



Prostate Cancer
Supportive Care

PELVIC FLOOR PHYSIOTHERAPY FOR BLADDER AND BOWEL CONCERNS

Anna Hudon-Kaide, BSc, MHScPT
Registered Physical Therapist



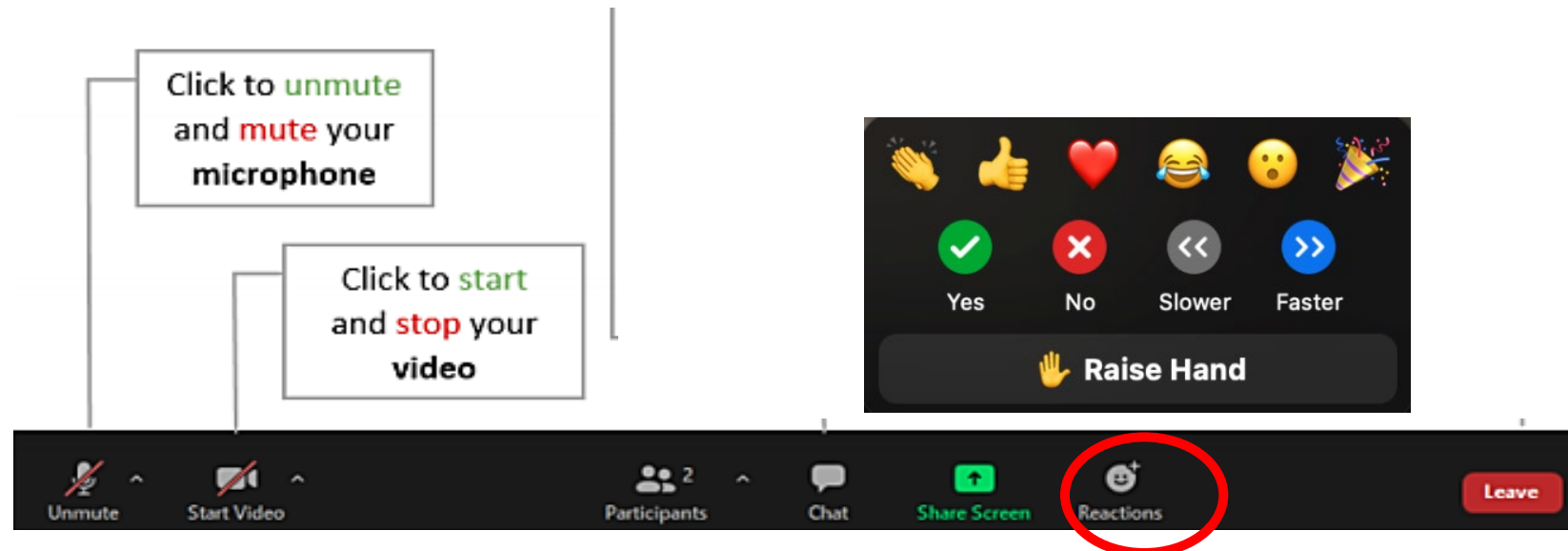
VANCOUVER
PROSTATE CENTRE
A UBC & VGH Centre of Excellence



VIRTUAL HEALTH

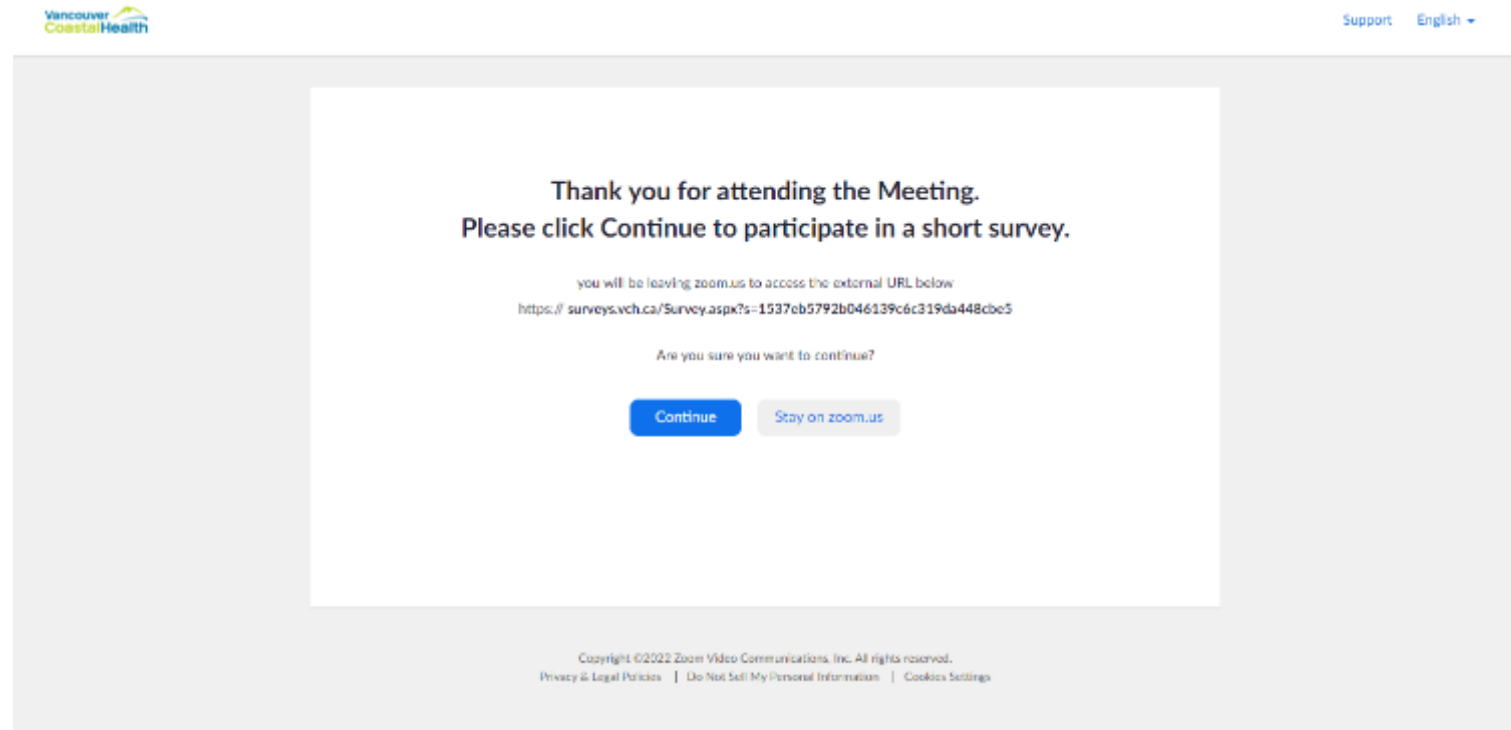
Participants at home,
please:

- Mute your microphone
- Use the 'Raise Hand' function to ask a question



- To ask a question:
1. Click 'Reactions'
 2. Click 'Raise Hand'

HELP US IMPROVE!



Please help us improve our education sessions by completing a feedback survey when you leave the Zoom call today!

FUNDING FOR PROSTATE CANCER SUPPORTIVE CARE PROGRAM

- The PCSC Program is primarily funded by philanthropic donations
- The PCSC Program also appreciates the past support from both government and non-government organizations.

THE PROSTATE CANCER SUPPORTIVE CARE (PCSC) PROGRAM

The program is currently comprised of eight modules:

1. Introduction to Prostate Cancer & Primary Treatment Options
2. Managing the Impact of Prostate Cancer Treatments on Sexual Function and Intimacy
3. Movement & Exercise for Prostate Cancer Patients
4. Recognition & Management of Treatment-Related Side Effects of Androgen Deprivation Therapy (ADT)
- 5. Pelvic Floor Physiotherapy for Bladder and Bowel Concerns**
6. Counselling Services
7. Metastatic Disease Management
8. Nutrition Advice for Prostate Cancer Patients

PCSC WORKSHOPS

- In-person **Couples Intimacy Workshop** delivered by Sexual Health Clinician and Clinical Counsellor
- Virtual **Mindfulness Workshop** delivered by Clinical Counsellor
- Virtual **Female Partners Roundtable** delivered by Sexual Health Clinician
- Virtual Roundtable for **Prostate Cancer Patients <60 Years Old** delivered by Sexual Health Nurse and Clinical Counsellor
- Virtual Roundtable for **Men Who Have Sex with Men (MSM)** by physiotherapists

****All dates can be found on www.pcscprogram.ca ****

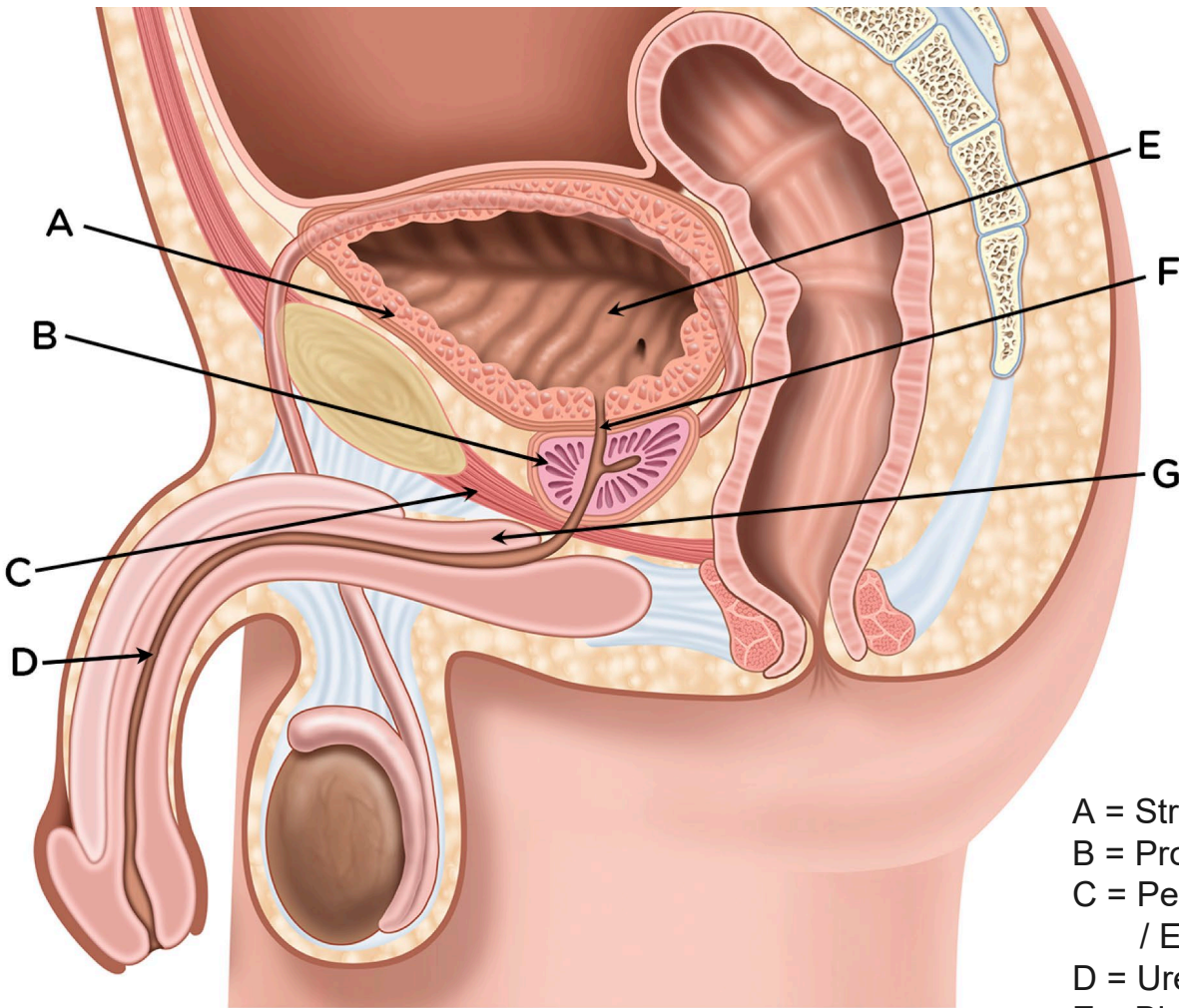
**If you would like to register, please contact PCSC at 604-875-4485
or via email at pcsc@vch.ca**

