• Electrotherapy uses a device to increase muscle awareness, and tone and strengthen pelvic floor muscles. For stress incontinence therapy, the device replicates a perfect Kegel exercise. For urge incontinence therapy, the device provides stimulation to prevent inappropriate bladder contractions by reducing urge sensations.

• Physiological Quieting includes the use of relaxation tapes and instruction in diaphragmatic breathing exercises.

• Bladder Retraining involves education about foods and beverages that can contribute to urinary leakage and/or increased urination. Patients keep a bladder diary and receive instruction in retraining their bladder to reduce the frequency of urination.

• Education about the pelvic floor muscles, their function, and overall bladder health.

Responding to Your Needs
Responding promptly to you and your physician is very important to us. Patients are contacted within two to four hours after referral from a physician to set up an appointment. To ensure consistency of care, patients are given the option of working with the same therapist throughout their treatment program.

For More Information
If you are experiencing incontinence problems, speak to your physician about a referral to St. Peter's Physical Therapy program. We accept most insurance plans and offer early morning and evening hours.
As part of our commitment to high-quality, personalized health care, the physical therapists at St. Peter’s are specially trained in urinary incontinence management. The physical therapy staff at St. Peter’s is dedicated to helping patients feel better physically and emotionally. Our patients benefit from an individualized program that promotes rehabilitation, education and overall well-being. We offer our services for Capital Region residents at St. Peter’s Physical Therapy & Fitness in Slingerlands.

Urinary incontinence is a medical condition that affects millions of women and men. The condition may be improved, or even resolved, with specialized physical therapy treatments.

What is Urinary Incontinence?
Urinary incontinence is a condition where involuntary loss of urine becomes a social or hygienic problem. Most people feel it is a natural part of aging so they do not seek help, but urinary incontinence is not a normal part of aging. It is caused by a physical problem. Urinary incontinence is, however, a common problem and individuals should not feel embarrassed to get help.
- Approximately 13 million men and women suffer from urinary incontinence.
- Half of all women will experience urinary incontinence in varying degrees during their lifetime.
- Approximately 10 to 15 percent of children ages eight to 16 have bed-wetting problems related to incontinence.

What Causes Urinary Incontinence?
Urinary incontinence can have several causes including:
- Weakened pelvic floor or urethral sphincter muscles
- Childbirth
- Hormonal changes (e.g., menopause)
- Weakened bladder
- Pelvic or abdominal surgery
- Prostate surgery or other prostate conditions

Temporary incontinence may be caused by:
- Urinary tract infection
- Constipation
- Certain medications
- Vaginal infections or irritation
- Certain foods and beverages

What Are the Different Types of Incontinence?
There are four main types of incontinence.

Stress Incontinence
Stress incontinence is when urine loss happens during exercise or with physical exertion. Leakage often occurs when a person laughs, coughs, sneezes, or lifts something. Many people with this problem use the bathroom often during the day to avoid potential accidents.

Overflow Incontinence
Overflow incontinence is when a person is unable to completely empty their bladder. They urinate a small amount and still feel as if the bladder is partially full. They often get up during the night to use the bathroom as they feel the need to urinate, but cannot. People with this problem often leak urine during the day and night.

Mixed Incontinence
This is when a person has signs and symptoms of both stress incontinence and urge incontinence.

How is Incontinence Treated?
St. Peter’s offers a wide range of low-risk, effective treatment options referred to as behavioral techniques. In an informal survey, patients receiving these treatments at St. Peter’s have reported a significant reduction of incontinence symptoms, and an improved quality of life.

On average, a patient receives treatments one to two times per week for a period of one to two months. Treatments may include a combination of the following:
- Biofeedback involves the use of a painless device that records muscle activity and strength during therapeutic exercises. It lets the user know whether the exercises are being done properly by offering visual and auditory feedback.
- Therapeutic Exercise involves a series of individualized exercises designed to strengthen pelvic floor muscles, abdominals, and other muscle groups.