

Optimising women's health:

A visual resource

Pelvic health, bowel health, heart
health and healthy aging

In support of the
**Scottish Government's
Women's Health Plan**



The Health and Social Care Alliance Scotland (the ALLIANCE) hosted a series of webinars on various important topics related to women's health. These sessions looked at certain areas that aren't often talked about from the perspective of women's health, or that still carry stigma and embarrassment when talking about them. Being aware of these areas of health is important for women to maintain good health in the long-term and feel confident and comfortable both physically and mentally.

These webinars were run in partnership with the Scottish Government, and in support of the Scottish Government's Women's Health Plan.

This booklet brings together four graphic resources that were produced to summarise the discussions of each webinar. The graphics present central points raised by panellists, as well as key themes. The graphics were created by Clare Mills of [Listen Think Draw](#).

In this booklet you will find graphics related to:

- **Pelvic health**
- **Bowel health**
- **Heart health**
- **Healthy aging**

Join our mailing list:

Follow and tag us on social media:

For more information on women's health see NHS Inform:

How can you use this visual resource?

- Learn more about these areas, including how to maintain good health and optimise health in the long-term, or how to manage symptoms and get support should you have concerns
- Share the graphics with friends, family and colleagues to help them understand your experience, and help you to vocalise your symptoms and what support you might need
- Use as conversation points with a group – whether that be of friends, an employee network, a peer support group, or community group
- Share on social media to raise awareness of women's health and keep the conversation going



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[@ALLIANCEscot](#)



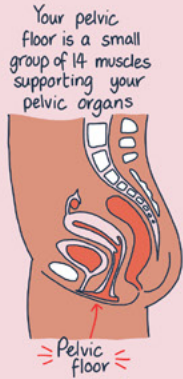
[The ALLIANCE](#)



nhsinform.scot/healthy-living/womens-health

PRIORITISING PELVIC HEALTH

UNDERSTANDING THE PELVIS & THE PELVIC FLOOR



Want you to live your best life

Physio / Practitioner with special interest / Specialist / Highly specialist / Advanced practitioner / Consultant physio

Go to your GP first → refer you to physio
Or explain how to self refer

Tell physio everything

We will give you time

Appointments can last between 20 minutes & 1 hour

Symptoms questionnaire

Diary

drinks symptoms bowel habits food

The more we know, the more we can help

Optional Physical examination often at 1st appointment

Chaperone if you would like

Only takes a few minutes

Physio will discuss realistic expectations

Average patient sees physio 4-6 times over 6 months

Prescription

Exercise

Treatment is tailored to you

Bladder training

Things your physio can help with:

- Stress Urinary Incontinence
- Overactive Bladder Syndrome
- Urge Urinary Incontinence
- Mixed Incontinence (stress & urge)

Sneeze! Cough! Laugh!

Painful bladder syndrome

Vaginal prolapse

Faecal Incontinence

Pelvic pain

Sexual dysfunction

Nocturia

Under 80s should pee 0-1 / night

Over 80s should pee 1-2 / night

NO drinks 3 hours before bed

TIPS FOR MAINTAINING GOOD PELVIC HEALTH

There are things we can all do to keep our pelvic floor in good shape. Keep your pelvic floor strong & active, just like any other muscle. To exercise your pelvic floor, you should:

- Close the back passage (as if you are trying to stop yourself from passing wind but try not to clench your buttocks)
- Try to squeeze your vaginal muscles up & in - try not to pull your stomach in when you are doing this

Do a combination of both long & short squeezes

Try to exercise

High impact exercise may make symptoms worse - talk to your physio

www.nhsinform.scot for more info & video

Apps - Squeazy & reminders

Maintain a healthy weight

Ask for support

Keep well hydrated 1½ - 2 litres a day

Cutting out caffeine can help with urgency & frequency of the bladder

Keep fizzy drinks & alcohol for treats

Watch out for artificial sweeteners as they can affect bowel / bladder

Don't strain on the toilet

Try to only go when you need to

Give up smoking - by-products end up in your bladder

Take your routine screenings particularly cervical, bowel & breast. Check NHS Inform to see if you are eligible

