

Bridge

2020
SPRING

VOLUME 14 | ISSUE # 3

**Live
confidently
with
incontinence**

4 lessons from
Anja Christoffersen

Toilet
map for
Aussie
road trips

Free app

Prostate
cancer
during a
pandemic

Test your
bowel
health



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Foundation
of Australia

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REFERENCES

 Email bridge@contenance.org.au for a list of references for any articles appearing in *Bridge*.

CORRECTION

 Featured in last edition, Stephanie Thompson's website is bravemumma.com

National Contenance Helpline 1800 33 00 66

A free service staffed by Nurse Contenance Specialists who can provide information, referrals and resources 8am – 8pm AEST weekdays. The Foundation, established in 1989, is a not-for-profit organisation.

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Never worry about finding a toilet again with the free National Public Toilet Map app.



Membership

Become an individual, student or professional member of the Contenance Foundation of Australia and receive many benefits including discounted registration to the annual National Conference on Incontinence, free publications and timely information about events and education courses.

 Email membership@contenance.org.au or phone **03 8692 8400**.

Cover image: Shari Mae Photography

Note from the CEO

I hope this edition finds you safe and well – maybe even enjoying the spring sunshine. With the challenges of the coronavirus (COVID-19) pandemic, this year hasn't been easy. Please know that there is support and help available. You can phone us on 1800 33 00 66 to speak with our experienced Nurse Continence Specialists for advice with your bladder and bowel health.

This edition features a familiar face in author and model Anja Christoffersen. It has been two years since Bridge first spoke with Anja, so catch up on her journey on page six. She

shares four important lessons from her incontinence and as always, radiates positivity and strength.

You will also meet Brian Pegg who is encouraging other men to check in with their health. Brian was rushed in for urgent prostate cancer surgery in April, in the middle of Victoria's first wave of COVID-19. He tells us about his unexpected incontinence and how he found out that he does in fact have a pelvic floor!

You can always get in touch by  emailing bridge@continence.org.au

Best wishes,



Rowan Cockerell
CEO, Continence Foundation of Australia

5 minutes with Dr Eric Chung



Associate Professor Eric Chung is a urological surgeon in Queensland and an exciting speaker, mentor and research author. His passion is functional reconstructive urology (surgery to repair and restore various damaged organ systems).

► What led you into the area of urology?

Urology covers many conditions, from cancer to long-term diseases of the reproductive and urinary system. Simply, it deals with the plumbing system in the human body.

As a urological surgeon, it is very rewarding to help patients. Helping urinary problems is about more than just bladder emptying and staying dry. It improves people's quality of life across areas like social interaction, physical lifestyle, relationships, mental wellbeing, finance and employment.

I remember how a simple male sling surgery completely changed the life of an 80-year-old man. He had suffered from urinary incontinence for over 10 years but was told he was "too old" for surgery. This elderly man had spent a lot of money each month on continence pads and stopped being as socially and physically active due to fear of wetting in public and in front of loved ones.

► Can men have stress urinary incontinence? What is it?

Yes, male stress incontinence is mostly related to prostate problems. This can be due to prostate surgery (enlarged prostate or prostate cancer), radiation or pelvic trauma. Male stress incontinence is the

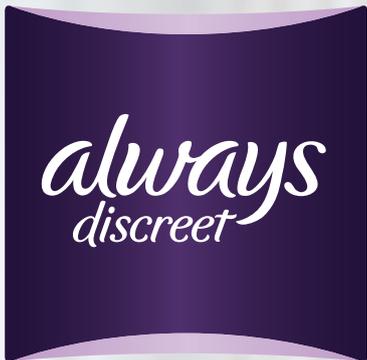
loss of urinary control due to the urinary sphincter and pelvic floor not working as well as they should.

The urinary sphincter in a man sits below the prostate, as part of the pelvic floor muscles. It is close to important nerves for sexual function. This is why there are strong links between male stress incontinence and male sexual problems including poor libido, erectile dysfunction, the loss of urine during ejaculation and lack of orgasm.

► How can incontinence and male sexual problems have an impact on men's mental health?

There is more to male incontinence than just the symptom of urine loss. Given the link between incontinence and male sexual problems, it affects how you see yourself and interact with others in life. Both conditions can make a confident guy feel like an embarrassed, bedwetting kid. Healthy, active adults can suddenly feel inadequate, with fears of intimate relationships and a loss of sexual confidence.