OVERVIEW

This session will cover the following:

- Bladder control mechanisms
- Bowel control mechanisms
- The effect of radiation (external beam and brachytherapy) on the bladder and bowels
- Prostatectomy and bladder control
- Pelvic floor contractions (Kegels)
- Options for managing urinary incontinence
- Management of incontinence during sexual activity

ANATOMY OF THE URINARY SYSTEM



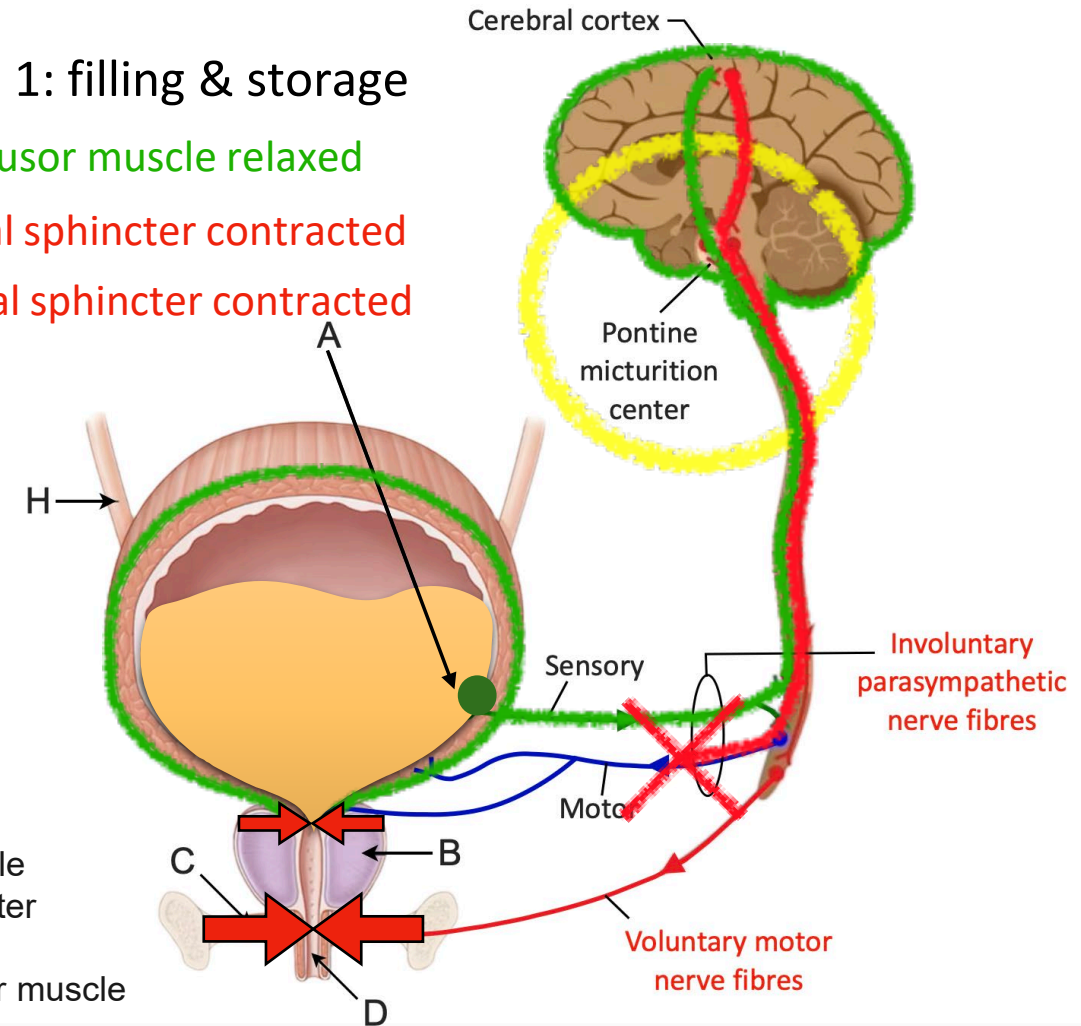
- A = Stretch receptors
- B = Prostate gland
- C = Pelvic floor muscle / External sphincter
- D = Urethra
- E = Bladder/ Detrusor muscle
- F = Internal sphincter
- G = Corpus spongiosum / Erectile Tissue
- H = Ureter

Phase 1: filling & storage

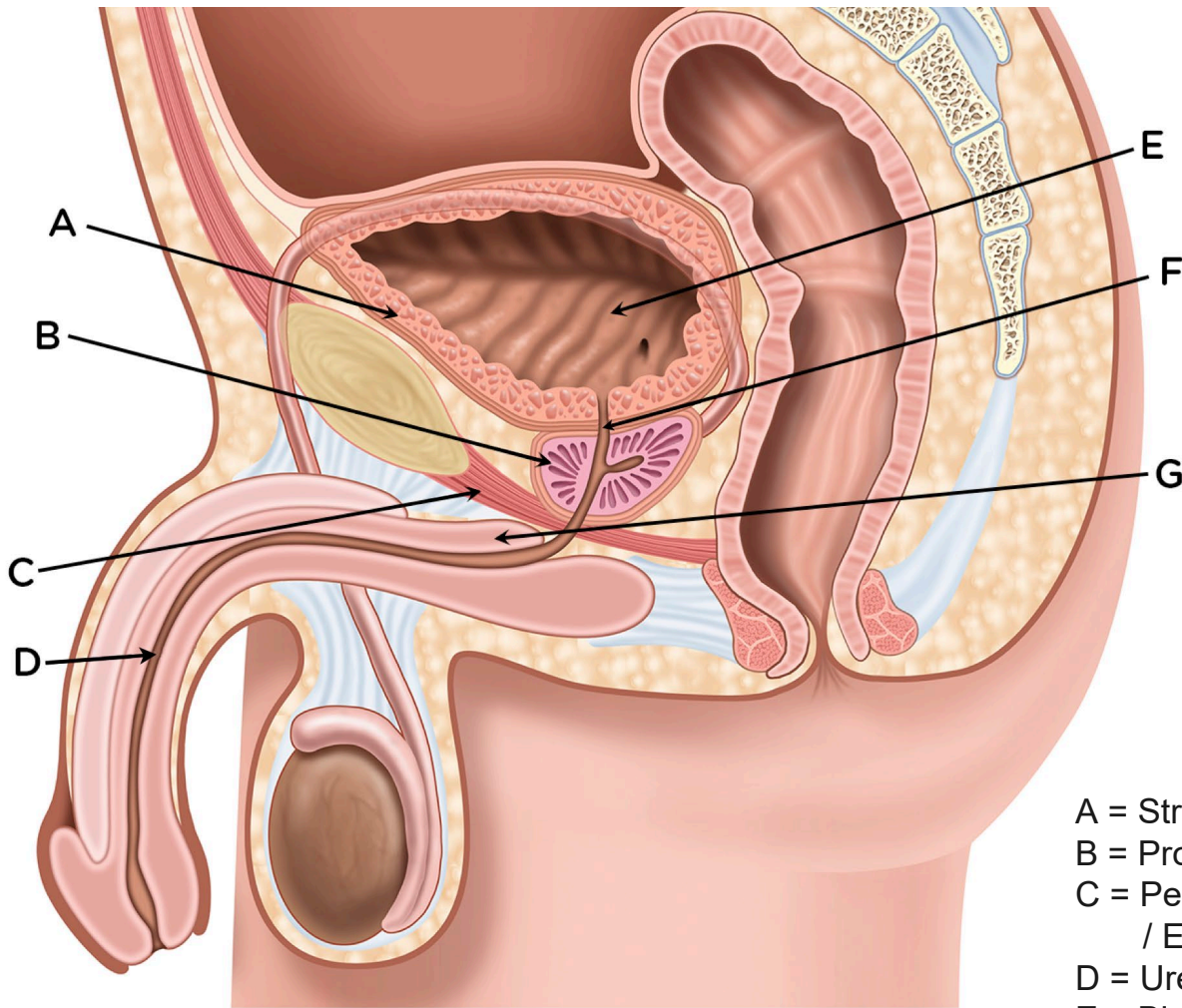
Detrusor muscle relaxed

Internal sphincter contracted

External sphincter contracted



ANATOMY OF THE URINARY SYSTEM



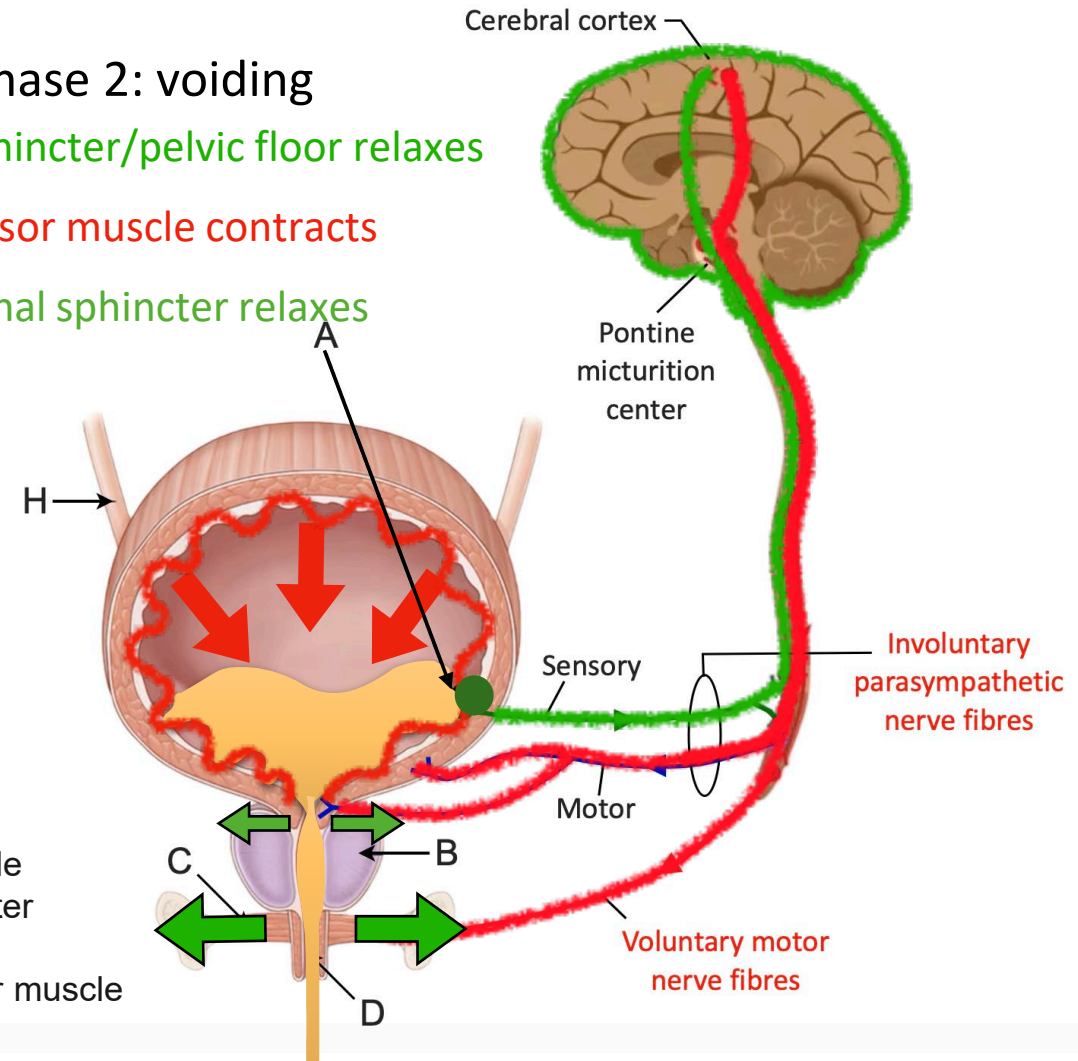
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Phase 2: voiding

