

Urinary problems immediately after childbirth

This leaflet gives you information, advice and exercises if you have been experiencing urinary (peeing) problems since having your baby. Please ring 0118 322 7811 or 7812 to speak to a pelvic health / maternity physiotherapist at the Royal Berkshire Hospital.

Urinary problems following childbirth

It is very common to experience some form of urinary problems immediately after your baby's delivery, especially if you had a difficult birth with forceps/ventouse, or had stitches due to a cut/tear, or a big baby.

You may feel numb if you had a spinal or epidural for pain relief during birth, and this can also make you feel like you have less sensation or control of your bladder.

Common symptoms:

- Losing a large amount of urine (pee) the first time you get up after lying down for a long time or after catheter removal.
- Increased urge to pass urine.
- Decreased sensation of full bladder.
- Urge incontinence (leaking on the way to the toilet).
- Stress incontinence (leaking when you cough, laugh, sneeze, lift etc).
- Passive incontinence (leaking without realizing you're doing it).
- Difficulty passing urine (urine only trickling out or not passing urine at all).
- Needing to stand up to pass urine.

Why does it happen?

- During pregnancy and childbirth your pelvic floor muscles become weakened and damaged, and this can lead to difficulty holding urine in.
- The nerves and tissue around the vagina, labia and urethra (the tube where urine comes out) can also be bruised and swollen, sometimes leading to decreased sensation.
- An epidural (spinal anaesthetic) can also take time to completely wear off and so you may not feel aware that your bladder is filling up. Usually you will have a urinary catheter (tube to collect urine) in your bladder until you have regained sensation in your pelvic floor area.
- If you had a problem passing urine during labour and ended up with a very full bladder, this can sometimes lead to decreased sensation.

What can I do to help myself?

- If you have any pain or swelling, ice helps to reduce this. Use an ice pack wrapped in a towel and place it on your perineum (the area between your vagina and back passage).
- Take your painkillers regularly.
- If you have difficulty passing urine, turn the tap on and pour water on the area.
- You may be asked to measure how much urine you have passed by your midwife.
- Make sure you are **emptying your bladder fully** when you go to the toilet.
- Always make sure you **sit down properly** on the toilet – do not ‘hover’ over the seat.
- Make sure your **feet are on the floor** – if the toilet is too high, put a footstool underneath your feet.
- Rest your hands on your knees.
- Relax your abdomen and breathe into your lower tummy.

Then try these techniques:

Double-voiding:

When you have finished urinating:

- Rock backwards and forwards or side to side.
- Stand up and ‘jiggle around’ or walk around the bathroom for a few seconds.
- Now **sit down and try to pass urine again.**

Bladder percussion/tapping:

- Use your fingers to tap firmly over your bladder (just above your pubic bone). This can help the bladder muscle to contract and allow more urine to flow.

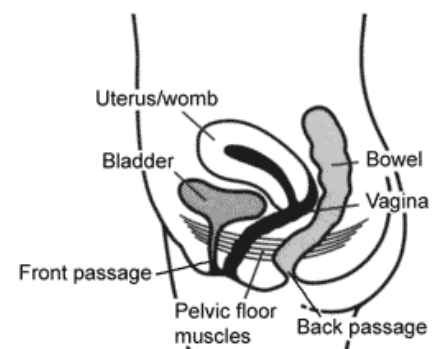
Stimulation

- Massage your lower abdomen and apply gentle pressure there.
- Massage your inner thighs.
- Pull on your pubic hair.

Go to the toilet regularly. You may find that you are holding urine because you are feeding your baby, or waiting for your partner to arrive. Please ask for help if you want to go to the toilet.

Exercises to help with continence – pelvic floor muscles

The pelvic floor muscles are the group of muscles that go from your pubic bone at the front to your coccyx (tailbone) at the back and act as a ‘sling’ or ‘hammock’ to support your pelvic organs and help you stay in control of when you pass urine or open your bowels (continence). Exercising these muscles helps you to gain better control of your bladder.



When should I start pelvic floor muscle exercises?

It is very normal for your pelvic floor muscles to feel weak just after giving birth, so start the exercises as soon as your catheter is out (if you have had one) and you have passed urine for the first time. If you do not have the sensation to pass urine, wait until you do before starting the exercises.

It is perfectly safe to begin these exercises straight away. If you don't know where your pelvic floor is, you can find it by imagining you are going to the toilet and are trying to stop yourself from peeing. The muscles you use to do this are your pelvic floor muscles.

You must do both fast and slow exercises to make your pelvic floor muscles stronger. It is important to learn to do the exercises in the right way and to check from time to time that you are still doing them properly.

What exercises do I need to do?

Slow exercises:

- You should sit comfortably with your knees slightly apart.
- Squeeze around your back passage as if you are trying not to pass wind, your vaginal muscles as if trying to hold in a tampon, and the muscles around your urethra, as if you are trying not to pass urine. You should not be using the muscles in your legs, abdomen or buttock cheeks.
- Once you can do this, squeeze these muscles as tight as you can, and hold for as long as you can, up to 10 seconds. You may not be able to hold it for more than 2-3 seconds at first.
- You should also be aware of the skin around the back passage tightening and being pulled up and away from the chair. Repeat this as often as you can, up to ten times, but have a rest in between each one for 4-5 seconds.

Fast exercises:

- It is also important to work the pelvic floor muscles to react quickly to stop you leaking when you cough or sneeze. Therefore, practice tightening your pelvic floor quickly and then relax.
- Fast exercises are done in the same way as slow exercises but when you squeeze the muscles, let go immediately so that you only feel a very quick lift in your pelvic floor. You should repeat these exercises as many times as possible, up to 10 times.

You should do both the fast and slow exercises at least 4-5 times at frequent intervals during the day. Do not do so many exercises that the muscles ache! Your muscles will improve and strengthen with time and exercise.

Both the above pelvic floor exercises can be done in any position and at any time. It helps to associate these exercises with activities you do regularly every day, e.g. feeding the baby, boiling the kettle, watching TV, waiting at traffic lights, waiting for the bus or in a supermarket queue.

Try using the NHS Squeezy app to help remind you to do the exercises. This can be downloaded from Play Store for Android devices or the App Store for Apple devices.

Usually any initial problems with passing urine settle down within a few days.

However, you must continue to do your pelvic floor exercises several times a day until you can



comfortably achieve 10 consecutive 10-second holds and 10 fast contractions. This will help prevent future problems with leaking urine. You will then need to keep up with the exercises once or twice per day to maintain the strength of the muscles.

Further resources and useful websites

1. Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) <https://thepogp.co.uk>
2. Chartered Society of Physiotherapy (CSP) www.csp.org.uk

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

J Churches, Pelvic Health and Maternity Physiotherapist, August 2020

Reviewed: December 2022

Next review due: December 2024