



Take the First Step!

By Nicole Cozean, PT, DPT, WCS

Whether you're an experienced athlete or have never exercised regularly, there are ways to move towards regular physical activity.

Exercise can be an integral part of healing with interstitial cystitis, but it's often a confusing topic for patients. It's important to realize—as with many aspects of IC—that there's no one-size-fits-all answer. It's always crucial to listen to your body, both recognizing your current limitations and working towards your ultimate exercise goals.

In my experience, patients often fall into one of three mindsets. Some are intimidated by returning to exercise, worried that anything they do will flare their symptoms and set them back. They've often had a bad experience in the past and aren't quite sure how to take the first steps back to regular exercise. If you are in this category, you may need some gentle encouragement to try again and a step-by-step plan for returning to exercise.

On the other end of the spectrum are patients who are eager to get back to high level activity. Many in this category are former athletes or weekend warriors eager to resume their previous exercise routines and angry that IC has gotten in the way. Those in this category tend to overdo it, pushing their bodies frequently and experiencing setbacks, flares or

nagging injuries instead of the benefits of exercise. It's certainly possible to return to your normal activity level, but it's important to focus on building a foundation that allows you to safely and sustainably return to exercise.

The third category are those who don't have much experience with exercise prior to their IC diagnosis at all. Many intellectually know the benefits of exercise but feel uncomfortable in starting. You may feel uncoordinated during exercises or intimidated by a big gym, and you'd rather be doing anything else. You hear that “exercise” is important for chronic pain relief, but you aren't sure where you would start even if you didn't have IC!

Those in all three categories can reach their goals and see the benefits of exercise. Regardless of which category you fall into, we always recommend working with a pelvic floor physical therapist experienced in working with interstitial cystitis. They can help develop a customized plan for your specific case, and some even offer remote phone or Skype consultations to build your action plan.

Exercise Dos and Don'ts

Dos

Take a first step, even if it's a small one
Listen to your body
Modify exercise if you experience any pain or increased IC symptoms
Gradually build towards your exercise goals
Incorporate stretching, foam rolling, and other types of self-care into your definition of exercise
Focus on the entire core and how the entire system works together
Consult with a physical therapist to determine the right exercise plan for you

Don'ts

Believe that exercise isn't possible because of interstitial cystitis
Stick to your original plan, regardless of how you feel
Push through pain
Try to get there all at once
Think it only counts as exercise if you're exhausted at the end of a workout
Focus on a "six-pack"
Follow a trendy, one-size-fits-all exercise program not tailored for IC or pelvic pain

Benefits of Exercise

Appropriate exercise is often an integral part of treating interstitial cystitis. Exercise is always important for the body, with many underlying benefits—everything from improving cardiovascular health to giving more restful sleep to boosting energy and the immune system. Moderate exercise can improve your mood, and it has actually been shown to be just as effective as anti-depressant medications.

Exercise also can have specific benefits for those with interstitial cystitis or pelvic floor dysfunction. Any movement brings blood flow to the pelvic region, bringing important healing nutrients to the cells and clearing out inflammation and waste that can build up. When the muscles move, they naturally stretch and help restore normal motion to the area.

With all those benefits, exercise can be an important piece of a holistic treatment plan. However, don't feel like you need to throw your body into exercise before you're ready. Some patients need to focus on getting their symptoms to a manageable level before exercise can really be a valuable tool, while others are ready to make that step almost immediately.

Things to Avoid with IC

There are only a few things that all patients with interstitial cystitis or pelvic floor dysfunction should specifically avoid. For our patients, that list includes:

- Kegel exercises
- Abdominal crunches
- Doing nothing

The reason to avoid "Kegels" (the voluntary squeezing of the pelvic floor muscles) is that the pelvic floor is nearly always already too tight and clenched (hypertonic) in patients with interstitial cystitis. The goal of physical therapy and gentle exercise programs is to relax those

muscles back to their normal length, while Kegels further squeeze and clench those muscles. Imagine trying to do a calf raise while that muscle is cramping—that's what Kegels are doing to a hypertonic pelvic floor.

