“Don’t make me laugh: comedy bursts the continence taboo”

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ou are a nurse, you know what a pelvic floor is, and you know about pelvic floor exercises. If you are a woman, you will faithfully do them every single time you hear the words “pelvic floor” – about twice a year. If you are a man (and not a urology specialist), you’ve probably never done a pelvic floor exercise in your life. One in three women aged 35-55 years has stress incontinence, so they wet themselves a little when they cough, sneeze or laugh. Adherence to pelvic floor exercises is poor – partly because patients are not sure what to do, partly because progress is slow, and partly because they simply forget. Pelvic floor muscles are like any other – they will strengthen with training and lose power with disuse. Doing pelvic floor exercises three times a day for three months will improve most cases of simple stress incontinence in both men and women. And the happy side-effect is that a strong pelvic floor enhances sexual function. Poor bladder control has public health implications. Heart disease is the biggest killer in the UK. Have you ever wondered how many patients on your coronary ward weren’t active because they once wet themselves a little when they ran for a bus? A third of people with continence problems also have clinical depression. If you work in mental health and are encouraging exercise as part of a patient’s treatment, does your assessment include asking about bladder control? What would you say if the patient admitted to being a bit “leaky”? How many people are on your orthopaedic ward because of impaired mobility and a sense of urgency, causes hip fractures – is treating overactive bladder part of your practice? What about that patient you can’t discharge because of toilet issues? How many people are moving into residential care solely for continence management? We don’t know because no one measures it. Would your nursing experience change if your patients did their pelvic floor exercises every time they brushed their teeth? If the exercises were taught with sex education in schools, and reinforced at every practice nurse encounter or admission onto a ward, fewer people would be relying on pads in their old age. Stress incontinence is debilitating and interferes with all areas of life. People make jokes to disguise how relentless and wearing it is. “Oh, I laughed until the tears ran down my leg,” led to my mixing my hobby of stand-up comedy with continence advice. Giving information in a social setting and making it funny bursts the taboo. I encourage people to do their pelvic floor exercises with Twitter – @gussiegrips – “when I tweet, you twitch your twinkle”. The feedback is encouraging. I am presenting Gusset Grippers at the Edinburgh Fringe Festival (shameless plug: 1–25 August, 12pm, at the Newsroom, free, non-ticketed) and will gather data from the audience for a study. Meanwhile, please just do your exercises. I mean YOU. Elaine Miller is a physiotherapist, comedian and recovered incontinent. See www.gussetgrippers.weebly.com

Eileen Shepherd is deputy practice editor of Nursing Times. eileen.shepherd@emap.com Twitter @EileenShepherd. Don’t miss the practice blog, go to nursingtimes.net/practiceblog