New technology and knowledge has changed the way we look at and treat incontinence these days. There is help available - start the conversation with your doctor or the National Continence Helpline 1800 33 00 66.



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*Source: Euromonitor International Limited, based on retail volume and value sales at Retail Sales Price of Procter & Gamble. Feminine Protection included the sanitary protection category which is the combination of tampons, sanitary pads, and pantyliners. **Applicable for Always Discreet Normal, Long and Long Plus, Maxi Night.





Take the quiz

How is your bowel health?

There are some simple things you can look for to check your bowel habits and function.

If you think you may need help with your bowel health, you're not alone. One in 20 Australians have a bowel control problem. **You can phone the National Continence Helpline on 1800 33 00 66 or talk to your doctor for more information and advice.**

What are bowel motions?

Bowel motions are also known as faeces, stools or poo.

Being regular

Bowel habits can be very individual (different from person to person).

Q. How often do you think it's normal to poo?

ONCE A DAY

TWICE A DAY

THREE TIMES A DAY

EVERY SECOND DAY

THREE TIMES A WEEK

Answer: All of these are normal! It could be anywhere from 1 – 3 times a day to 3 times a week.

Signs of a healthy bowel

**YOU DON'T
NEED
TO RUSH**



You can hold on after you feel the urge, until you reach the toilet



**YOUR TOILET
EXPERIENCE IS
EASY AND
WITHOUT PAIN**



You don't need to strain on the toilet (force or push very hard) and your poo is soft and easy to pass



**YOU DON'T
HAVE TO
WAIT LONG**



You aren't spending a long time on the toilet after you feel the urge to go



**YOU
COMPLETELY
EMPTY YOUR
BOWEL**



You don't have to return to the toilet soon after





“ Incontinence: my greatest teacher

Since speaking with Bridge in 2018, model and advocate **Anja Christoffersen** has made it her mission to show that people with incontinence can live happily and confidently. She's now 22 and her story has gone from Brisbane to the world, in magazines and medical conferences. She shares what she's learnt from incontinence and this experience:

Incontinence is many things. However, it is rarely thought of in a positive light. For me, it has been one of my greatest teachers. I was born with a condition (VACTERL - anorectal malformation) that has left me with life-long faecal incontinence - a feat few have faced.

At first, I was unsure about speaking publicly about my incontinence because of stigma, myths and a fear of being open. After taking the leap with the support of the Continence Foundation, I found the openness I was showing was attractive. It led to more powerful connections. People approached me to open up about the private challenges they were facing, whether incontinence or something else.

The more I connected with others around the world who had incontinence, the more I learnt our experiences were similar.

I started keeping track of the lessons my incontinence taught me. I want to share them because these reminders have been my saving grace. They helped me change from someone who was ashamed to be incontinent, to someone who is proud.

1 YOU ARE NOT ALONE

We usually like to keep incontinence private. No one wants to air their dirty laundry in public - even less when this laundry is soiled. Because it was not talked about openly, I quickly began to feel like I was the

only person affected by incontinence. This privacy led to isolation, which can show itself in physical ways. For me, it was mostly emotionally and socially. I felt like I was carrying not only the weight of a fear of accidents, but a weight of embarrassment.

That weight and shame was lifted when I realised that other people experience similar things. I finally felt like that part of me could be shared and understood.

It can be assumed that in every full room you walk into, there is at least one other person who has experienced incontinence.

Ask yourself: Would I feel emotionally isolated by incontinence if I knew some of the people I work with experience it too?

2 YOU ARE NOT RESPONSIBLE FOR THE THINGS YOU CANNOT CONTROL

I know this phrase gets thrown around a lot, but it feels very true when applied to incontinence.

I used to feel like it was my fault when I would have an accident. I experienced guilt and frustration for things I missed out on because I was glued to the toilet. I remember missing out on my friends' 18th birthdays because I couldn't get my bowels under control.

When I truly processed that I could not control my accidents and I would never be able to, I realised that sometimes incontinence just is what it is.

Ask yourself: If someone crashed into your car while you were parked, would you blame yourself?

3 INCONTINENCE DOES NOT MAKE YOU UNLOVABLE OR UNDESIRABLE. IT MAKES YOU HUMAN.

Get up, go into the bathroom. Not to the toilet (unless you need to!) but to the mirror. Stand in front of it and speak that point to yourself - out loud - 10 times in a row. Even write it on the mirror. There is no explanation for this. You have to grow to believe it yourself.