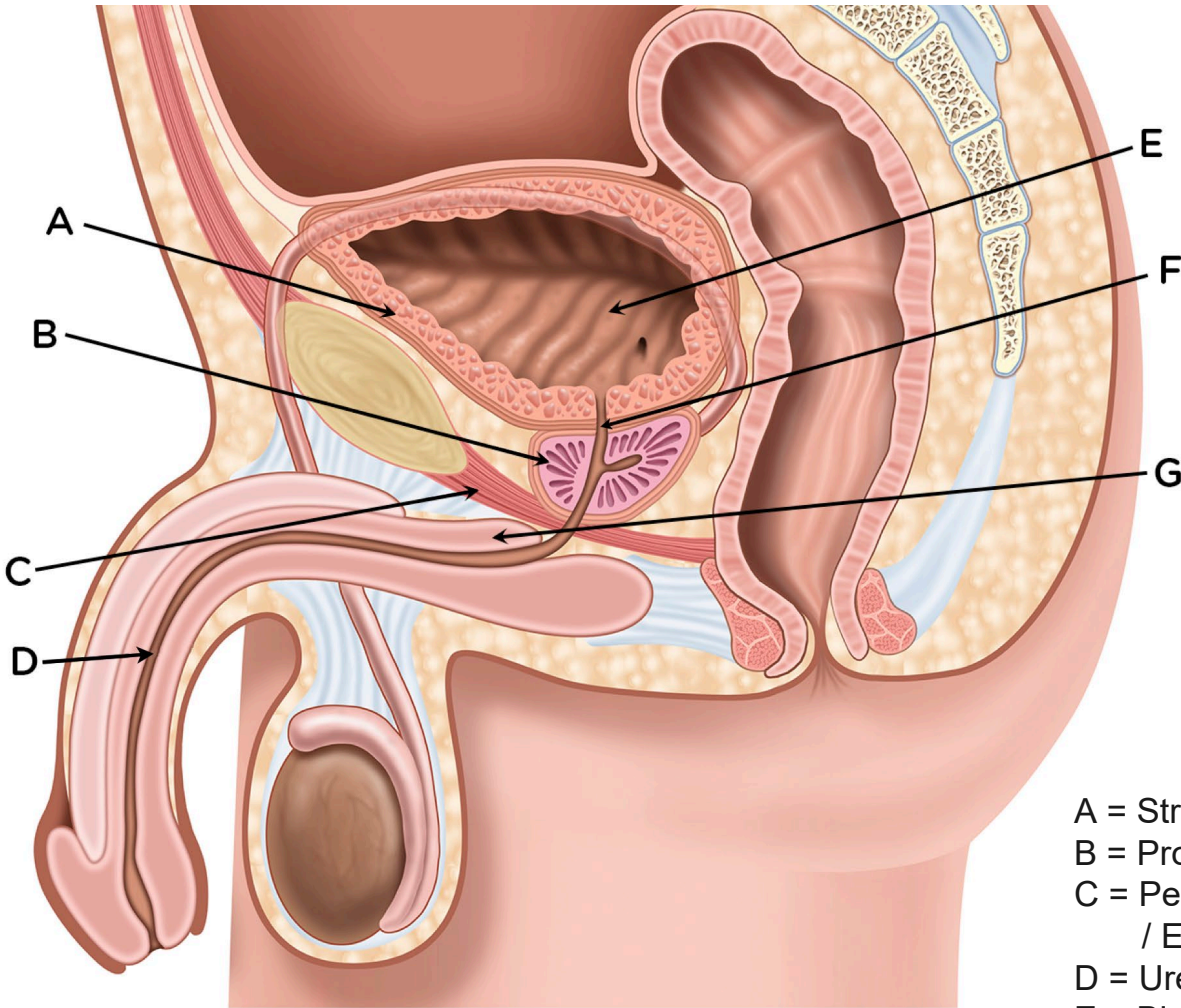
External sphincter/pelvic floor relaxes

Detrusor muscle contracts

Internal sphincter relaxes



ANATOMY OF THE URINARY SYSTEM

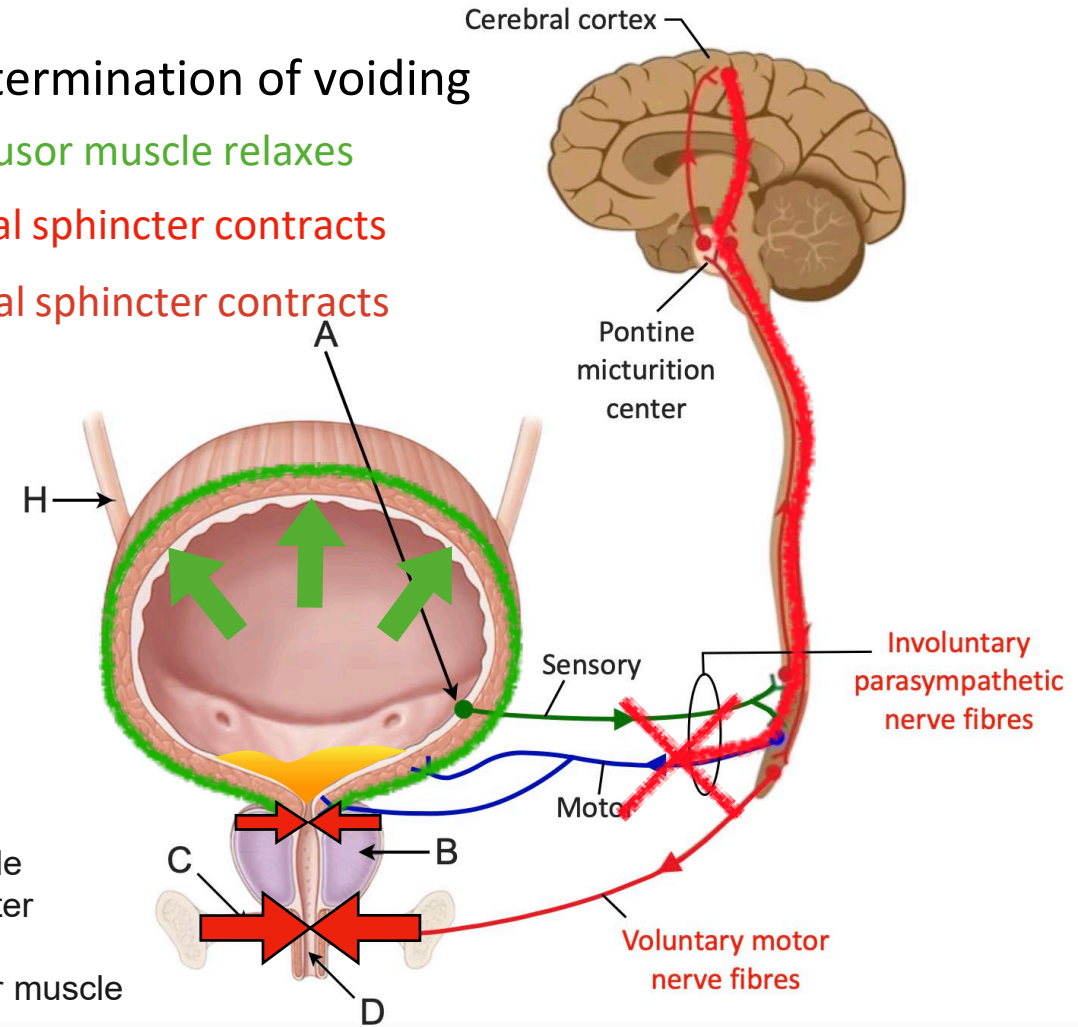


Phase 3: termination of voiding

Detrusor muscle relaxes

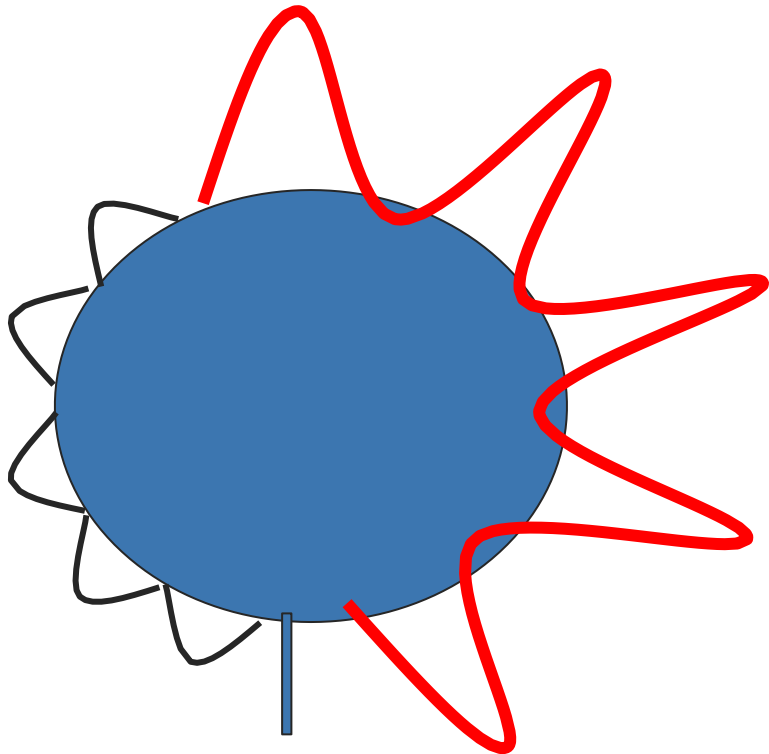
Internal sphincter contracts

External sphincter contracts



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URINARY SYMPTOMS DURING AND AFTER RADIATION



- Burning when urinating
- Frequency
- Urgency
- Blood in urine
- Incontinence for 4-8 weeks after
- Long-term side effects 2-5 years after radiation