QUESTIONS

thepopg.co.uk
pelvicpain.co.uk

Physio department can share a list of private physios

Some areas are self referral and some via GP

Exercise pelvic floor from teenage years

How do we get the message out?
Have appropriate conversations

Talk to people in your circle

Women's Health Plan
www.alliance-scotland.org.uk

ILLUSTRATION BY
WWW.LISTENTHINKDRAM.CO.UK



GUT HEALTH

Dr. Mhairi Collie

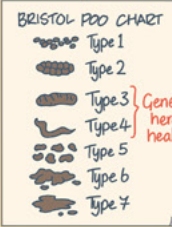


Good gut health is in easy reach

- diet
- lifestyle



Soft but solid poods move best through the bowel



It takes 3 days for poo to travel through

Generally here is healthy

Eating a balanced diet will help

For a healthy gut, we need:



Our body is always renewing & repairing



INCONTINENCE

In 10 adults have bowel incontinence

SYMPTOMS:

Bowel incontinence is an inability to control bowel movements eg. suddenly needing the toilet & not making it. Leaking poo



MEDICATION (IF NEEDED)

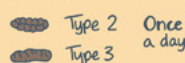
Husk, Ispaghula / Psyllium

Aids to evacuation (help you to do a complete poo)
- Glycerin suppositories, Mini-enemas, Irrigation
Unstimulants
- Loperamide, Immodium

Very few people need surgery

- Repair
- Prolapse
- Stoma

WHAT POO TYPE TO AIM FOR?



WHAT CAN HELP?

More carbs - wheat based foods, potatoes
More insoluble fibre: nuts, seeds, brown rice



Less: Curry, Beer, Wine
Caffeine, Lentils, Fruit & vegetables

Exercises for pelvic floor good for everyone
NHS Squeazy app

Some people may have food sensitivities

IBS

SYMPTOMS:

Bloating
Cramps
Too much/little poo



MEDICATION (IF NEEDED)

Softeners - Lactulose / Dulcoese
Bulkers - Fybogel / Optifibre / Normacol / Psyllium husk
Muscle relaxers - Buscopan / Colpermin

INCREASE

WHAT CAN HELP?

Diet:
Wheat free
Cow's milk
Fodmap
Histamine



Some people have sensitivity

Try peppermint tea
it helps bowel to relax



No caffeine
it makes bowel squeeze



WHAT POO TYPE TO AIM FOR?



HAEMORRHOIDS / PILES



Often type 1 poo

SYMPTOMS:

A lump hanging down outside bottom
Bleeding after doing a poo
Soreness, itching, redness & swelling around bottom

WHAT CAN HELP?

Avoid constipation
Protect pelvic floor while heavy lifting
Do not strain when going for a poo
Common during pregnancy but usually disappear



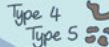
MEDICATION (IF NEEDED)

Rest + ice pack
Stool softeners
Pain killers
Pain killing ointment - Anusol / Germaolid
Anti-inflammatory ointment - Scheriproct / Proctosedyl



Surgery is the last option

WHAT POO TYPE TO AIM FOR?



WOMEN'S BOWEL HEALTH

Let's talk about POO

CONSTIPATION

SYMPTOMS:

Difficult to poo
Poing less often than usual
Stomach cramps & pain
Feeling bloated



WHAT CAN HELP?

Eat more fibre
Stay hydrated
Exercise
Toilet habits



MEDICATION (IF NEEDED)

Softeners: Lactulose, Dulcoese, Fybogel
Wash throughs: Macrogel, Cosmocal, Laxido
Squeezers: Senokot, Bisacodyl, Dulcolax
Anal evacuators: Glycerin suppository, Microlax mini-enema

WHAT POO TYPE TO AIM FOR?



DIVERTICULOSIS

Diverticular disease = small pockets develop in the bowel
Diverticulitis = when these pockets become inflamed or infected



SYMPTOMS:

Lower tummy pain
Bloated
Fever when diverticulitis



WHAT CAN HELP?

No caffeine
Drink peppermint tea
Eat more fruit & vegetables



MEDICATION (IF NEEDED)

Softeners: Lactulose, Dulcoese
Bulkers - Fybogel / Optifibre / Normacol / Psyllium husk



WHAT POO TO AIM FOR?



