

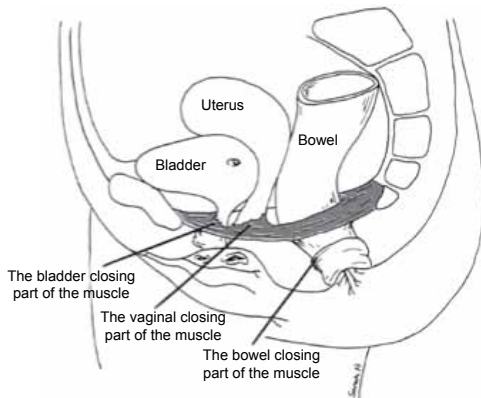


When you are pregnant, you get a lot of advice from many people. One issue that few people think about are signs of bladder and bowel control problems in pregnancy and after the birth.

WHAT DO MY PELVIC FLOOR MUSCLES DO?

See the picture of the pelvic floor. The pelvic floor muscles do a number of things. They:

- help to close off the bladder, the vagina (front passage) and the rectum (back passage); and
- help to hold the bladder, the uterus (womb) and bowel in their proper place.



HOW DO I KNOW IF I HAVE A PROBLEM?

There are a few things that might happen if you have weak pelvic floor muscles. You might:

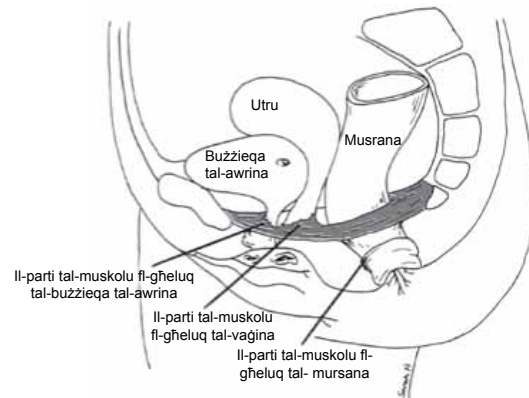
- leak urine when you cough, sneeze, lift, laugh or do exercise;
- not be able to control passing wind;
- feel an urgent need to empty your bladder or your bowel;
- leak bowel motion after you have been to the toilet;
- have trouble cleaning yourself after a bowel motion;
- find it hard to pass a bowel motion unless you change position or use your fingers to help; or
- feel a lump in your vagina or a feeling of dragging like a period, mostly at the end of the day, which could mean that one or more of your pelvic organs might be sagging down into your vagina. This is called pelvic organ prolapse. Prolapse is very common and happens to about one in ten women in Australia.

Meta tkun tqila, int tircievi hafna pariri minghand hafna nies. Kwistjoni wahda li ftit nies jaħsbu fuqha hi sinjali ta' problemi ta' kontroll fil-bużżieqa tal-awrina u l-imsaren matul it-tqala u wara t-twelid.

X'JAGĦMLU L-MUSKOLI TIEGĦI TAL-QIEGĦ TAL-PELVI?

Ara l-istampa tal-qiegħ tal-pelvi. Il-muskoli tal-qiegħ tal-pelvi jagħmlu numru ta' affarijiet. Huma:

- jgħinu jagħlqu l-bużżieqa tal-awrina, il-vaġina (il-passaġġ ta' quddiem) u r-rektum (il-passaġġ ta' wara); u
- jgħinu jżommu l-bużżieqa tal-awrina, l-utru (l-ġuf) u l-imsaren fejn suppost.



KIF INKUN NAF JEKK GĦANDIX PROBLEMA?

Hemm xi ftit affarijiet li jistgħu jiġru jekk int għandek muskoli tal-qiegħ tal-pelvi dgħajfin. Int tista' tkun:

- tqattar ammonti żgħar ta' awrina meta tisgħol, tagħtas, terfa', tidħaq jew tagħmel l-eżerċizzju;
- ma tkunx tista' tikkontrolla l-ħruġ tar-riħ;
- jkollok mnejn tħoss bżonn urġenti biex tbattal il-bużżieqa tal-awrina jew imsarneq;
- tqattar kakka wara li tkun mort it-tojlit;
- issibha bi tqila tnaddaf lilek innifsek wara li tipporga;
- issibha bi tqila tipporga jekk ma tibdilx il-pożizzjoni jew jekk ma tużax subgħajk biex jgħin; jew
- tħoss nefha fil-vaġina tiegħek jew tħoss tkaxkir bħallikieku għandek il-period, speċjalment fi tmiem il-jum li jista' jfisser li wieħed jew aktar mill-organi tal-pelvi jistgħu jkunu qed jiddendlu 'l isfel fil-vaġina tiegħek. Dan hu magħruf bħala prollass tal-organi tal-pelvi. Il-prollass hu komuni hafna u jġri fil-każ ta' madwar wahda minn kull għaxar nisa fl-Awstralja.



