

## PHYSICAL THERAPY MANAGEMENT OF A GERIATRIC FEMALE WITH SEVERE URNINARY INCONTINENCE

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The patient gave consent to participate in physical therapy and to be a subject for this case report.

**BACKGROUND and PURPOSE:** Urinary incontinence impacts approximately 70% of long-term care residents. Nearly 12 billion dollars are spent each year to treat this condition which can lead to social isolation and reduced quality of life. Conservative treatment often includes physical therapy, e.g. pelvic floor muscle (PFM) training, biofeedback, vaginal cones. The goal of this case report is to report the effectiveness of PFM training and electrical stimulation on urinary incontinence in an elderly female.

**CASE DESCRIPTION:** A 91-year-old female presented with loss of bladder sensation and very severe incontinence per the Incontinence Severity Index (ISI) after fainting secondary to dehydration. She presented with multiple prescriptions and co-morbidities, including a prolapsed uterus following 7 vaginal deliveries. The patient was seen daily for 45 minutes with treatment focused on the Roll for Control program (10 sessions) and two sessions of electrical stimulation to strengthen her PFM.

**OUTCOMES:** At discharge, the patient reported improved bladder sensation and awareness of her pelvic floor and fewer episodes per day of incontinence. In spite of these gains, her ISI rating remained in the severe range. She returned to her assisted living apartment with a home exercise program following her discharge from in-patient rehabilitation.

**CONCLUSIONS:** This geriatric female showed a short-term decrease in urinary incontinence and improved bladder sensation following physical therapy to increase the strength of her pelvic rotator cuff. Further research is warranted to verify the long-term benefits of this program, determine if this approach might be effective with other patient populations, e.g. younger females, and to develop more consistent physical therapy treatment and assessment guidelines for this condition.