Supervised pelvic floor muscle exercise for the treatment of female urinary incontinence

Sir,

Pregnancy and childbearing are crucial risk factors for urinary incontinence (UI).^[1] Pelvic floor muscle exercise (PFME) is important in the treatment of UI in women because it helps in the restoration of perineal muscles, therefore improving the timing of contractions, the strength, and stiffness of the pelvic floor muscles, and practicing PFME can help women having their first baby to prevent UI in late pregnancy and postpartum.^[2] Supervised PFME programs are more effective when compared to nonsupervised programs in the treatment of UI, Because training under the supervision of a medical doctor, physiotherapist, or fitness trainer will develop patients' skills and performance regarding PFME.^[3] Supervised PFME should be included as a standard training routine in women's exercise programs.^[4]

The aim of performing PFME under supervision for the treatment of UI is to produce a strong, fast, precise contraction, which will compress the urethra against the back of the pubic bone, hence improving bladder control; this occurs nearly 250 ms following a cough.^[5] This objective can be achieved by regular voluntary contraction and relaxation of the pelvic floor muscles. Physiotherapists most at times recommend three sets of eight to 12 slow velocity maximal voluntary pelvic muscle contractions sustained for 6–8 s each, and these are usually performed three to four times/week and continued for at least 15–20 weeks to improve strength and timing of the pelvic floor contraction; the training program usually takes a minimum of 4–8 weeks.^[5]

In conclusion, a supervised pelvic floor muscle training should be the benchmark of PFME for treating female UI, because a professional (medical doctor, physiotherapist, and/or fitness trainer) instructs and teaches women the best way to contract the pelvic floor just prior to a cough or physical exertion, this will enable a quick reduction in the volume of leakage and as well improve their PFME skills and techniques.

Conflicts of interest

There are no conflicts of interest.

Authors' contribution

Literature search, writing and revising the article.

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