

# PT helps patients deal with urinary incontinence

By Laura Raines  
Pulse editor

Ruth Maher, PT, MPT, DPT, CEAS, and clinical director of the Maher Rehabilitation Institute in Kennesaw, grew up in Dublin, Ireland, with a brother who had developmental delays and physical impairments.

Her mother went to the library, read everything she could find on the subject and applied it. "Without knowing it, she was doing physical therapy, and I saw the difference it made," Maher said. "She's the reason I went into physical therapy."

Wanting to graduate at the highest level, Maher earned her master's degree from Georgia State University and her doctorate in physical therapy from Simmons College in Boston.

In her practice, Maher has encountered many women who have lived with bladder problems for years. She has tried to help them by teaching them Kegel exercises, developed by Dr. Arthur Kegel in the 1950s to strengthen the pelvic-floor muscles.

"Patients would tell me that they'd tried Kegels, and they didn't work. The difficulty in doing these exercises is knowing whether you're doing them effectively," she said.

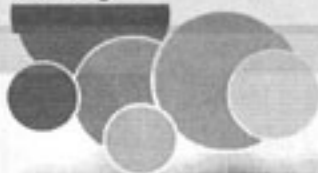
A 2004 urology study estimates that more than 17 million Americans experience urinary incontinence, and, while it is not life-threatening, it diminishes the quality of life. The majority of them have genuine stress urinary incontinence and leak when they laugh, cough, sneeze or exercise. Others have overflow incontinence — leakage that occurs without warning, usually as the result



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Ruth Maher uses an ultrasound imaging device to see Starr Sellers' bladder at the Maher Rehabilitation Institute.

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of a medical condition. Some have urinary frequency, known as overactive bladders.

"People often associate loss of bladder control with old age, but it's not a normal part of aging," Maher said. "There is no drug to cure urinary incontinence, and those that help overactive bladders have side effects."

While about 10 percent of women with bladder problems have surgery for pelvic organ prolapse or urinary incontinence, surgery does not always solve the problem.

### A new treatment

Looking for a better therapy, Maher encountered the work of Paul Hodges, who was using ultrasound to image low back muscles and electromyography to provide biofeedback to help patients rehabilitate the deep muscles of the lower back and abdomen.

Based on research in Europe and Australia, Maher developed the Maher method of effective bladder control, a multimodality approach that is patent-pending. It helps patients reclaim control of the muscles that manage bladder control through physical therapy, exercise and technology.

Patients referred by doctors are evaluated through

conventional physical therapy testing to assess range of muscles and other factors.

Maher uses real-time ultrasound imaging to produce images of internal organs and muscles on a video screen. An EMG machine provides data as to how much the muscle is contracting as patients learn to properly contract the muscles of their pelvic floor, and synergistic muscles and to retrain weakened muscles. In some cases, electrical stimulation and behavioral-modification techniques are used to recruit muscle function. Each program is based on the individual.

While the method can't reverse all conditions, most patients can be helped with seven to eight sessions.

"Humans are such visual learners. They can actually see how the muscle moves and feels when they are doing the exercise correctly," Maher said. "In the past, physical therapists haven't had many diagnostic tools. We've relied on touch and palpitation."

"I guide my practice not by what I feel but by what I see, and what is fantastic is that sonography is noninvasive and safe, since it uses sound waves, not X-rays."

Maher's patients then practice using the method to recover the muscles at home in prone, sitting and standing positions. More than 90 percent of her patients with stress urinary incontinence achieve complete resolution of bladder control problems through her method because they learn independently how to strengthen their pelvic muscles, Maher said. She's also had good results with women with overactive bladders.

Last December, Maher opened the Maher Rehabilitation Institute in Kennesaw, where she practices a variety of physical therapy interventions and ergonomic assessments, in addition to her method for treating urinary incontinence.

"Opening a business is scary and time-consuming," Maher said, "but I felt like I could make a difference for a lot of women."

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