BOWEL CANCER

Currently 66% uptake of screening in Scotland



Average age 60 for getting bowel cancer so testing begins at 50



The test looks for hidden poo, as this could mean a higher chance of bowel cancer

If you have a positive result you will be referred for a colonoscopy

SYMPTOMS:

Blood in stool
Change in bowel (usually diarrhoea)
Abdominal pain
Unexplained weight loss
Anaemia



WHAT CAN HELP PREVENT BOWEL CANCER?

Have your risk:
30 mins exercise / day
5 portions fruit & vegetables
Cut down alcohol
Stop smoking

SUPPORTING OTHERS



How to support others & help them to manage incontinence?

- ↳ Reassure them so they are not embarrassed
- ↳ Go at a regular time
- ↳ Try to have 1 poo a day - don't be scared to use immodium
- ↳ Watch diet & tea/coffee intake



WOMEN'S HEART HEALTH MYTHS

Maggie Simpson, Advanced Nurse Practitioner



Inherited heart disease (runs in families)
Congenital heart disease (a fault/problem with heart present at birth)
Acquired heart disease (After birth, usually as we age.)

in SCOTLAND in 1 month
 1500 people will die from heart or circulatory disease
 700,000 people live with a heart or circulatory disease
 30 babies will be diagnosed with a heart defect

MYTH Breast cancer is the biggest threat to women in Scotland
FACT: 3 times as many women in Scotland die of heart disease

MYTH Heart disease only happens after menopause
FACT: In adulthood (18+) & middle age there are many risks of heart disease

MYTH Women have the same risk factors as men
FACT: Yes... High blood pressure, Diabetes, Kidney disease, High cholesterol, Overweight, Air pollution, Smoking, Poor diet, High cholesterol affect men & women

MYTH Men & women can present with same common heart conditions
FACT: Yes... Can present with same common heart conditions

MYTH Heart attack presents as chest pain
FACT: Chest pain, Pain in arms, neck, back, jaw &/or tummy, Lightheaded / dizzy, Sweating, Nausea, Anxiety, Shortness of breath

FACT: Women with risk factors for heart disease less likely to access same treatments as men

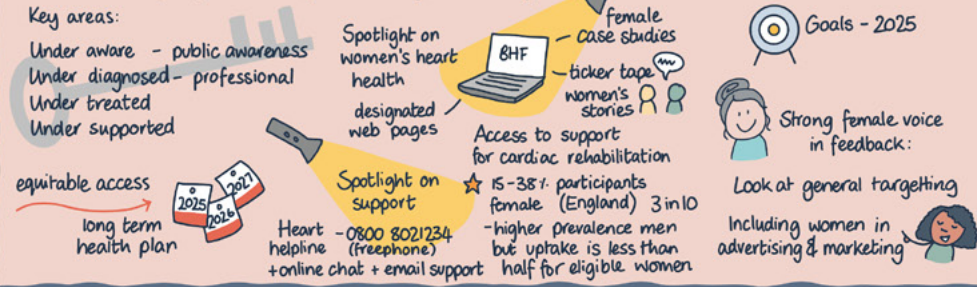
FACT: Women's symptoms might sometimes be minimised or under recognised
 Women's symptoms might sometimes be minimised or under recognised
 Pregnancy & heart disease: Should have access to healthcare professional
 Contraception & heart disease: Pregnancy intention? Risk? Side effects? www.contraceptionchoices.org www.socn.scot.nhs.uk

Know your numbers
 Blood sugar - how much sugar in your blood
 Blood pressure - force of blood against arteries when heart beats (top number) & rests (bottom number)
 Cholesterol - Waxy substance produced by the liver. Too much = hard for blood to circulate.
 Body weight - ideal weight depends on gender, age, height & frame. BMI = good guide

Non-modifiable risk factors
 Age Gender Family Ethnicity history
But... Pregnancy, Premature menopause, PCOS, Rheumatoid arthritis
But... Some conditions are more common in women: Autoimmune diseases - lupus or rheumatoid arthritis are more common in women & increase risk; Breast cancer treatments increase risk
 4x more likely to die prematurely from cardiovascular disease if you live in a deprived area