Ask yourself: If your friend didn't make it to the bathroom in time would you love them any less?

4 YOU CANNOT EXPECT TO BREAK THE STIGMA AROUND INCONTINENCE IF YOU STILL BELIEVE IN IT

For too long, I would speak with my inner circle of friends about how important it is to stop the stigma about incontinence. I was truly passionate about the cause and could happily speak up for others.

However, I didn't allow myself the same kindness. I still believed incontinence was an embarrassing condition and wouldn't tell anyone about my accidents, unless I really trusted them. These two things didn't match up - if I believed there should not be stigma, then why did I continue to stigmatise myself?

I learnt that before I could even try and stop the stigma, I had to first stop believing it myself. I had to accept myself, accept my incontinence, and then let go of any concerns about "what would people think?!" If someone is cruel enough to make fun of a medical condition, it says more about their character than yours or mine.

Take what speaks to you. You do not need to 'come out of the closet' like I have, but life is too short to spend it feeling horrible about your incontinence.

WHAT IS STIGMA?

Bad or negative beliefs and attitudes about things, including some health conditions. These beliefs are common in society and stop people from getting help.

Head to Anja's website vacterl.com.au for more about her journey and book.

L to R: Anja presenting at a medical conference in Pakistan; smiling with her magazine story; with Greg Ryan at the 2019 National Conference on Incontinence where she presented.



Prostate surgery during a pandemic: Brian's story

Prostate cancer is tough to handle at the best of times. Even more so during the "strange time" of a pandemic, as 71-year-old **Brian Pegg** found out.



Brian had been going to his urologist for years for regular check-ups. His doctor found that Brian had an enlarged (bigger) prostate and a small cancer in the prostate gland. He was told to keep coming for tests but not to worry. Things seemed fine – the doctor even joked that he would "die of something else first."

Then earlier this year, in April, hospital tests showed a second prostate cancer. The cancer was high-risk and Brian was called in for urgent surgery for the next week. This was during Victoria's first wave of coronavirus (COVID-19).

Already surprised by the aggressive prostate cancer, he didn't expect urinary incontinence to be a part of his life after the operation.

"I can't fault the nurse. She had a mask so was quite hard to understand. I was told more about pre-operation things. At the end, she said I might get a bit of leakage," Brian said.

“ Unfortunately, the leaking turned into a flood. ”

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The good news about prostate surgery and incontinence

Most men get back bladder control over time and are fully recovered within 6 to 12 months.

Brian's operation went well and was successful in removing the prostate cancer. He said his problems started when it came to take out his catheter (tube placed into the bladder that drains and takes out urine).

"The catheter came out very easily, but the moment it came out I started leaking. I was told it's normal, and I said well, it's not normal for me."

This was Brian's first time experiencing incontinence and it had a huge impact on his life. He

Steve, one of the Nurse Continence Specialists who works at the Helpline.

"He was the only person who actually took time and explained what incontinence is and how it happens. I think the personal touch helps. Booklets are okay to read, but if you actually speak to people it becomes more personal," Brian said.

After his phone call with Steve, Brian noticed a difference within a couple of days. Following the advice meant he was able to stand up out of bed without leaking and had less leakage during the night.

BRIAN'S UPDATE

Now months on from his first phone call with the Helpline, Brian says his leakage is remarkably better. He no longer avoids exercise because of urinary leakage and enjoys walking two to three kilometres per day.

“ I found out later that incontinence is quite common. I didn't even know I had a pelvic floor. I didn't know men did. ”

was using overnight pads and leaking urine every day. He saw a pelvic floor physiotherapist who showed him daily pelvic floor exercises, but it was a steep learning curve.

"I spoke to lots of friends who had a length of time before they went in for surgery and had time to do the exercises."

Brian phoned the National Continence Helpline 1800 33 00 66 for more help. He couldn't get out of bed in the morning without leaking and didn't know what to do. He spoke with

After this positive progress, Brian shared what he's hoping for in the future.

"I'm looking forward to stopping leaking. That's what I want to do so I can go back to being 'normal'. Be able to go out and not leak and have to wear pads."

"In a way it's good that it's happened now because we're all locked down. I'm not going anywhere anyway. You get frustrated, you get annoyed but then you realise there's light at the end of the tunnel."



For information and support on incontinence, phone the free and confidential **National Continence Helpline on 1800 33 00 66.**

Pelvic health with Lori

All about urge incontinence

Have you ever wondered why your bladder gets really excited when you get home and put the keys in the door? Or maybe the sight of running water brings on the strong need to rush to the toilet and unfortunately, sometimes, you don't quite make it?