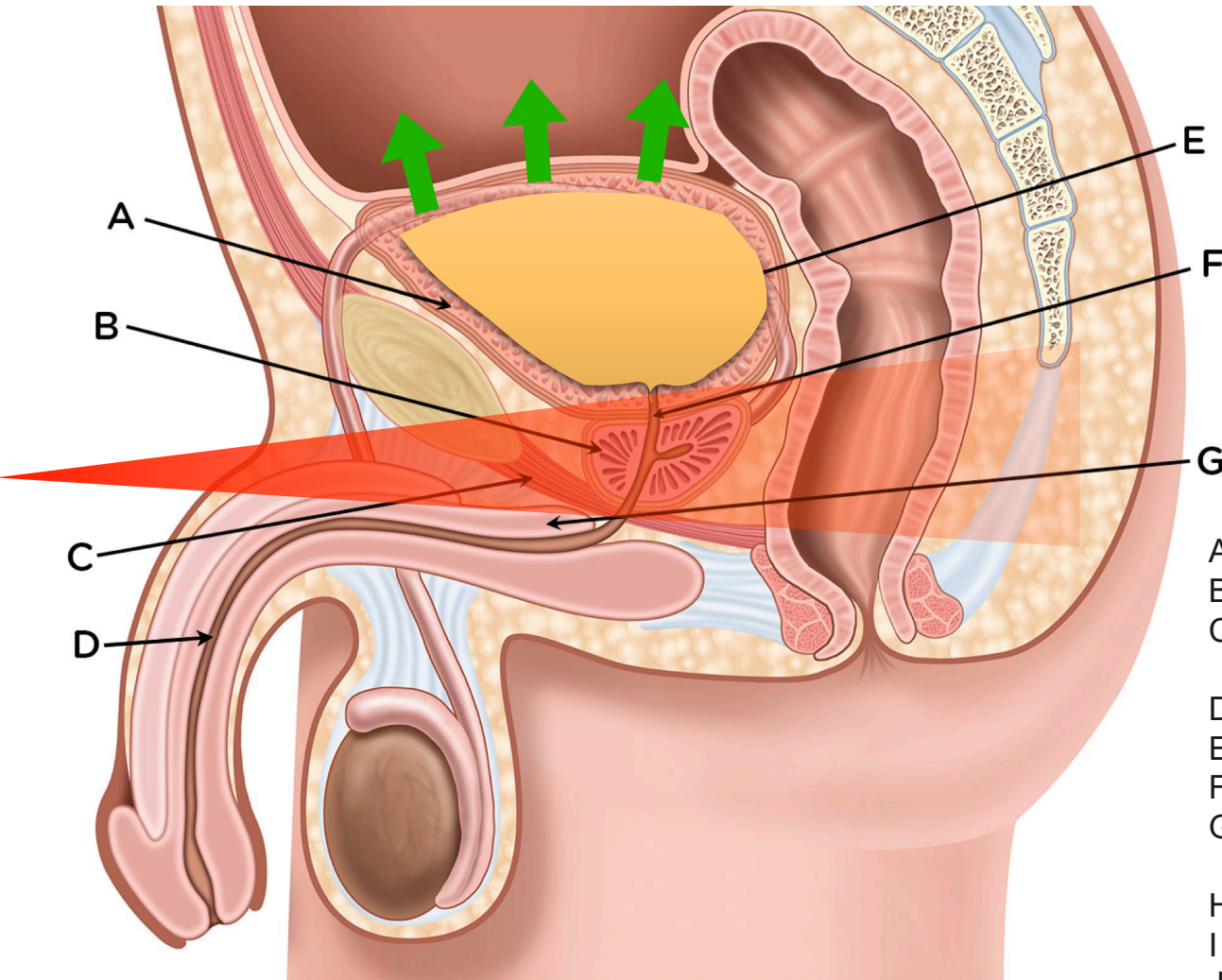
TREATMENTS FOR URINARY SYMPTOMS

- Medications
- Increase fluids
- Urge management
- Diet - avoid bladder irritants

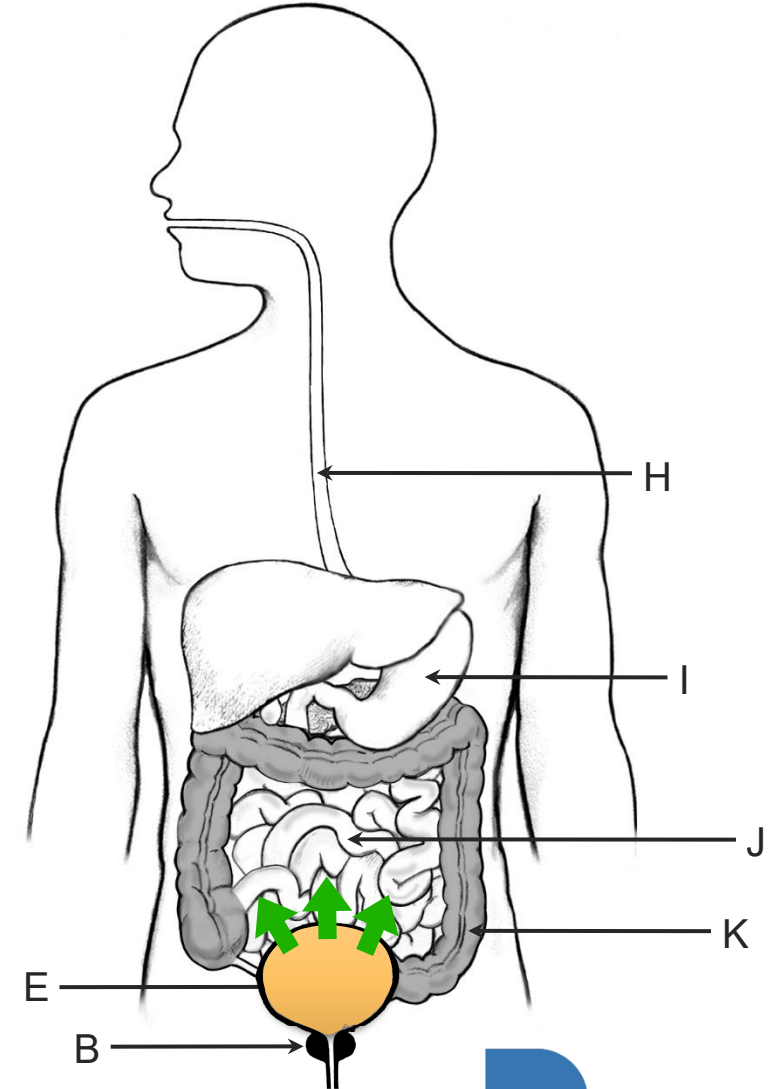
Bladder irritants:

caffeine (coffee, tea, cola, chocolate)
alcohol
carbonation
citrus
spicy foods
strawberries
spinach, kale
tomatoes
vitamin C
artificial sweeteners

ANATOMY OF THE BOWEL SYSTEM



- A = Stretch receptors
- B = Prostate gland
- C = Pelvic floor muscle / External sphincter
- D = Urethra
- E = Bladder
- F = Internal sphincter
- G = Corpus spongiosum / Erectile Tissue



Wellspect. (n.d.). Men's urinary tract system. <https://www.wellspect.us/education/articles/men-urinary-tract-system/>

FECAL URGENCY AFTER EXTERNAL BEAM RADIATION/BRACHYTHERAPY

What is it?

- Loose or watery stool
- Abdominal cramping
- Increased urgency
- Different than “regular” diarrhea

What to do?*

- Stop any laxatives and fiber supplements
- Follow a low fibre diet
- Avoid bowel irritants
 - Caffeine
 - Spicy foods
 - Fried, greasy foods
 - Alcohol
- Drink 8+ cups of fluid/day
- Use “urge management” techniques
- Make an appointment to see the PCSC dietician!

HELPFUL INFORMATION TO MINIMIZE BOWEL SYMPTOMS

**BC
CAN
CER**

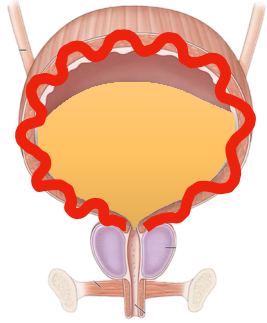
Provincial Health Services Authority

ONCOLOGY NUTRITION

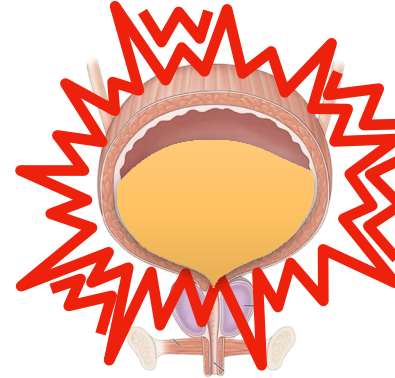
- Select low fibre foods from this booklet

<http://www.bccancer.bc.ca/nutrition-site/Documents/Patient%20Education/Food%20Choices%20to%20Help%20Manage%20Diarrhea%20Caused%20by%20Cancer%20Treatment.pdf>

BLADDER OR BOWEL “URGE MANAGEMENT” TECHNIQUES



The urge escalates and intensifies



PEAK

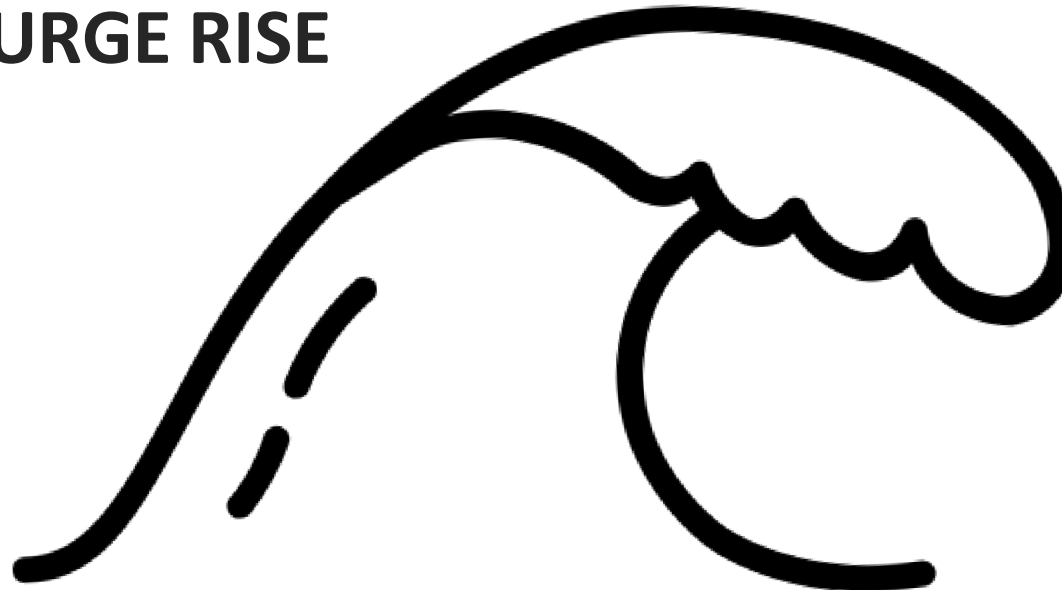
The urge reaches its peak:

- Physical symptoms are intense and uncomfortable
- Emotional symptoms may include anxiety and panic

- Full bladder
- Running water
- Change in temperature
- Thought of urination
- Seeing a toilet/bathroom
- Key in door/arriving home
- Fluid intake

TRIGGER

URGE RISE



FALL

The urge subsides, providing relief and a restored sense of control as physical discomfort and emotional distress ease.