You may also have sexual problems. Just after your baby is born, you will be very tired and busy with your baby. Vaginal birth can cause weakness around the vagina or a lack of feeling. Vaginal tears and trauma can cause pain for many months. While breast feeding, oestrogen levels may be low and so the vagina may be dry, which can cause more problems. It may be helpful for you and your partner to talk about these issues with a health professional.

HOW CAN I TELL IF I MIGHT GET BLADDER AND BOWEL PROBLEMS?

Some women seem more likely to have bladder and bowel problems, even if they have had quite easy birth. We can't yet tell who these women might be.

Women who already have bladder or bowel symptoms, such as irritable bowel syndrome or an urgent need to pass urine (also called overactive bladder) will be more likely to have this problem worsen or to gain new problems. Constipation, coughing and obesity can also make problems worse.

Certain things about the birth can make a woman more likely to have bladder and bowel problems:

- having your first baby;
- having a large baby;
- having a long labour, chiefly the second stage of labour; or
- a difficult vaginal delivery, when you have stitches after being cut or having a big tear just outside or in your vagina when the baby is helped out by the vacuum cap or the doctor uses forceps.

WHAT IF I HAVE A CAESAREAN BIRTH?

Choosing a caesarean birth might seem like a way to avoid these problems, but it is not that simple. A caesarean birth might reduce the risk of severe bladder control problems from 10% to 5% for a first baby, but after the third caesarean there may be no benefit at all. And caesarean births carry their own risks. Babies born this way are more likely to have breathing problems at birth. It can be more risky for the mother and scarring from caesarean births can make pelvic surgery more difficult in the future. So you may be trading one problem for another.

Int jista' jkollok ukoll problemi sesswali. Hekk wara li titwieled it-tarbija tiegħek, int ser tħossok għajjiena ħafna u mħabbta ħafna bit-tarbija. It-twelid vaginali jista' jikkawża dgħjufija madwar il-vagina jew ma tħoss xejn. Tiċriet u trauma vaginali jistgħu jikkawżaw uġiġh għal ħafna xhur. Waqt li tkun qed tredda', il-livelli tal-oestrogen jistgħu jkunu baxxi u hekk il-vagina tiegħek tista' tkun niexfa, li tista' tikkawża aktar problemi. Tista' tkun ħaġa tajba jekk int u s-sieħeb tiegħek titkellmu dwar dawn l-affarijiet ma' professjonist tas-saħħa.

KIF NISTA' NGHID JEKK JISTAX IKOLLI PROBLEMI TAL-BUZZIEQA TAL-AWRINA U TAL-IMSAREN?

Mid-dehra xi nisa jkollhom probabbilità akbar ta' problemi tal-bużżieqa tal-awrina u tal-imsaren, anki jekk kellhom twelid pjuttost faċli. Aħna ma nistgħux ngħidu min jistgħu jkunu dawn in-nisa.

Nisa li diġà kellhom sintomi tal-bużżieqa tal-awrina jew tal-imsaren, bħal sindrom tal-imsaren irritati jew bżonn urġenti li jgħaddu l-awrina (magħruf ukoll bħala bużżieqa tal-awrina attiva żżejjed) ser ikollhom probabbilità akbar li din il-problema tmur għall-agħar jew ikollhom problemi akbar. Il-kostipazzjoni, s-sogħla u l-obeżità jistgħu jagħmlu l-problema agħar.

Ċerti affarijiet dwar it-twelid jistgħu jirriżultaw li l-mara jkollha probabbilità akbar ta' problemi tal-bużżieqa tal-awrina u tal-imsaren:

- ikollok l-ewwel tarbija;
- ikollok tarbija kbira;
- ikollok twelid twil, speċjalment wara t-tieni stadju ta' twelid; jew
- ikollok twelid diffiċli vaginali, meta jkollok il-punti wara li jkunu għamli qasma jew ikollok tiċrita kbira preċiżament 'l barra jew fil-vagina tiegħek meta t-tarbija tkun qed tiġi mgħejjuna biex toħroġ permezz ta' kap tal-vakuum jew meta t-tabib juża l-forċipi.

X'JIGRI JEKK IKOLLI TWELID PERMEZZ TA' ĊESARJA?

Meta tagħzel li twelid permezz ta' ċesarja jista' jidher li hu mod kif tevita dawn il-problemi imma mhux daqshekk faċli. Twelid b'ċesarja jista' jnaqqas ir-riskju ta' problemi serji tal-kontroll tal-bużżieqa tal-awrina minn 10% sa 5% għall-ewwel tarbija imma wara t-tielet ċesarja jista' ma jkun hemm l-ebda benefiċċju. U twelid b'ċesarja għandu r-riskji tiegħu. Tfal imwiela b'dan il-mod għandhom aktar probabbilità li jkollhom problemi tan-nifs meta jitwiellu. Tista' tinvolti riskju akbar għall-omm u l-markar tal-ferita mit-twelid b'ċesarja jista' jagħmel l-operazzjoni tal-pelvi aktar diffiċli fil-futur. Mela jista' jagħti l-każ li int qed tkun twarrab problema biex tlaqqat oħra.





