

**Bowel Function**

**Normal bowel functions**

It is normal to open your bowels from between three times a day, to three times a week. Normal function should mean we;

* Have awareness of the need to open our bowels.
* Are able to hold on to go to the toilet at an appropriate place and time.
* Can open our bowel completely, without straining when we sit on the toilet.

Consistency of the stool can also vary and this depends on many factors but ideally it is soft, smooth sausage shape, which is easy to pass.

**Common disorders of the bowel;**

* **Constipation**- the bowel movement is infrequent, hard and difficult to pass.
* **Obstructed defaecation**- is the inability to evacuate contents from the rectum even with excessive straining.
* **Faecal incontinence** is the leakage of gas, solid or liquid from the back passage due to the reduced ability to control bowel closure.
	+ **Faecal urge incontinence** happens when you are not able to get to a toilet quickly enough when you get the feeling of needing to go.
	+ **Passive faecal incontinence** is when you are unaware of the leakage from your back passage of wind or stool.
	+ **Stress faecal incontinence** is when you leak stool from the bowel when the abdominal pressure increases on activity e.g. cough, sneeze, exercise, lifting etc.

**Exercises for people with leakage from the bowel**

The pelvic floor muscles are a ‘hammock’ of muscles underneath your pelvis. They attached at the front of the pelvis to the pubic bone and span backwards to attach at the base of the spine around the sacrum and coccyx (tailbone). The opening of the bladder, birth canal (vagina) and the bowel all pass through the pelvic floor.



The back passage, or anus, has two rings of muscles that wrap around the anus. These are;

**The internal sphincter –** which is the inner ring. This is an involuntary muscle, which should be closed at all times, except when you are actually trying to open your bowels, which usually happens automatically not something you need to think about doing.

**The external sphincter –** which is the outer ring. This muscle is a voluntary muscle which means you can tighten and therefore close it more firmly if you have urgency or diarrhoea.

Either or both of these sphincter muscles can become weak. There may be no obvious reason but it is often due to childbirth, constipation/straining or general wear and tear. If you have weak muscles, you may leak gas, liquid or solid stools. When you pass a stool, there is usually some residue of the stool left behind in the anal canal. After opening your bowels, the back passage normally ‘snaps shut’ via the sphincter muscles and in doing so squeezes out any residue. You can then wipe clean and there is no further leakage.

If the muscles are damaged or weak, they may not close immediately or completely after you have been to the toilet. You may then find it difficult to wipe clean, and you may find that you leak for a while after opening your bowels. The amount and time this may happen can vary. You may also find that you leak with exertion or when you pass wind.

We cannot strengthen the internal sphincter as this is an involuntary muscle. We can strengthen the external sphincter. This may also give more support, may compress the internal sphincter and help with preventing leakage and allow better wind control.



**Exercise 1 Superficial muscle fibres**

Lie or sit comfortably with your knees slightly apart. Imagine that you are trying to stop yourself passing wind from the bowel. To do this you must squeeze and lift the muscle around the back passage entrance as tightly as you can,

 There are two types of exercises you should do;

1. **Quick and strong**

Squeeze as hard as you can and then relax. Rest a second and then repeat up to 10 times.

1. **Endurance**

Squeeze and hold for up to 10 seconds. You must feel the muscle relax after each contraction. Aim to repeat

it as many times as you can, building up to a maximum of 10 times.

**Exercise 2 Deep muscle fibres**

Squeeze deep inside the back passage, imagine you are trying to stop /delay an urgent bowel movement or passage of wind

There are two types of exercises you should do;

1. **Quick and strong**

Squeeze as hard as you can and then relax. Rest a second and then repeat up to 10 times.

**2. Endurance**

Squeeze and hold for up to 10 seconds. You must feel the muscle relax after each contraction. Aim to repeat

it as many times as you can, building up to a maximum of 10 times.

**DO NOT** Pull in your stomach excessively

**DO NOT** Squeeze your legs together

**DO NOT** Tighten your buttocks

**DO NOT** Hold your breath.

You must aim to do these exercises at **least 3 times a day**.

Generally, it takes 3-6 months to get a muscle really strong again.

Do not do so many that the muscle begins to ache, remember it is quality not quantity!



**Defaecation Techniques**

The way you empty your bowels is important for those who have difficulty and for those with leakage, as this will encourage better bowel function long term. It is important to avoid constipation.

* Drink 1.5-2 litres of fluid a day
* Eat a healthy diet
* Ideally do not ignore a call to open your bowels and try to work with the urge
* Do no strain and give yourself enough time to empty completely
* Sit fully on the toilet: do not hover
* Sit on the toilet seat with knees bent, feet apart and supported on a foot stool so your knees are higher than hips
* Arms resting comfortably on your leg
* Keep your tummy relaxed
* Do not hold your breath
* Relax your pelvic floor, make the anus wide
* A slight bearing down will help the stool to move out of the back passage – watch this video for more detail <https://www.youtube.com/watch?v=QDk93cvZAuk>
* Some women may find it helpful to support the perineum (the area between the anus and the vagina) when emptying their bowels, some women find it helpful to rock forwards and backwards to pump the stool out.
* After voiding faeces, tighten your anal sphincter with 5 – 10 quick squeezes before wiping your bottom