



## Ex-Olympian takes on new challenge: Incontinence advice

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Bonnie Blair was eager to get back in shape. It was 1998, and the former Olympic athlete had just given birth to her first child, a son, about two months earlier.

“I was looking forward to getting some fresh air and some peaceful time to myself,” says Blair, 42, who won five gold medals and a bronze in three Winter Olympics. “I got half a block away and my shorts were soaked (with urine). I was thinking, ‘Is this normal?’ I was very disheartened. “But I thought, ‘OK, tomorrow is a new day.’ But it happened again the next day. Blair learned ways to cope with the problem, called stress urinary incontinence. She would wear pads, or stop in the bushes and empty her bladder frequently.

“I would find myself not drinking much water. How smart is that?” she says.

Embarrassed, Blair didn't even mention it to her husband for several months.

Finally, after a year, she told her doctor. “Since I've been working on this public education campaign, I've discovered that I was ahead of the game---most people don't say anything to their doctor for three to 10 years,” says Blair, who lives in Wisconsin.

She'll be in Phoenix next week to give a talk on stress urinary incontinence, which happens when the pelvic muscles supporting the bladder and urethra have been damaged or weakened, usually by childbirth. This causes the urethra to lose its seal and allows urine to escape with any movement that puts stress on the bladder.

“All kinds of things caused me to have an accident—lifting the laundry basket, picking my kids up, bending into the refrigerator to get something off the bottom shelf,” Blair says.

Her doctor had her do exercises called Kegels to strengthen the pelvic floor, as well as use biofeedback and electrical stimulation.

Those are treatments that many doctors will recommend to women who have SUI, says Ronald C. Burton, a urogynecologist in Mesa.

“You want to start with the simpler things first,” he says. “We see some pretty good improvement in the strength of muscle (with Kegels).”

He sometimes prescribes an estrogen cream for postmenopausal women, which helps improve the thickness of the vaginal walls.

But not every woman improves enough with those treatments, and Blair didn't. Her doctor discussed surgery with her but told her that it's not recommended until a woman is done having children. Two years later, Blair had her daughter and was ready to consider the surgery.

To correct the problem, the surgeon makes an incision in the wall of the vagina and inserts a piece of mesh tape that acts as a supportive sling for the bladder. Burton says the surgery is usually a half-hour outpatient procedure and is covered by insurance.

“It makes a huge difference,” Burton says. “Frequently, women comment that they wished they hadn’t waited so long to do it.”

Blair had the procedure in 2003 and was back on her feet in a few days: “I was so excited to get my life back.”

Now Blair travels the country discussing the procedure. Her campaign is sponsored by Gynecare, the manufacturer of the mesh sling, called TVT.

“As I traveled around to different cities, a lot of women have told me they have this. I’ve been doing TV stuff, and the makeup people will ask me about it,” she says. “This is about telling people, ‘You’re not the only one.’”

After Blair’s surgery, her doctor told her not to run for about eight weeks.

“Well, I’ve come to find out (the recovery time) is more like four weeks. “The doc knew I was an Olympic athlete, and he thought I would jump the gun,” Blair says. “I told him, ‘Hey, I’m an athlete. I’m trainable.’”

And at the end of eight weeks, she went for a run. “When I got back, I had a huge smile on my face,” she says.