# OAB, Pregnancy and Incontinence

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## Overactive Bladder and Pregnancy

If you have an overactive bladder and consider becoming pregnant, you should be aware that this condition can become aggravated, and other types of incontinence may also develop. Luckily, there are ways to manage them successfully throughout the pregnancy.

### Pregnancy and Incontinence

Many women experience some involuntary loss of urine while pregnant. In some cases, it is mild and goes away quickly, while in other cases it can be severe. The likelihood of having incontinence depends on certain factors - for example, advanced age, being overweight or obese. Some women will continue to have these problems after pregnancy as well unless you take extra care of your bladder.

Stress incontinence is the most common form of incontinence in pregnant women; it happens because there is additional pressure on the bladder and the muscles of the bladder are not strong enough to hold the urine.

An overactive bladder also tends to aggravate during pregnancy because the bladder has spasms, and the muscles don’t work properly as well when the bladder has strong, uncontrollable contractions. There is more stress and pressure on the bladder‘s muscles that help hold in the urine (the sphincter) because the uterus is expanded and heavier during pregnancy. Involuntary loss of urine can happen when there is even more pressure in the pelvic area- for example when the woman sneezes or coughs. The pelvic floor may also become weakened during and after pregnancy because the nerves that control the bladder may be affected, and if the doctor performs an episiotomy (when some pelvic floor muscles are cut to allow the baby to be delivered more easily).

### Management

Some special techniques can be quite effective when used regularly. Like any other muscles from your body, these exercises are designed to keep your bladder and pelvic muscles in shape and strong.

A healthcare professional can teach you how to train your bladder – for example, you will learn how to go to the washroom at specific times (i.e. once an hour) and gradually increase that time (i.e., once every one hour and a half). The goal is to train your bladder and have 3-4 hours between visiting the bathroom again.

Time voiding is also important to practice - you will have to take notes and record the exact time when you go to the washroom and urinate, as well as the time when you experience urinary incontinence. This way you will be able to see the patterns and go to the washroom around those times when are more likely to have a loss of urine.

Kegel exercises are great for everyone, and even more beneficial for you. They keep the pelvic floor muscles tight and strong and therefore help the function of the urinary system. For optimal results, keep your abdomen tight and the muscles of the buttocks relaxed. Tighten the muscles of the pelvic floor, hold for 10 seconds and relax for

10 seconds. Repeat Kegel exercises 10 times, three times a day.

Your doctor may recommend pessaries, which are devices that keep your pelvic muscles strong and block the urethra from leaking urine. Some medications can be added to the treatment to better control the muscle spasms and relax the overactive bladder.