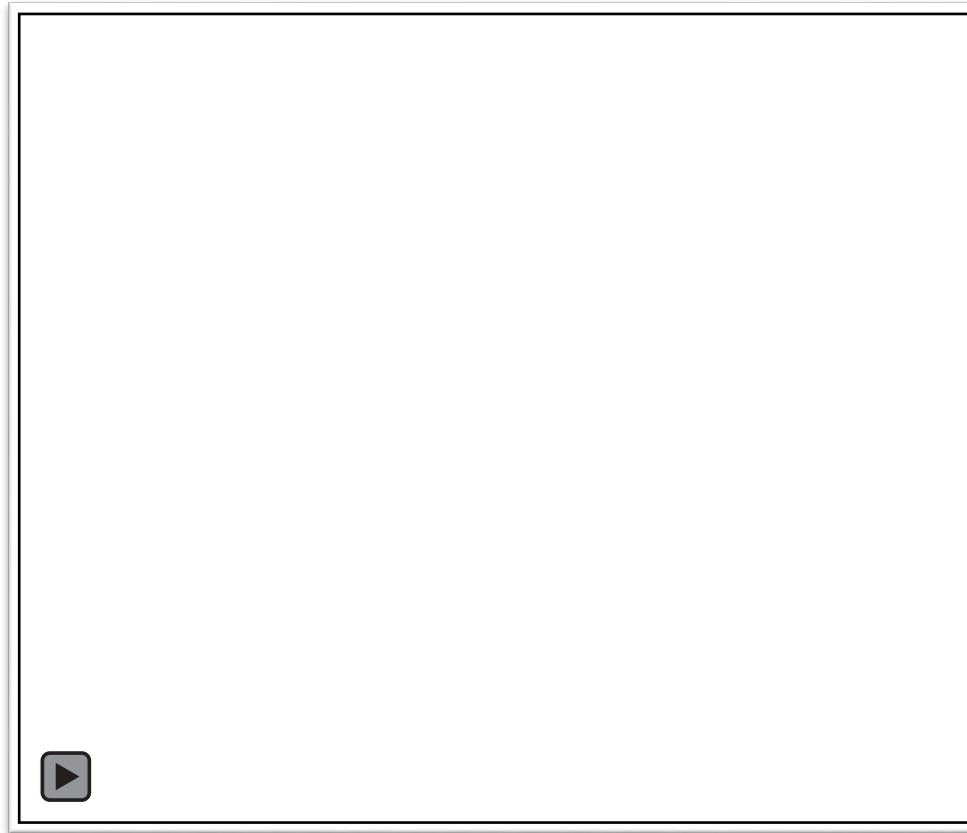
Abdominal Massage



Constipation Yoga

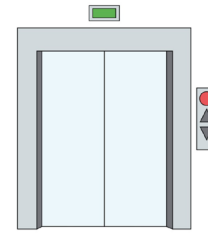


4-7-8 Breathing

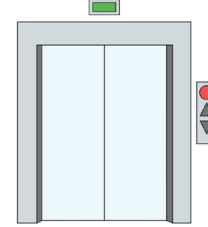


Pelvic Floor Drop

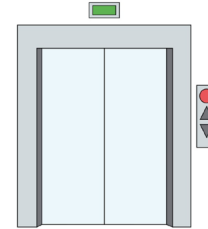
3rd Floor



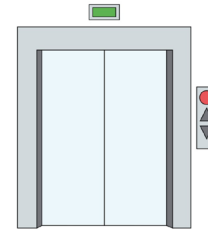
2nd Floor



1st Floor



Basement



Meditations For Pelvic Health By Nari Clemons

Toilet Track

10-minute toilet sitting activity

- 1) 10 deep sipping inhales, complete sigh exhales
- 2) 10 full breaths holding big hard belly, 10 pants, exhale fully
- 3) 10 normal breaths

Urge present, gently bear down for 5 count with big hard belly no more than 1x every 1-2 minutes



Questions?