Abdominal crunches put pressure directly above the bladder. Those abdominal muscles attach right above where the bladder sits, and where many patients experience suprapubic pain. Tightness in these muscles can make it more difficult for the bladder to expand, exacerbating feelings of urinary urgency and frequency.

Conversely, doing nothing also should be avoided. We gently push patients to return to some form of exercise. It doesn't have to be intense, intimidating, or scary, but the benefits of movement are too important to ignore.

Exercises for Everyone

Like most recommendations for interstitial cystitis, how to exercise will be unique to your particular case. Always listen to your body and avoid any movements that significantly flare your IC symptoms. Light muscle soreness is fine in the areas that you've been exercising, but it shouldn't cause IC-specific discomfort.

The types of exercise I would be comfortable recommending to all patients would be walking, yoga, stretching, or swimming. Of course, be gentle to your body when starting any new exercise program. For walking, try to start by walking on a flat and level surface, gradually building up to walking longer distances. For yoga, starting with a gentle form ("restorative," "Yin," or stretching-based) is best for beginners. In the same way, if you're taking up swimming, begin slowly and listen to your body as you build up strength and endurance.

Expand your Definition of Exercise

We live in a culture that's awash in advice about exercise, each new trend more extreme than the last. You aren't considered a serious runner anymore unless you're doing

ex•er•cise

activity requiring physical effort, carried out especially to sustain or improve health and fitness.

hundreds of miles a week; we hear about boot camps, HIIT, Crossfit, triathlons, and Spartan races all the time. Part of the challenge is rejecting this culture that's pushing us to do more and reset your definition of exercise. Any physical activity you do to improve your health counts as exercise.

The true definition of exercise is simply “activity requiring physical effort, carried out especially to sustain or improve health and fitness.” That's it. So if you're struggling to get back into exercise because you think it requires more than your body can take, get back to the true definition of exercise. Start there.

A gentle stretching routine that helps with IC symptoms counts as exercise. Working on a foam roller to relieve tight muscles in your glutes, hamstrings, and quads is exercise. Even deep breathing, which we recommend to almost everyone with pelvic pain and IC, can be a first step towards getting back to regular exercise. Just start.

High-Level Exercise with IC

Now, many people can (and do!) strenuous exercise with interstitial cystitis. We've had many patients get back to running, hiking, lifting weights, cycling, or playing organized sports with the condition—it's possible! Before beginning, it's important to do an honest assessment about your goals (both short-term and long-term) and what you're currently capable of doing.

You'll want to ask yourself about how long it's been since you were able to do your chosen activity. Many of us still think of ourselves as a runner or athlete, even if it's been years since we've done that at a high level. One of the biggest pitfalls is that feeling that since you used to run five miles a day, you should be able to easily get out for a mile run tomorrow. If you haven't run in years, then that might be too much for your body.

That doesn't mean you can't get back to where you want to be, it just means that you'll need to be patient with your body and build more gradually to that level. Shift your paradigm and meet yourself where you are. In the example of getting back to running, start with jogging and walking in intervals, or running for time rather than for distance. Build slowly and modify your short-term goals as you reach them. You'll get there!

It's always best to be cautious when getting back into exercise and build a solid foundation to prevent injuries or flaring IC symptoms, but it's certainly possible and can be extremely valuable and rewarding.



The Abs Are Not the Core

Instead of focusing solely on the abdominal muscles, it's always better (regardless of whether you have IC) to focus on the entire core, including the low back, glutes, hamstrings, hip flexors, and abdominal muscles. Many times specific muscles are either overly tight or overly weak; working with a trained pelvic physical therapist can give you a individualized core strengthening program. Some Pilates-type exercises can also be beneficial, though many of the movements and cues should be modified to not over-activate the pelvic floor. So scrap the conventional model of “ab strengthening” and replace it with functional movements that incorporate the entire core.

The Takeaway

Regardless of where you're at in your IC journey, adding exercise can be an important step. It can be scary for some, but always listen to your body, start slow, and consult with a qualified pelvic floor physical therapist if you need help!

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