In many cases, a vaginal birth runs just as planned and is a lovely event for parents, so this type of birth is best when possible. But problems can still happen. Research is now looking at how we can better know about and stop harm to the pelvic floor during birth. For now, pregnancy and birth involves making a choice between different kinds of risk. You and your partner need to think about these risks and discuss them with your pregnancy care professional. No one can promise you and your baby a perfect outcome.

WHAT CAN I DO ABOUT WEAK PELVIC FLOOR MUSCLES?

The birth of a baby might have stretched your pelvic floor muscles. Any 'pushing down' action in the first weeks after the baby's birth might stretch the pelvic floor again. You can help to protect your pelvic floor muscles by not pushing down on your pelvic floor. Here are a few ideas to help you.

- Try to squeeze, lift and hold your pelvic floor muscles before you sneeze, cough, blow your nose or lift.
- Cross your legs and squeeze them tightly together before each cough or sneeze.
- Share the lifting of heavy loads.
- Don't do bouncing exercises.
- Do pelvic floor muscle training to strengthen your pelvic floor muscles (See the leaflet "Pelvic Floor Muscle Training for Women").
- Keep good bladder and bowel habits:
 1. eat fruit and vegetables;
 2. drink 1.5 - 2 litres of fluid per day;
 3. do not go to the toilet 'just in case' as this might cut down how much your bladder can hold; and
- Try not to get constipated.
- Don't strain when opening your bowels. A good way to sit on the toilet is to put your forearms onto your thighs and, with your feet close to the toilet, raise your heels. Relax your pelvic floor muscles and gently push.

F'ħafna każi, twelid vaginali jsefħ hekk kif kien ippjanat u jkun episodju ta' ferħ għall-ġenituri, mela dan it-tip ta' twelid hu l-aħjar meta jkun possibbli. Imma xorta waħda jista' jkun hemm problemi. Ir-riċerka issa qed tħares lejn kif nistgħu nkunu nafu aħjar dwar u nwaqqfu l-ħsara tal-qiegħ tal-pelvi matul it-twelid. Għalissa, it-tqala u t-twelid jinvolvu għażla bejn tipi differenti ta' riskji. Hemm bżonn li int u s-sieħeb/sieħba tiegħek taħsbu dwar dawn ir-riskji u tiddiskutuhom mal-professjonist tagħkom tal-kura tat-tqala. Ħadd ma jista' jwegħedkom li int u t-tarbija tagħkom ser ikollkom riżultat perfett.

X'NISTA' NAGħMEL DWAR IL-MUSKOLI DGHĀJFIN TAL-QIEGħ TAL-PELVI TIEGħI?

It-twelid ta' tarbija seta' stira l-muskoli tal-qiegħ tal-pelvi tiegħek. Kwalunkwe moviment ta' 'imbuttar 'l isfel' fl-ewwel ġimgħat wara t-twelid tat-tarbija jista' jerġa' jistira l-muskoli tal-qiegħ tal-pelvi. Int tista' tgħin biex tħares il-muskoli tal-qiegħ tal-pelvi tiegħek bill ma timbuttax 'l isfel fuq il-qiegħ tal-pelvi tiegħek. Hawn xi ftit idejat biex jgħinuk.

- Ipprova aghfas, erfa' u zomm il-muskoli tal-qiegħ tal-pelvi tiegħek qabel ma tagħtas, tisgħol, tomħot jew terfa'.
- Sallab riġlejk, u aghfashom flimkien sewwa qabel kuldarba li tisgħol jew tagħtas.
- Aqsam ma' ħaddieħor l-irfiġħ ta' tagħbijiet tqal.
- Toqgħodx tagħmel eżercizzji li jinvolvu qbiż.
- Aghmel eżercizzju tal-muskoli tal-qiegħ tal-pelvi biex issaħħaħ il-muskoli tal-qiegħ tal-pelvi tiegħek (Ara l-fuljett "Eżercizzji tal-Muskoli tal-Qiegħ tal-Pelvi għan-Nisa").
- Żomm drawwiet tajba tal-bużżieqa tal-awrina u tal-imsaren:
 1. kul frott u ħaxix;
 2. ixrob 1.5 – 2 litri ta' fluwidu kuljum;
 3. tmurx it-tojlit 'għalli jista' jkun' għax dan jista' jnaqqas l-ammont ta' kemm il-bużżieqa tal-awrina tiegħek tkun tista' żzomm; u
- Evita l-kostipazzjoni.
- Titqanzaħx meta tkun qed tbattal imsarnek. Pożizzjoni tajba meta tpoġġi fuq it-tojlit hi li tqiegħed minkbejk fuq koxxtejk u b'saqajk qrib it-tojlit, erfa' għarqbejk. Serrah il-muskoli tal-qiegħ tal-pelvi tiegħek u imbotta bil-mod.