BLADDER OR BOWEL “URGE MANAGEMENT” TECHNIQUES

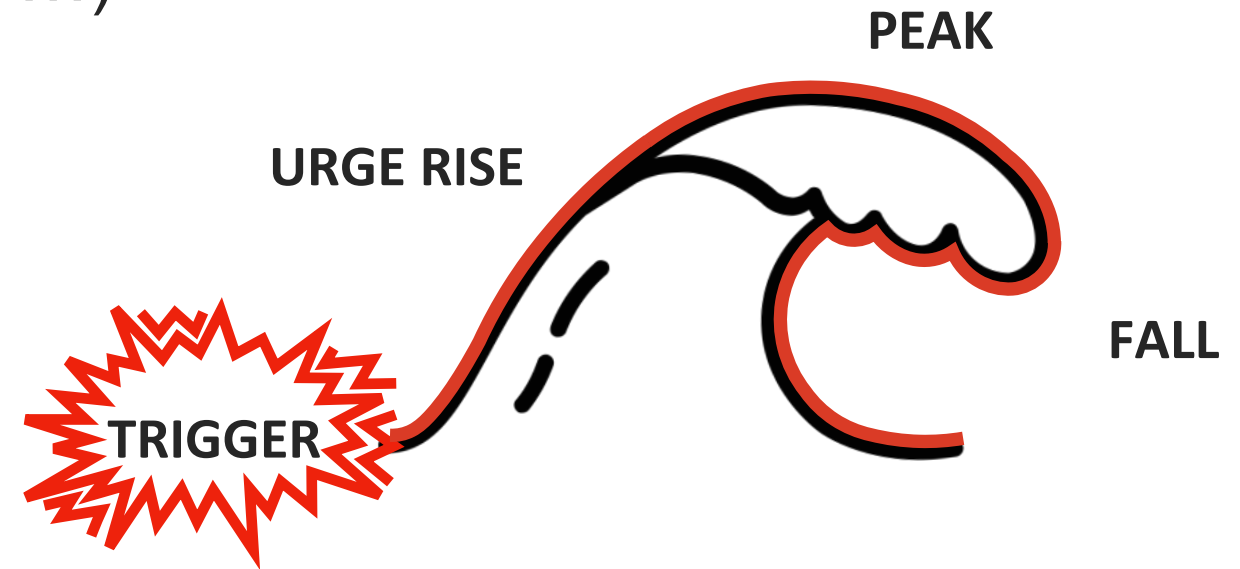
STOP

- Calm self and bladder/bowel (silent nose breathing, self talk, distract, ...)
- Tighten your pelvic floor
- Once intensity of urge calms, proceed calmly to toilet

If the urge returns or intensity increases before reaching the bathroom:

Repeat sequence above until severity of urgency decreases

“Cognitive behavioral therapy” to train the brain to manage urgency



Noun Project. (2018, November 6). *Wave icon* [Icon]. <https://thenounproject.com/icon/wave-2140349/>

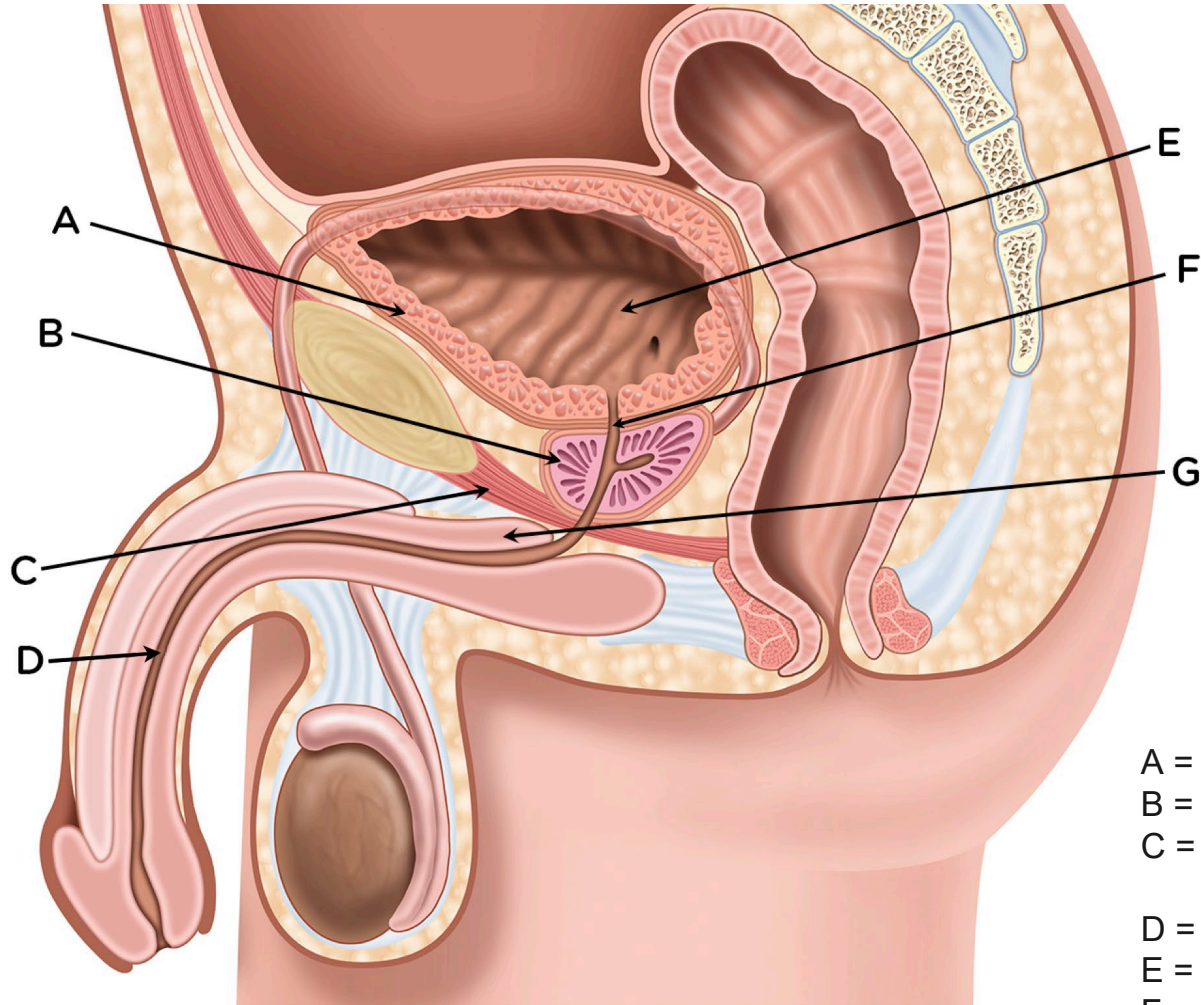
PAIN DURING/AFTER PASSING STOOL

Creams containing zinc oxide will help protect tissue and facilitate healing

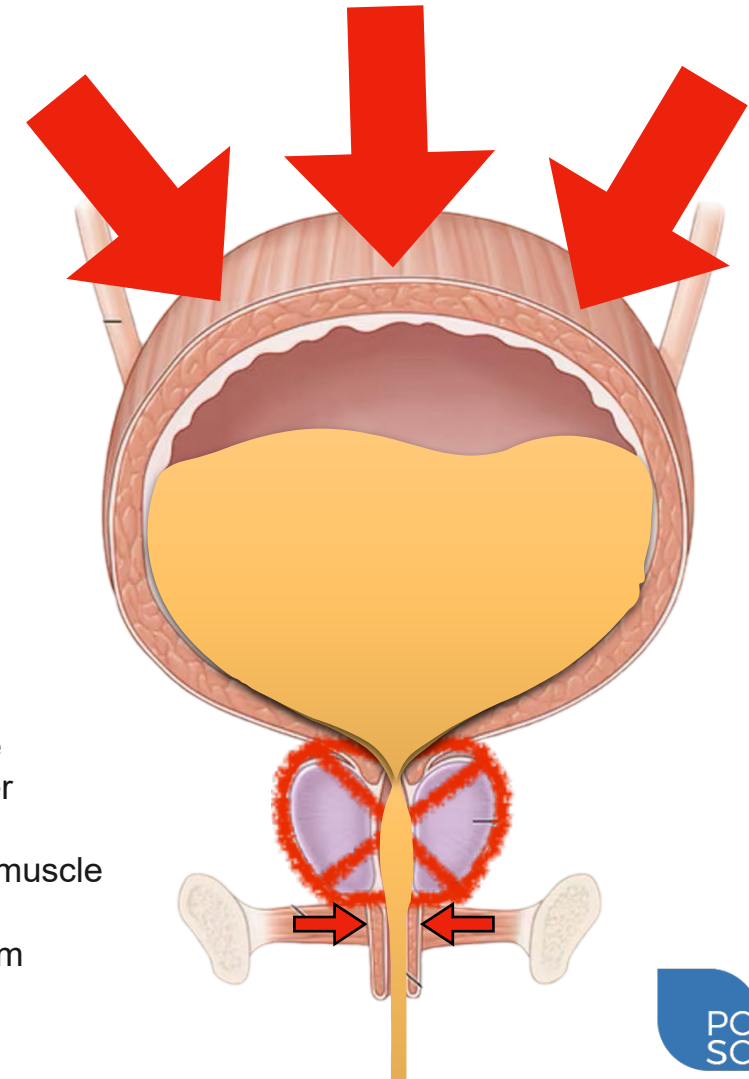
- Apply a liberal amount of cream to the skin around the anus, including the "puckered area"
- Reapply cream after each bowel movement
- Gently wash area with warm soap and water once a day

SURGERY AND STRESS URINARY INCONTINENCE

Sit to stand, Cough, Sneeze, Lift, Push, Pull, Laugh, Squat, Bend, Walk/Run, Etc...



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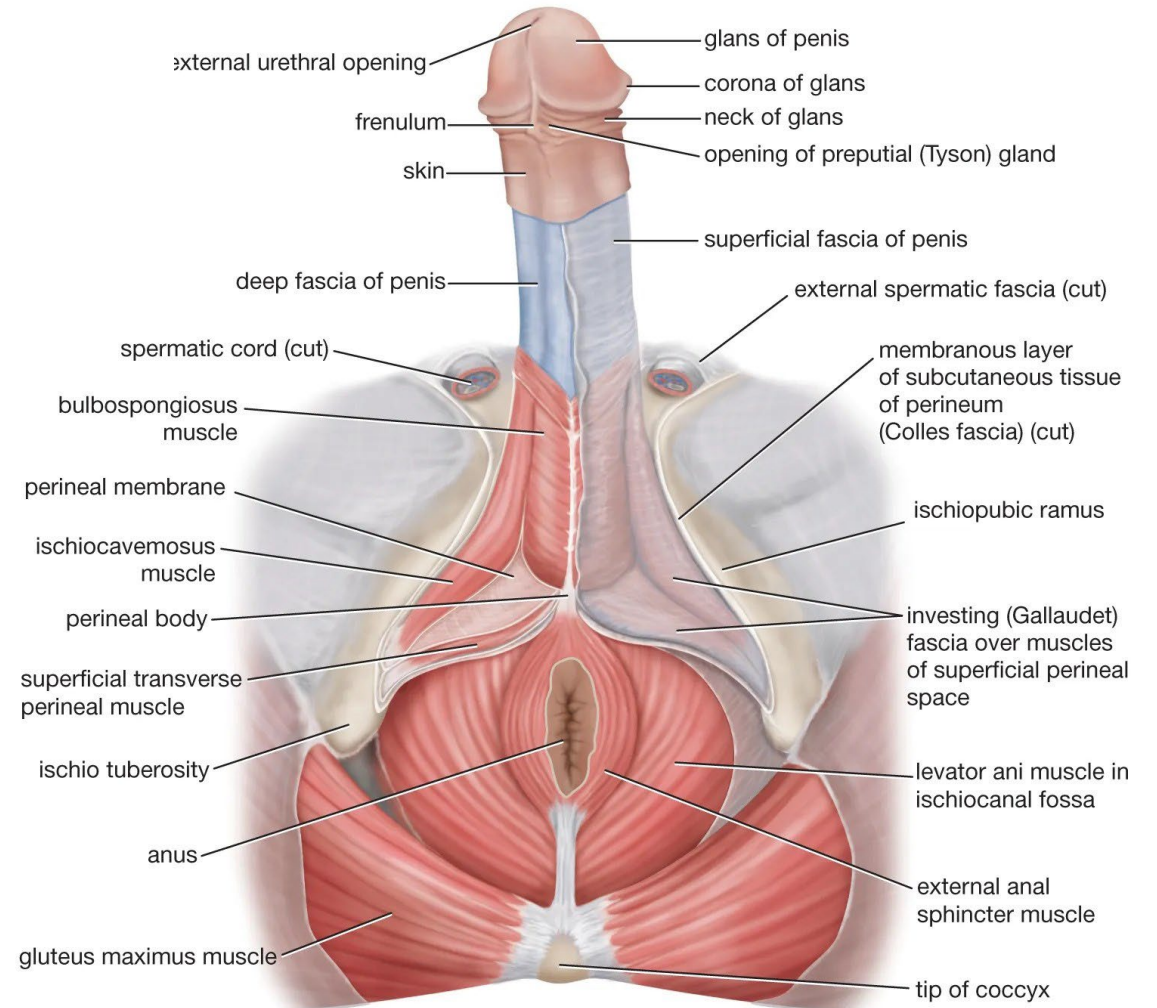


National Institute of Diabetes and Digestive and Kidney Diseases. (n.d.). *Media library*.
<https://www.niddk.nih.gov/news/media-library/11216>
Wellspect. (n.d.). *Men's urinary tract system*. Wellspect.
<https://www.wellspect.us/education/articles/men-urinary-tract-system/>

“CUES”

What cues will trigger the **pelvic floor muscles** to contract in your specific situation?