BRITISH HEART FOUNDATION - SCOTLAND

Richard Forsyth, Health Systems Insight Manager

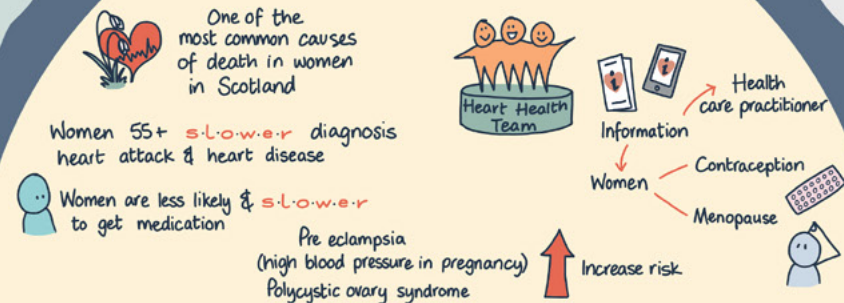


CHEST HEART & STROKE SCOTLAND

Sophie Bridger, Policy & Campaigns Manager



WHY HEART DISEASE IS A PRIORITY FOR THE WOMEN'S HEALTH CHAMPION Prof. Anna Glasier



Q&A



MYTHBUSTING WOMEN'S HEART HEALTH

EMBRACE HEALTHIER HABITS FOR A BETTER TOMORROW

Dr. Becky Howie

The average woman in Scotland has:

- 80 years **Life span**
- 60 years **Health span**
- 20 years **Unhealthy years**

CONSISTENT SMALL HABITS

Women worry about:

- Dementia
- Cancer
- Heart disease
- Osteoporosis
- Falls/frailty

DON'T WAIT TILL YOU'RE IN ILL HEALTH

Lifestyle choices can have a **BIG** impact

YOUR GENES ARE NOT YOUR DESTINY

Epigenetics

★ **Healthy diet**

Lifelong balanced diet

- Plant focused: fruit/veg, seeds, nuts
- Whole food (not made in a factory) → choose wholegrain
- Reduce ultra-processed foods → associated with diseases
- Look for ingredients you recognise
- feed gut microbiome

★ **Physical activity**

150 mins moderate activity / week or 75 mins intense activity / week

and 2 sessions resistance (30 mins) or weight training / week

- Better mental health
- Better sleep
- Lowers cancer risk
- Lowers cholesterol
- Improves blood sugar
- Exercise snacks: lunges as kettle boils
- Flexibility important too

★ **Sleep**

Poor sleep affects memory, mood, focus, hunger, risk of disease

GETTING TO SLEEP

- No caffeine after lunch
- Physical activity
- Bath
- Reduce blue light 1 hour before bed
- Dim lights

STAYING ASLEEP

- Get outside during the day
- Keep bedroom dark
- Allow bedroom to cool
- Red tone lights

WAKING TOO EARLY

- Stay warm in bed
- No bright lights until ideal wake up time
- No caffeine until 30-60 minutes after ideal wake-up
- No carbohydrates at breakfast

★ **Reduce harmful substances**

- 1 in 3 cancers relate to smoking
- Vapes unregulated → use to come off cigarettes
- Heart disease
- Stroke
- Lung disease
- Alcohol - 14 units / week over 3 days → 5th biggest risk factor for death / illness / disability
- Social media use: Comparison is the thief of joy
- time vs benefit

★ **Healthy relationships**

We are social beings

Don't squeeze time with friends & family

Real life connections

Harvard study over 85 years on men & women → Shows link between relationships in community & happiness

Building relationships: community groups, shared interest

★ **Stress management**

When stressed we produce:

- Adrenalin: ↑ Increases heart rate, ↑ Increases blood pressure
- Cortisol: high level all the time with long term stress

WHAT HELPS? Mindfulness & relaxation, Meaningful activities, Breathing techniques (regular practice), Gratitude journals

- Impacts immune system
- Impacts digestive issues
- Muscle tension & pain

OPTIMISING future health

supporting women's long-term health and wellbeing

It's never too late... be more Joan

OPTIMISING FUTURE HEALTH

Prof Anna Glasier

★ **Bone health**

Risk factors for osteoporosis:

- Being female
- Being menopausal
- Family history, particularly parental hip fracture
- Drinking heavily
- Smoking
- Being underweight - BMI <19 (especially when young)
- Some medications to treat breast cancer
- Thyroid disease
- Long term use of oral steroids
- Malabsorption eg coeliac disease
- Long periods of inactivity

Protect your bone density by:

- Stop smoking
- Limit alcohol
- Consider taking HRT in menopause
- Get outside - vitamin D
- Do muscle strengthening exercise
- FRAX - 10 year risk assessment tool online

www.fraxplus.org

★ **Heart health**

Heart disease is biggest cause of death in Scotland

Cardiovascular disease includes heart attack & stroke

Symptoms of heart attack:

- Sudden pain in chest & doesn't go away
- Spreads to your arm (left or right), jaw, back or stomach
- Can be severe pain, tightness, heaviness, burning like indigestion or just uncomfortable
- You may feel sick, sweaty, light-headed or short of breath
- Women often feel this

Coronary heart disease kills twice as many women as breast cancer

Coronary heart disease IS preventable

Heart attack: Deprived of oxygen = damage to muscle. Clot blocks flow of blood

Stroke: a clot blocks flow of blood to brain or hemorrhagic stroke - burst blood vessel impacts blood supply to brain

Reduce your risk of heart disease & stroke:

- Stop smoking
- Drink less alcohol
- Eat healthy diet
- Watch your weight
- Take your medication for blood pressure & diabetes

Symptoms of a stroke - Act FAST:

- Know signs & symptoms - act quickly
- Facial weakness - can person smile?
- Arm weakness - can person raise arms?
- Speech problems - can person speak clearly? - can person understand what is being said?
- Time - call 999 if see any of these symptoms

★ **Pelvic health**

Keeps bladder, uterus, vagina & bowel in place

Not inevitable to have urinary incontinence

Never too late to start exercising pelvic floor

1 in 10 people in community have faecal incontinence

Do not be ashamed

It's not a normal part of ageing

It can be treated

Medication to control constipation & diarrhoea

Surgery is also possible

Improve your pelvic health with lifestyle & diet:

- Watch your weight
- Stop smoking
- Do pelvic floor exercises
- Consider vaginal oestrogen
- Cut down caffeine
- Modify fluid intake

See how to exercise your pelvic floor on NHS Inform

Key to improving future health:

- Don't smoke
- Drink alcohol in moderation
- Be physically active
- Watch your weight

Don't be embarrassed or intimidated to see GP

Information

1. Prioritising pelvic health

The webinar explains the function of the female pelvic floor muscles, as well as outlining how to prevent, self manage or seek support for symptoms of bladder and bowel incontinence, and prolapse.

Speaker: Jenny Munro (NHS Highland)

Watch the webinar on Youtube:

<https://youtu.be/T1067k4G3JI>

2. Taking care of your bowel health

This webinar explores women's bowel health, including what we can all be doing to look after our gut and what we can do if we have a concern. The webinar explores some lifestyle factors that can support bowel health at any age (including specific foods and diets), as well as some bowel issues that can affect women including faecal incontinence, rectal prolapse, IBS and bowel cancer.

Speaker: Dr Mhairi Collie (NHS Lothian)

Watch the webinar on Youtube:

<https://youtu.be/5B4QHSZ44gw>

3. Mythbusting women's heart health

This webinar raises awareness of women's experiences of heart conditions, and the specific risk factors that women need to be aware of. The session busts some myths about heart disease and provides clear advice to help you look after your heart health.

Panel: Professor Anna Glasier (Women's Health Champion), Maggie Simpson (NHS Greater Glasgow and Clyde), Richard Forsyth (British Heart Foundation), Sophie Bridger (Chest, Heart and Stroke Scotland)

Watch the webinar on Youtube:

<https://youtu.be/9BuD3KY7o78>

4. Optimising future health

This webinar looks at key areas such as nutrition, exercise, sleep and how to navigate these with a view to healthy aging (no matter what age you currently are!). The session also focuses on common experiences for older women such as bone health, heart health and pelvic health.

Panel: Dr Becky Howie (NHS Lanarkshire), Professor Anna Glasier (Women's Health Champion)

Watch the webinar on Youtube:

https://youtu.be/F00ut3gi_bs

Find all these webinars and more by scanning the QR code



The Health and Social Care Alliance Scotland (the ALLIANCE) is the national third sector membership organisation for health and social care in Scotland, bringing together over 3,500 individuals and organisations committed to ensuring everyone has a strong voice and the right to live well with dignity and respect.

You can find out more on our website:

www.alliance-scotland.org.uk

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