- Keep your weight within the right range for your height and age, and try not to gain too much during pregnancy.
- Continue to exercise.
- Ask for advice about bladder infections.

For more information, see the leaflet “Good Bladder Habits for Everyone.”

WILL THINGS GET BETTER?

Do not lose heart. Even very poor bladder or bowel control just after giving birth can get better without help in the first six months, as the pelvic floor tissues, muscles and nerves mend.

Regular pelvic floor muscle training kept up over the long term, as well as the right advice, will help.

Don't forget to look after yourself at a time when it is easy to neglect your own needs.

If things are not getting better after six months, speak to your doctor, physiotherapist, or continence nurse advisor.

SEEK HELP

Qualified nurses are available if you call the National Continence Helpline on 1800 33 00 66* (Monday to Friday, between 8.00am to 8.00pm Australian Eastern Standard Time) for free:

- Information;
- Advice; and
- Leaflets.

If you have difficulty speaking or understanding English you can access the Helpline through the free Telephone Interpreter Service on 13 14 50. The phone will be answered in English, so please name the language you speak and wait on the phone. You will be connected to an interpreter who speaks your language. Tell the interpreter you wish to call the National Continence Helpline on 1800 33 00 66. Wait on the phone to be connected and the interpreter will assist you to speak with a continence nurse advisor. All calls are confidential.

Visit bladderbowel.gov.au or continence.org.au/other-languages

* Calls from mobile telephones are charged at applicable rates.

- Ara li l-piż tiegħek ma jiskorrix il-livell li jgħodd għat-tul u l-età tiegħek u pprova żżidx hafna fil-piż matul it-tqala.
- Kompli agħmel l-eżerċizzju.
- Itlob parir dwar l-infezzjonijiet tal-bużżieqa tal-awrina.

Għal aktar tagħrif, ara l-fuljett “Drawwiet Tajba tal-Bużżieqa tal-Awrina għal Kulhadd.”

L-AFFARIJET SER IMORRU GĦALL-AĦJAR?

Taqtax qalbek. Kull kontroll dgħajjed tal-bużżieqa tal-awrina jew tal-imsaren eżatt wara li twelled jista' jittjeb mingħajr għajjuna fl-ewwel sitt xhur, għax it-tessuti, il-muskoli u n-nervituri tal-qiegħ tal-pelvi jissewwew.

Eżerċizzji regolari tal-muskoli tal-qiegħ tal-pelvi li jkomplu fuq firxa ta' żmien twil, flimkien ma parir tajjed ser jgħinu.

Tinsieq tiegħu f'isieb tiegħek innifsek fi żmien li jkun faċli tittraskura l-bżonnijiet tiegħek.

Jekk l-affarijet mhux qegħdin imorru għall-aħjar wara sitt xhur, kellem lit-tabib, fizjoterapista jew in-ners konsulenta tal-kontinenza tiegħek.

ITLOB L-GĦAJNUNA

Hemm nersis ikkwalifikati jekk iċċempel lin-National Continence Helpline fuq 1800 33 00 66* (mit-Tnejn sal-Ġimgħa, bejn it-8.00am to 8.00pm AEST (Ħin Standard tal-Lvant tal-Awstralja)) mingħajr ħlas:

- Informazzjoni;
- Pariri; u
- Fuljetti.

Jekk ikollok diffikulta' biex titkellem jew biex tifhem bl-Ingliż jista' jkollok aċċess għall-Helpline permezz tat-Telephone Interpreter Service fuq 13 14 50 b'xejn. It-telefon ikun imwieġeb bl-Ingliż, għalhekk għid liema lingwa titkellem u stenna fuq it-telefon. Tkun ikkonnettjat/a ma' interpretu li jtkellem il-lingwa tiegħek. Għid lill-interpretu li tixtieq li iċċempel lin-National Continence Helpline fuq 1800 33 00 66. Stenna fuq it-telefon biex tkun ikkonnettjat/a u l-interpretu jgħinek biex titkellem ma' ners li tagħti pariri dwar il-kontinenza. It-telefonati kollha huma konfidenzjali.

Żur bladderbowel.gov.au jew continence.org.au/other-languages

* Telefonati minn fuq telefonijiet mowbajl ikunu ċċarġjati r-rati li japplikaw.