- Tighten anus
- Lift/tighten perineum (area between testicles and anus)
- Stop void
- Lift testicles
- Tighten penis towards your body
- Tighten penis and anus together



© 2012 Encyclopædia Britannica, Inc.

Encyclopædia Britannica. (n.d.). *The female reproductive system*.
<https://www.britannica.com/science/human-reproductive-system/The-female-reproductive-system>

WATCH AND FEEL

- Penis draw in
- Anal stretch (targeted buttock cheek pull)
- Gentle pull along the base of scrotum
- Gentle pull along the base of penis
- Anal contact (finger, glove and lube)
- Feel rope between testicles and anus
- Feel the bulb of the penis tense (pads of 2 fingers placed over the bulbocavernosus muscles)

PF “REHAB”

Skill (C/H/R)

Strength and
endurance
(standing)

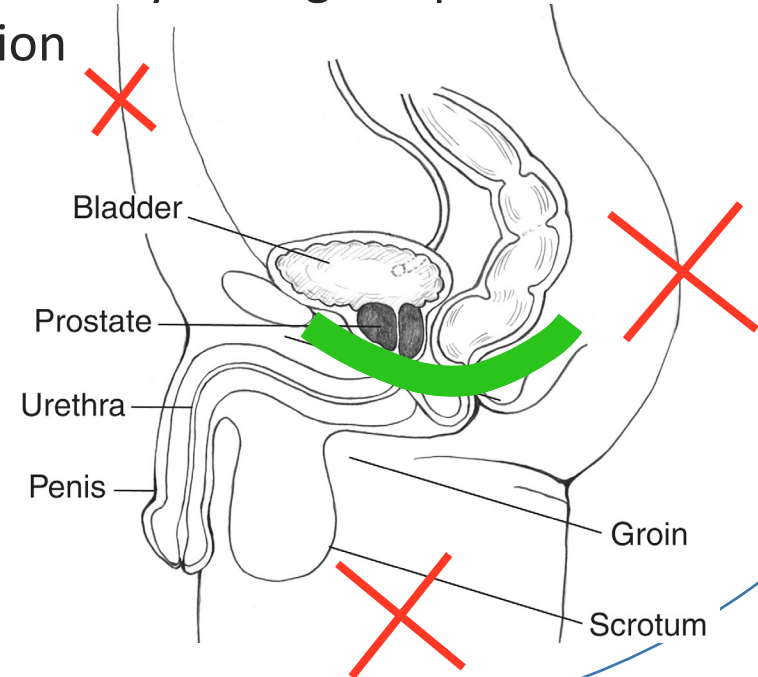
**Need to use
when you need
(cough, sneeze, sit
up, etc.)**

PRECISION, PRECISION, PRECISION

- Do not contract the buttocks or inner thighs
- Do not lead with an abdominal contraction
- Breathe normally during the pelvic floor contraction

3 Skills:

- Contract
- Relax
- Hold



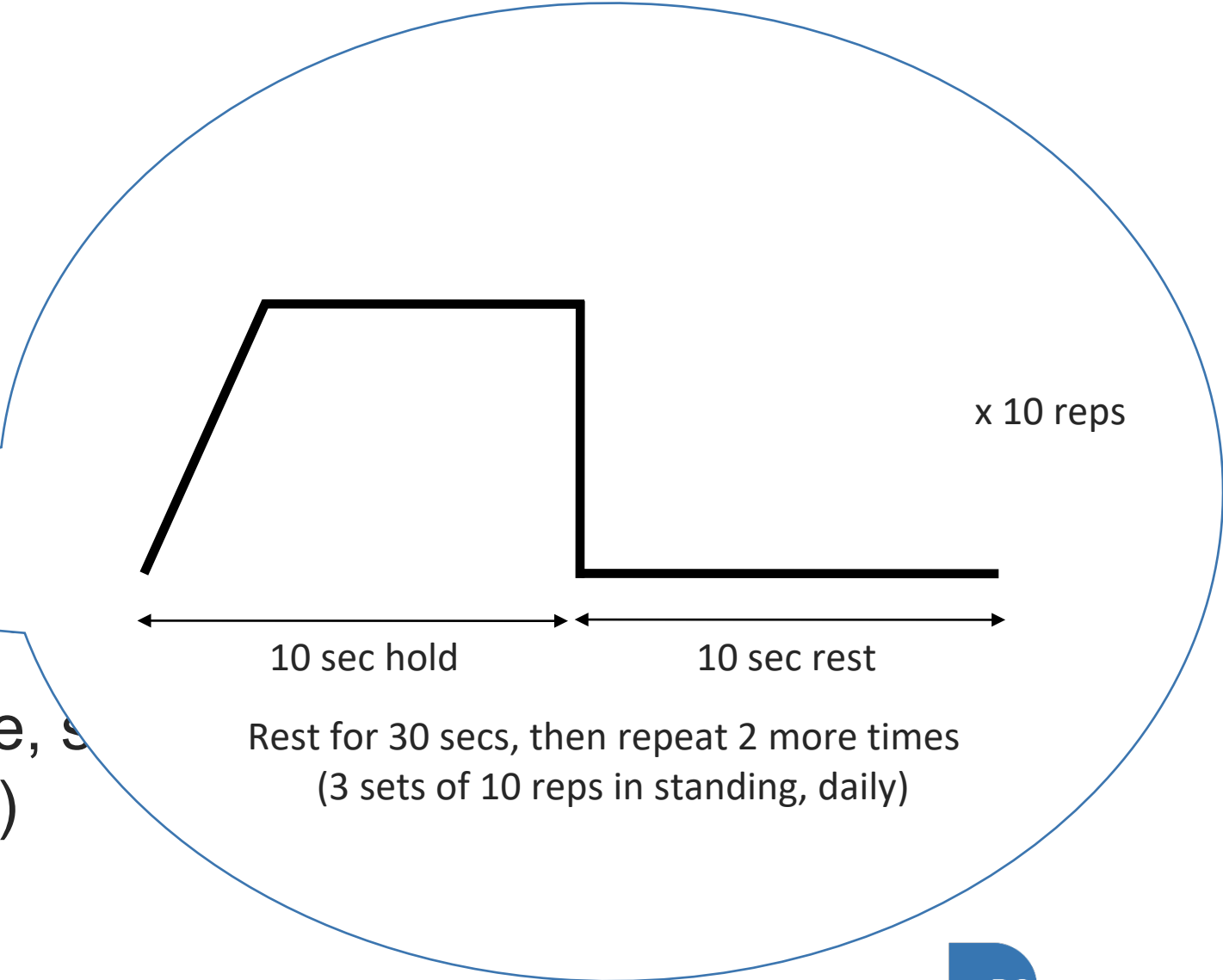
PF "REHAB"

Skill (C/H/R) ✓



Strength and endurance (standing)

Need to hold your breath (cough, sneeze, sit up, etc.)

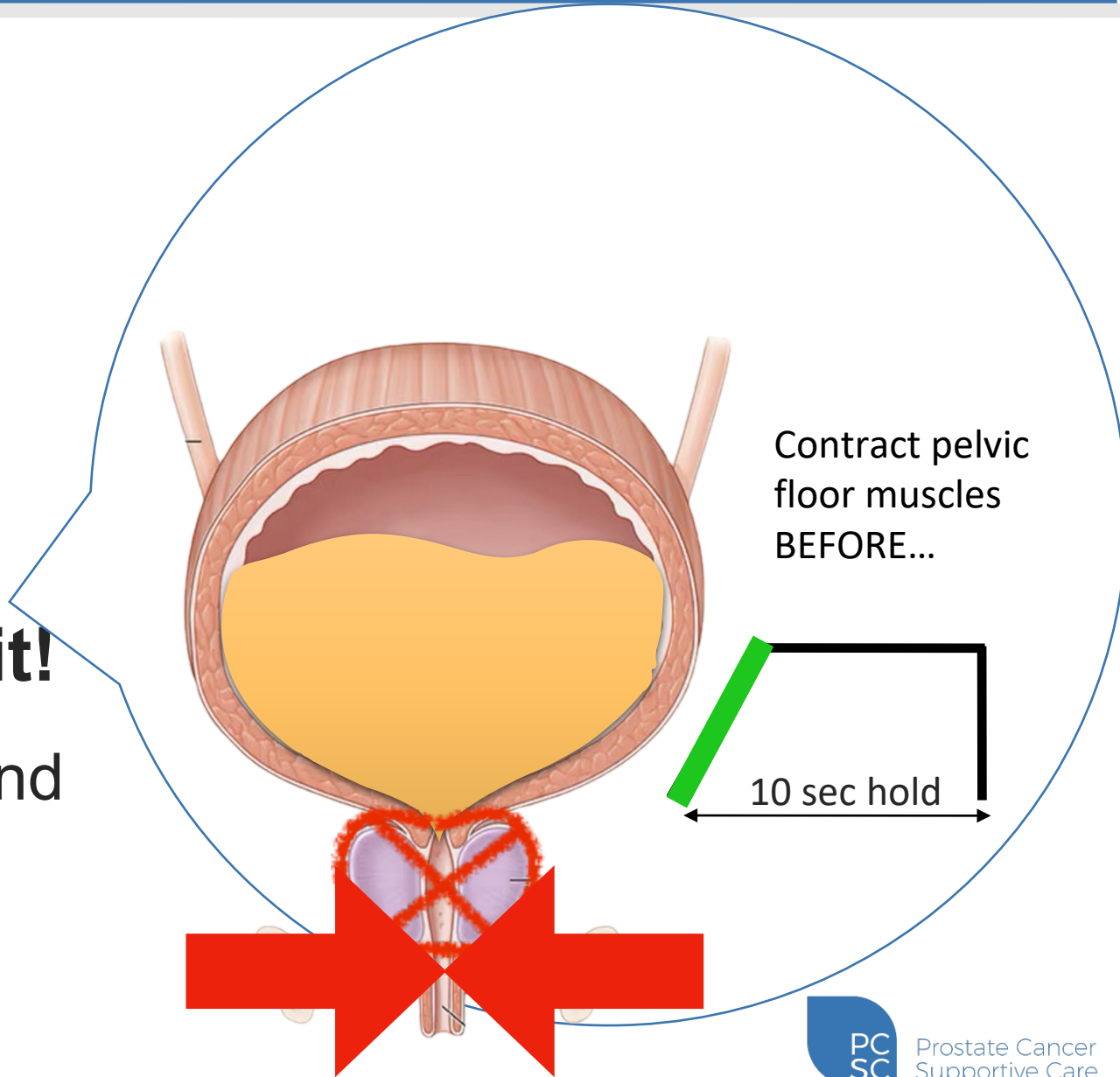


PF “REHAB”

Skill (C/H/R) ✓

Strength and
endurance
(standing)