Lori Forner is a physiotherapist, host of *The Pelvic Health Podcast* and ambassador for *Always Discreet*.

The strong feeling to urinate (wee), where people will often leak before they get to the toilet, is known as **urge urinary incontinence** or **overactive bladder**.

I see just as many women in my clinic with this urgency, as women who leak small amounts of urine with coughing, sneezing and exercise. That type of leakage is called stress urinary incontinence, referred to by some as bladder leakage. Most women experience both types, but for different reasons.

Urge incontinence is often related to 'overactive' nerves that make the bladder contract (squeeze) at times when you are not actually sitting on the toilet.

While there may be other reasons, common toilet habits can become triggers for your brain and the

nerves to overreact. These include going to the toilet "just in case" when your bladder isn't actually full or emptying your bladder in the shower. But, when we rush to try and make it to the toilet, it usually makes it worse...and then we leak.

TREATMENT - WHAT'S INVOLVED

Pelvic floor exercises are often part of a treatment plan. However, teaching our bladder to stay calm by breathing and distracting our minds can help us get to the toilet dry, as well as not have these urges as often. This is called 'bladder training'.

Physiotherapists trained in pelvic floor rehabilitation or other health professionals such as your GP or a Nurse Continence Specialist are ideal at working out the cause and management options for your needs.



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GET SUPPORT Online forum

JOIN OUR NEW ONLINE COMMUNITY AT [continence.org.au](https://www.continence.org.au)

The forum is a place to speak about the issues of bladder and bowel health in a safe and supportive environment. Ask your questions and share your story with others!

TOPICS

- Living with incontinence
- Children and young adults with incontinence
- Supporting friends and family with incontinence
- Catheters

The forum is moderated with some questions answered by staff from the **National Continence Helpline 1800 33 00 66**.

 [continence.org.au/forum](https://www.continence.org.au/forum)



Helpline Q&A

The other end of the phone line:

Meet the National Continence Helpline

What can you expect when you phone the National Continence Helpline on 1800 33 00 66?



Merrill McPhee has been working at the Helpline for over 15 years. She gives information and advice on bladder and bowel health topics: prevention, pregnancy, prolapse, menopause, prostate health, and more.

In June 2020, Merrill was a speaker for our World Continence Week webinars.

Catch up on YouTube by searching the Continence Foundation of Australia channel.



▶ Visit our YouTube channel

▶ **Also available:**

- Eat well and drink smart
- Good toilet habits
- Q&A session on continence

Meet **Merrill**, one of the Nurse Continence Specialists who might answer your call.

▶ **You worked as a midwife before working in continence. What started your interest in continence?**

I worked in the delivery suite for 13 years which I loved as it was so exciting. I moved to Melbourne when I married and worked in an antenatal (before birth) and postnatal (after birth) ward. The incontinence that some women experienced both before and after birth highlighted to me that incontinence was common, but still not normal. The sooner it is managed and treated, the better the outcome for the mother.

Later, I also worked in aged care and found the level of incontinence shocking. I developed a keen interest in managing incontinence and my

co-workers encouraged me to take this interest further and study as a Continence Nurse.

▶ **What has it been like speaking to and helping callers during the COVID-19 pandemic?**

Some people have had issues purchasing continence products, but most have been able to access what they need. Many in the community are isolating and that has been a challenge for them. Often, older individuals are living by themselves. It is a relief to be able to speak with a human being with knowledge to improve their wellbeing.



For confidential information and advice, you can phone the **National Continence Helpline on 1800 33 00 66** (Monday to Friday, 8am to 8pm AEST).

Live from World Continence Week

▶ **Why you need to invest in your pelvic floor**

Annabelle Citroen, Pelvic Health Physiotherapist

Learn about your pelvic floor as Annabelle takes you through a set of pelvic floor muscle exercises and how to do them.



▶ **Activity and your continence**

Sharon Kelly, Pilates and Seated Aerobics Instructor

Participate in this class where Sharon shows easy ways for people with all levels of fitness to be active.



Never worry about finding a toilet again

No matter where you are across Australia, the National Public Toilet Map can help you find public toilets. The app and website are perfect for those long road trips or daily local adventures.

Use the web version of the toilet map to plan ahead from home, or while you're on the road with your smartphone.

You can:

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To find out more about PTNS or find a treatment centre near you,
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*References available on request

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