

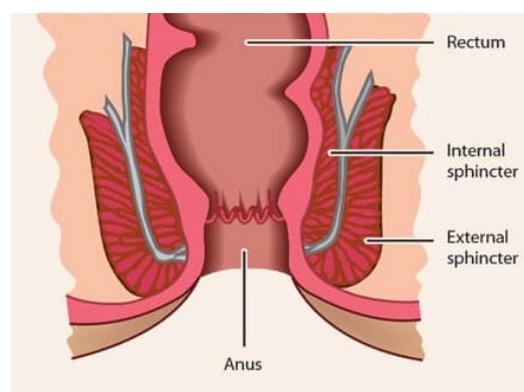
Anal sphincter exercises to help with bowel control

This leaflet is for people who are having problems with bowel control. If you have any questions or concerns, please speak to your clinical nurse specialist.

How the anus works

There are two rings of muscles in the anal canal that form the anus or anal canal (back passage); the internal anal sphincter and external anal sphincter. Either or both can become weak, due to childbirth, constipation and straining to have your bowels open, surgery or general wear and tear. Sometimes, there is no obvious reason why these muscles become weaker.

- **Internal anal sphincter** is the inner ring of smooth muscle; it is a muscle that works automatically (involuntary); you do not have any conscious control over this muscle. It is closed most of the time, except when you are actually having a poo.
- **External anal sphincter** is the outer ring of muscle and is what's known as 'striated' muscle. This muscle is under voluntary control (i.e. you can squeeze this to close more firmly, when you have looser poo or wind, as required) and it is a muscle that can be exercised to build up strength and give more support. The external sphincter muscle can be strengthened through regular coordinated exercises, and this in turn will aid control of wind and stool and improve leakage of poo.



How do these sphincter muscles work?

When stool (poo) enters the rectum, the **internal anal sphincter** relaxes to allow the stool to enter the top part of the anal canal. In this area of the canal there are very sensitive nerves that are able to differentiate between faeces (poo) and flatus (wind). If it is not convenient to go the toilet or to voluntarily allow any wind to pass, the **external anal sphincter** will automatically squeeze to stop this. The poo will then move back into the rectum until it is convenient for you to go to the toilet. In addition, you also have the ability to voluntarily control the squeeze yourself.

How can exercises help?

Exercises can strengthen the muscles enabling you to improve bowel control and quality of life. Just like any other muscle in the body, the more you use them the stronger they will become.

Learning to do the exercises

- It is important to carry out the exercises correctly and for your biofeedback nurse / physiotherapist to check them from time to time.
- Sit in a comfortable position on a firm chair (such as a dining chair).
- Imagine you are trying to stop any wind from coming out of your anus (bottom).
- Squeeze and 'lift' / pull up the muscle as tightly as you can – you should feel this.
- As you squeeze your abdomen (tummy), buttocks or legs should **not** move, and you should be aware of the skin around your anus (back passage) tightening and 'lifting' off the chair.
- It is important not to hold your breath while you squeeze ('strength squeezes' use the 'fast twitch muscle' group).
- Now imagine the sphincter muscle is a lift and you want this lift to go up to the 4th floor.
- Squeezing tightly may only get this lift to the 2nd floor. However, if you squeeze more gently, you can imagine going through the series of floors (i.e. 1st, then 2nd, 3rd and finally 4th).
- Feel how much longer you can hold this squeeze ('longer squeezes' use the 'slow twitch muscle' group).

Practising your exercises

- **Strength:** slowly squeeze the muscle and lift (pull up) as tightly as you can and hold for 5 seconds, then relax for 10 seconds between each squeeze. Repeat this 5 times. It is important that you do not squeeze your buttocks, legs or tummy at the same time. You should isolate the squeeze to the anal muscle only.
- **Endurance:** gently squeeze and lift (pull up) the muscles to about half way (like a lift to the 2nd floor). Hold the squeeze for as long as you can; try and aim for 30 seconds. Relax for 10 seconds. Repeat this 5 times.
- **Quick squeezes:** squeeze and lift (pull up) the muscles as quickly and as tightly as you can, then relax. Repeat this exercise... squeeze / relax, squeeze / relax until you feel the muscles becoming tired.

If you have a problem with urgency and need to rush to the toilet, try not to panic, remember the **endurance** squeeze will help you hold for longer.

How do I know if I am doing the exercises correctly?

To check you are doing the exercises correctly some patients find it helpful to check; when you are in the bath try placing the tip of your finger gently over the anus (bottom) – if you can feel the anal opening squeeze or 'lift' from your finger when you squeeze, you are doing the exercises correctly.

How long and how often should I be doing the exercises?

- **Aim to do the exercises 3-6 times every day.**
- You will need to persevere with these exercises and continue to practice them every day. Be patient – it may take several months to begin to see an improvement.

- Get into a habit of doing the exercises regularly, while you are doing other things.
- It takes time and commitment to improve the strength of your anal sphincter muscles but it can be accomplished.
- Even when your symptoms have improved, don't forget to do them a few times a day to ensure your problems do not return.

Is there anything else which could help?

- There may be some tests and treatments that could help:
 - Anorectal physiology: to test how well the muscles and nerves in your anal canal are functioning.
 - Endoanal ultrasound: to identify any defects or damage to the sphincter muscles.
- Medication: may be recommended to improve the consistency of your stool (poo).
- Biofeedback training may improve co-ordination and function of your anal muscles.
- Changes to your diet may help. We may recommend that you seek advice either from a dietitian or your GP.
- Reducing stress and modifying an irregular lifestyle. This may help as in some cases lifestyle may be a trigger.
- Watching your weight as extra weight can put strain on the muscles.
- Surgery. You may be referred to one of our team for assessment if this is appropriate.

Remember be patient; it will take time to see positive results. Keep practising the exercises frequently and regularly.

Clinical Admin Team (CAT 3)

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