**Need to use it
when you need it!**
(cough, sneeze, stand
up, etc.)



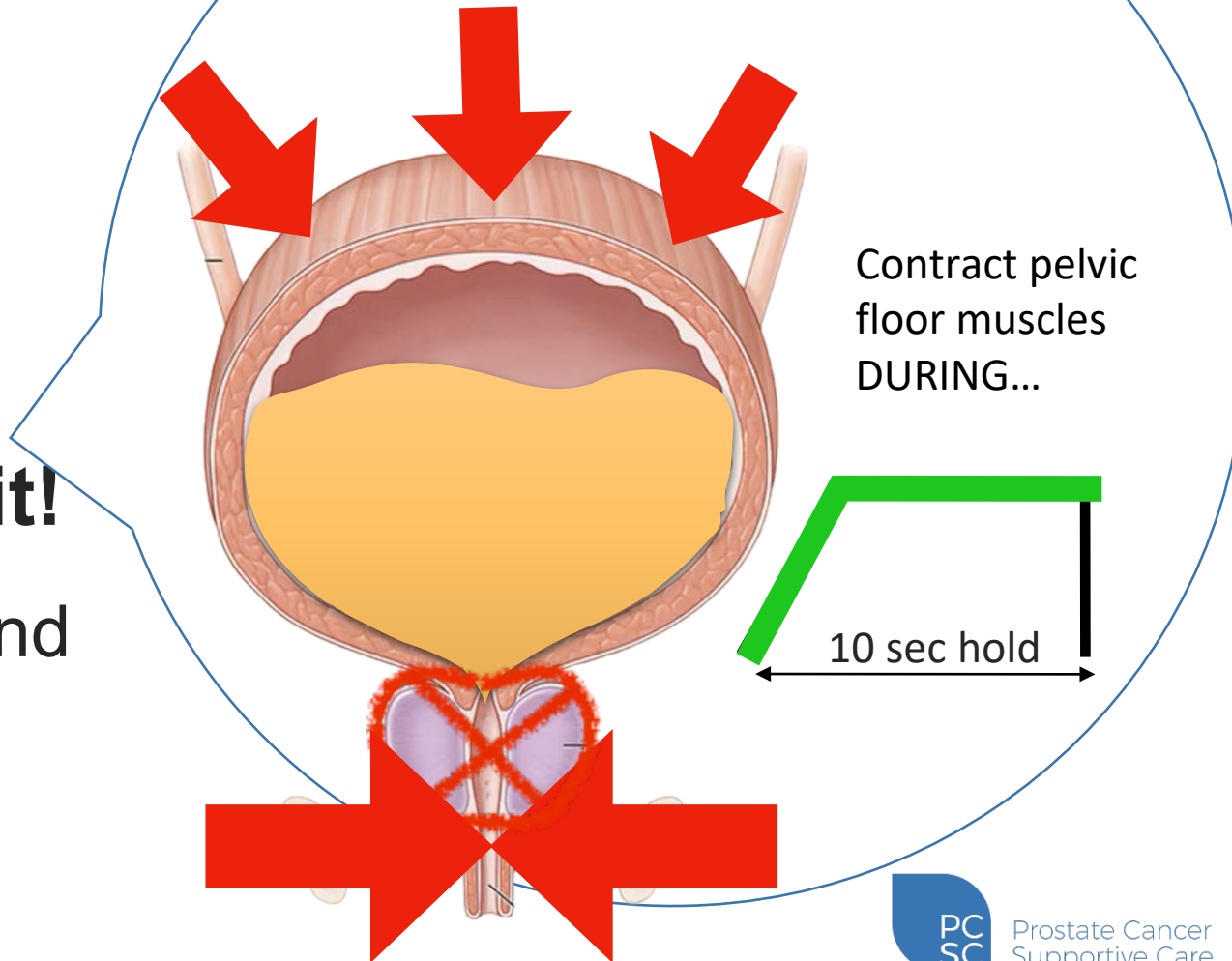
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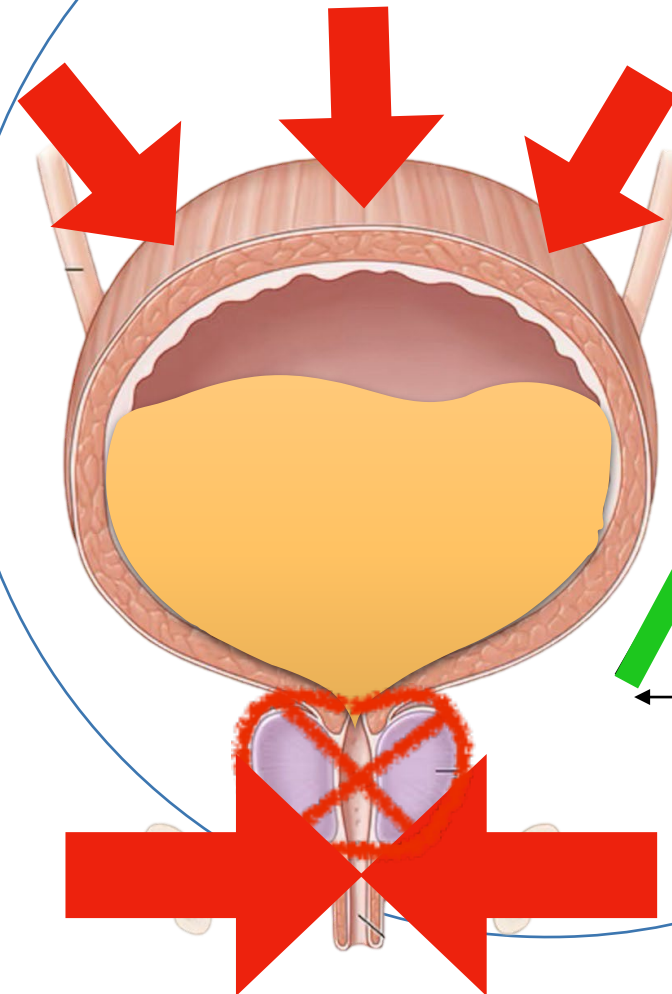
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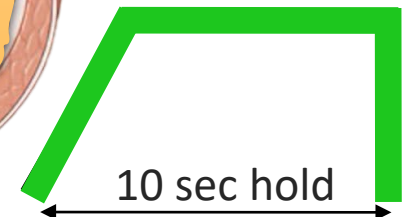
Strength and endurance (standing)

Need to use it when you need it!
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Sit to stand, Cough, Sneeze, Lift, Push, Pull, Laugh, Squat, Bend, Walk/Run, Etc...



...and SHORTLY AFTER activities to prevent leakage



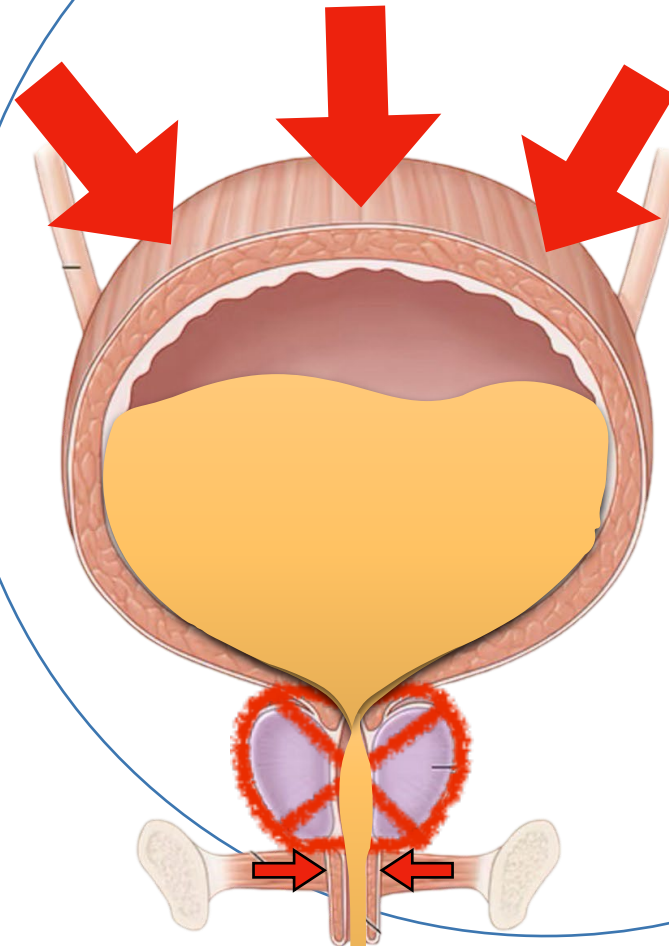
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Otherwise pressure will exceed your closure mechanism = leakage

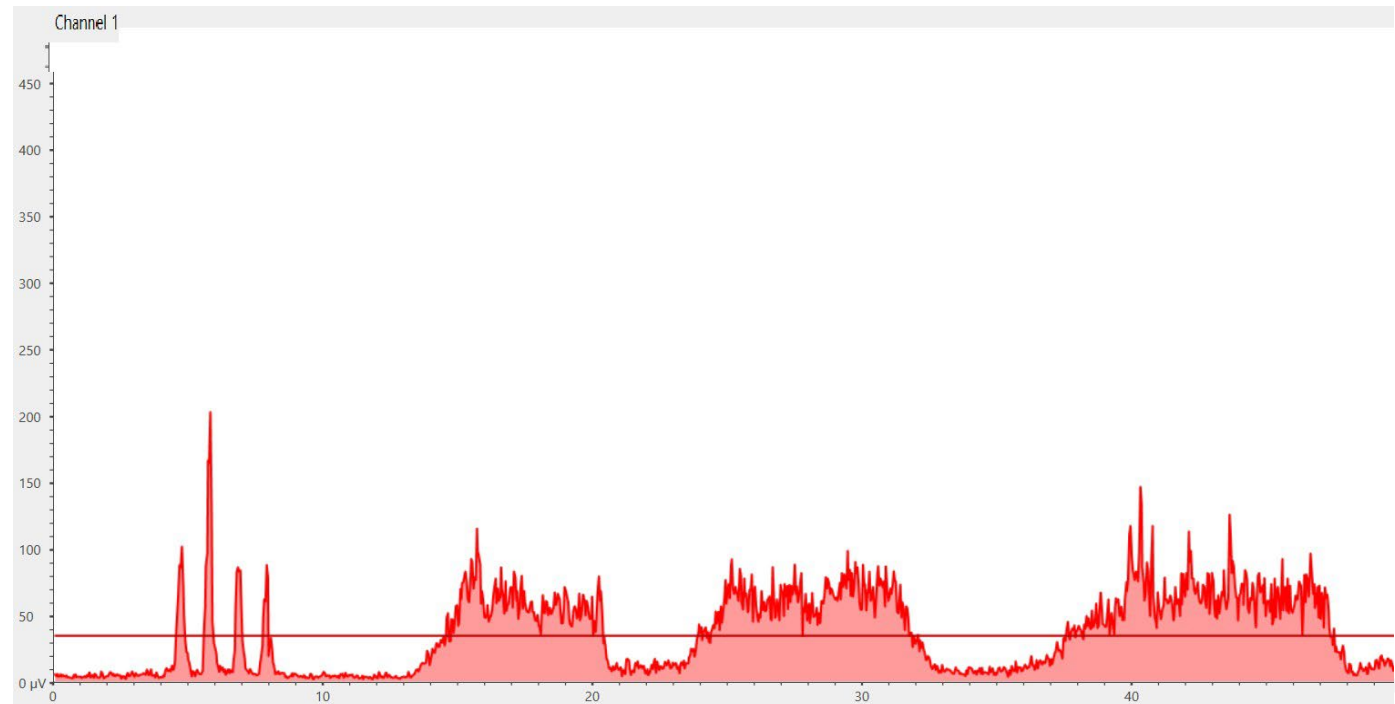
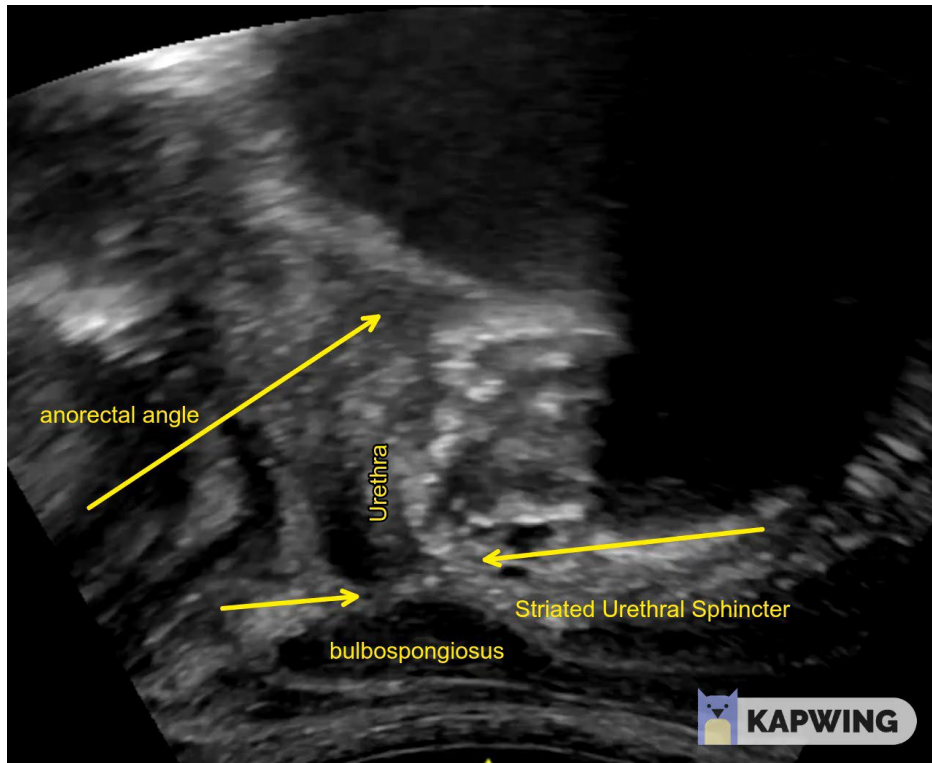
BIOFEEDBACK

Am I doing my pelvic floor contractions correctly?

- Biofeedback devices can provide valuable visual information about the accuracy of your pelvic floor muscle contractions

Real-Time Ultrasound Imaging

Surface Electromyography (EMG)



UNTIL YOU GET DRY...YOU DON'T NEED TO BE A HERMIT

- Is there something you are **NOT** doing or enjoying because of your bladder or bowel control?
- **Let's figure it out!***
 - Absorbent products (disposable, washable)
 - Clamps
 - Urethral inserts/plugs
 - Condom drainage
 - Anal plugs

<https://www.canada.ca/en/revenue-agency/services/tax/individuals/topics/about-your-tax-return/tax-return/completing-a-tax-return/deductions-credits-expenses/lines-33099-33199-eligible-medical-expenses-you-claim-on-your-tax-return.html>

<https://www.canada.ca/en/revenue-agency/services/tax/technical-information/income-tax/income-tax-folios-index/series-1-individuals/folio-1-health-medical/income-tax-folio-s1-f1-c1-medical-expense-tax-credit.html#toc15>

ABSORBENT PRODUCTS

- Pads for men differ from female pads
- Briefs
- **Pad inside brief!** Easier, possibly less expensive

Disposable



<https://www.depend.com/i18n/mens-solutions/index.html>

Washable



Modibodi: light to ultra absorbency
- other products on market as well



https://www.tena.ca/on/demandware.store/Sites-Tena_CA-Site/en_CA/TrialRequest-Start



<https://us.modibodi.com/collections/mens>

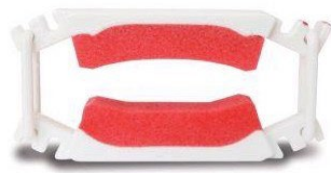
PENILE CLAMPS

- External device worn on the shaft of the penis
- Applies pressure to compress urethra
- Blocks urine flow through urethra
- Improves quality of life



Pacey Cuff

<https://paceycuff.com>
<https://paceycuff.com/pages/sizing-chart>



Dribble Stop

<https://dribblestop.com>
604-882-2548



**Cunningham
clamp**

local pharmacies



Uriclak*

<https://commedpro.com/product/uriclak-male-incontinence-clamp/>
Spain: <http://www.uriclak.com/en/>



Wiesner*

<https://www.wiesnerhealth.com>
Also available on amazon.ca

REQUIREMENTS FOR PENILE CLAMP USE

- Must be cognitively intact, able to adhere to directions
 - Should not be used all day. Choose wisely.
 - Limit wearing time as per product instruction
 - Never at night in bed
- Normal genital sensation
- Intact penile skin
- Aware of bladder filling
- Have sufficient manual dexterity to open and close the device¹
- Do not use a clamp if you have a penile prosthesis

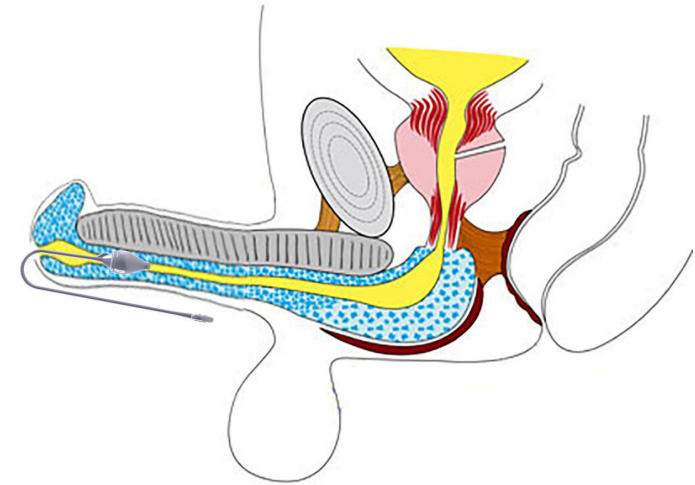
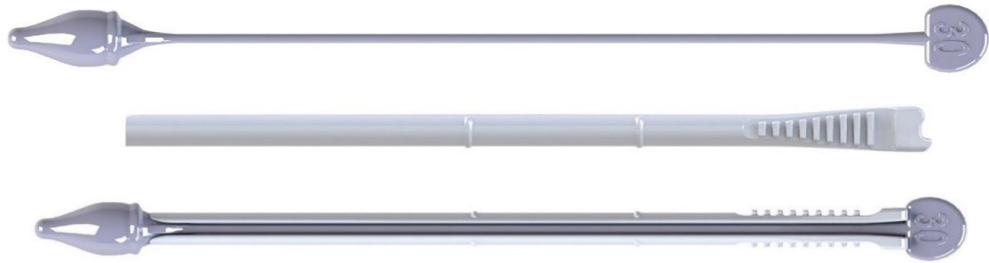
¹: K Moore et al., 2004

TECHNIQUE FOR REMOVAL OF PENILE CLAMP

- Sit on the toilet
- Point the tip of the penis down toward the water
- Once the clamp is opened, urine will flow quickly, so there is no time to redirect the flow

URETHRAL INSERT

Contino®



- A medical device that is inserted into the urethra
- Temporarily blocks involuntary urine leakage
- Removed before “voiding”
- Easily cleaned and re-inserted
- Must be sized by a healthcare professional

604 653 0360
1 833 543 3311
www.life360innovations.com

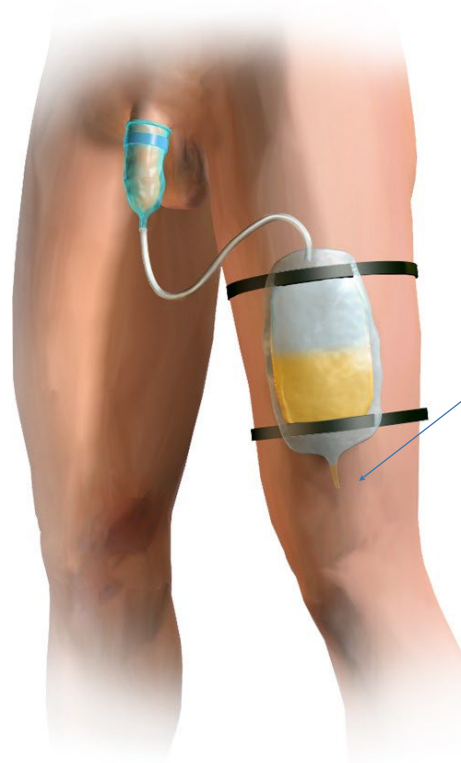
WHEN TO USE PENILE CLAMP OR INSERT

- Patients should be instructed in use of pelvic floor muscles to control bladder function before using a clamp or insert.
- If, after one year, urinary incontinence is still a major issue, consider use of a clamp or an insert.
- Scant research on long-term side effects on the use of clamps and inserts

CONDOM DRAINAGE



Condom with adhesive is rolled onto the penis



Strap the Drainage Bag to the Thigh ankle, bed side

A valve on the bottom of the collection bag can be opened, and the bag drained as needed.

SEXUAL INCONTINENCE

“Involuntary leakage of urine with sexual activity”:

- Thoughts
- Arousal
- Sexual activity
- Orgasm (“climacturia” is leaking of urine during orgasm)

SEXUAL INCONTINENCE

- Urine in or on someone's body is not harmful to that person
- Management/Treatment:
 - Void before sexual activity
 - Place a towel underneath you. Afterward, shower together 🖨️
 - Strengthening pelvic floor muscles can help
 - Try using mild pelvic floor muscles with sexual activity
 - ~20% 😊 ~80% 😞
 - Condoms
 - Constrictor band at base of penis
 - Leaking urine can substitute for lack of ejaculation
 - Attend the Sexual Health Module!



PCSC PHYSIOTHERAPY CLINIC

- If you are 12 weeks post-prostatectomy and experiencing urine leakage, you can benefit from our physiotherapy clinic.
- We offer each patient four complimentary one-on-one physiotherapy sessions, available either in-person or virtually.
- Radiation patients struggling with stool incontinence, our physiotherapy clinic is here to assist you as well.
- Please reach out to our program coordinator, to book an appointment or for further information about our services.

CONCLUSIONS

- Bowel and bladder control can often be improved with pelvic floor physiotherapy
- Each man is an individual case, and different approaches may be required
- Consult with a pelvic floor physiotherapist to find the best solutions for you
- Even if urinary continence does not improve much, there are many strategies to manage urinary leakage

THANK YOU!

QUESTIONS?

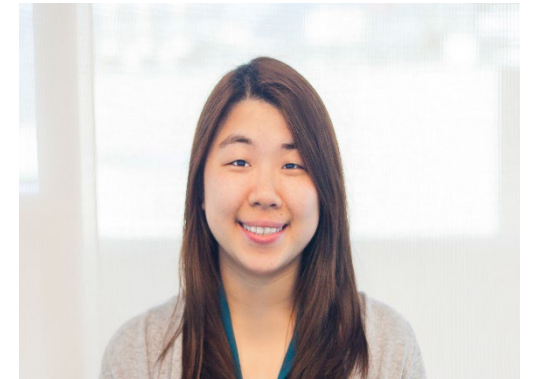
PCSC PROGRAM CONTACT DETAILS

Prostate Cancer Supportive Care (PCSC) Program
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Vancouver, BC
V5Z 1M9, CANADA

Patient inquiry form:



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PCSC Program Coordinator
Telephone: 604-875-4485
Fax: 604-914-3003
Email: pcsc@vch.ca
Website: www.pcscprogram.ca



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