

HOW TO USE TENS FOR INCONTINENCE

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PHYSICAL THERAPY &
FITNESS SOLUTIONS



A HOME
GUIDE FOR
TRANSCUTANEOUS
TIBIAL NERVE
STIMULATION (TTNS)

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WHAT IT IS & AND WHY IT WORKS

Urinary incontinence affects millions of people, and it's not just "part of getting older" or something you have to live with after pregnancy. One scientifically backed, non-invasive treatment is using a TENS unit (Transcutaneous Electrical Nerve Stimulation) on the lower leg to stimulate the tibial nerve. This approach is called Transcutaneous Tibial Nerve Stimulation (TTNS).

WHY DOES IT WORK?

The tibial nerve connects to the same nerve roots that influence your bladder and pelvic floor. By sending mild electrical pulses to this nerve at the ankle, we can help regulate bladder activity, reduce overactive bladder symptoms, and decrease urgency or leakage. It's safe, easy to do at home, and supported by multiple peer-reviewed studies.

This guide will walk you through the process step-by-step, including how to set up your TENS unit, how often to use it, and what results to expect—plus how pelvic physical therapy (in person or through Telehealth) can enhance your results.

SAFETY CONSIDERATIONS

TENS therapy is generally very safe when used as directed, but it's important to make sure it's right for you. Please read the following precautions and contraindications carefully:

Do NOT use a TENS unit if you:

- Have a pacemaker, implantable defibrillator, or any electronic medical device
- Are currently pregnant, especially in the first trimester (unless cleared by your physician and pelvic PT)
- Have a history of deep vein thrombosis (DVT) or active blood clots in your legs
- Have open wounds, infections, or skin rashes near the site of electrode placement
- Experience epileptic seizures
- Have numbness or decreased sensation in the area where the electrodes will be placed (as you may not feel excess stimulation)
- Have recently undergone surgical procedures near the treatment area unless cleared by your surgeon

Use With Caution If You:

- Have metal implants in the lower leg or ankle
- Are breastfeeding or in a postpartum healing phase — consult your pelvic PT first
- Have peripheral neuropathy or diabetes-related leg symptoms — use only with guidance

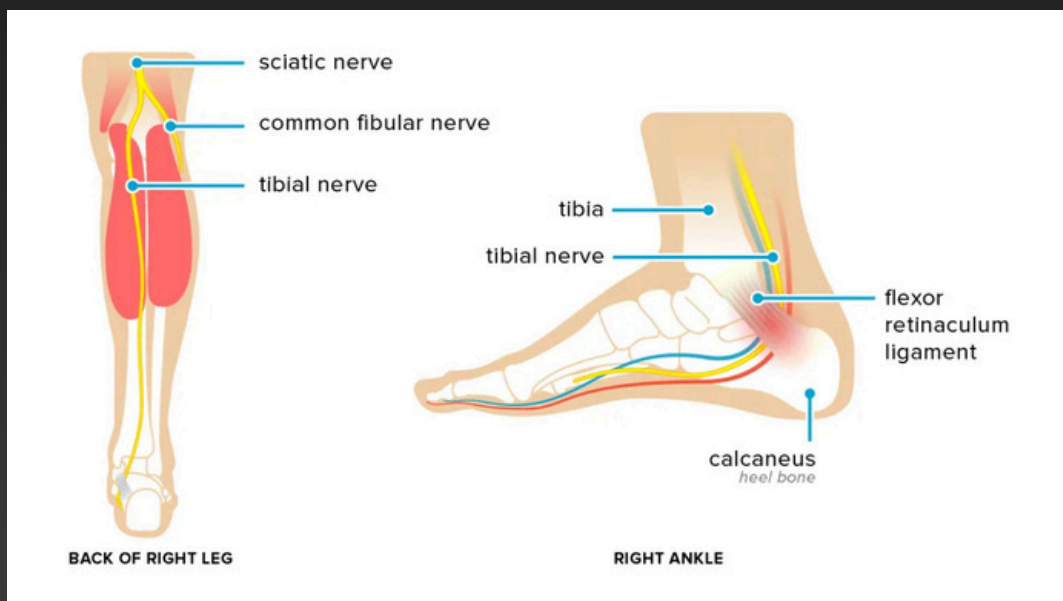
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HOW IT WORKS

WHAT'S GOING ON?

TRANSCUTANEOUS TIBIAL NERVE STIMULATION

Using gentle electrical pulses on the tibial nerve (near your ankle) sends signals up to the pelvic nerves. This can help calm an overactive bladder and reduce urinary urgency or leaks—without pills or injections. It's known as transcutaneous tibial nerve stimulation (TTNS), and researchers compare it to traditional in-person stimulation but using skin patches instead of needles.



DOES IT WORK?

YES!

There's growing evidence that TTNS can help reduce urinary symptoms across various groups. Here's some populations where the research shows promising results:

1. Adults with non-neurogenic overactive bladder (OAB)
2. Women who responded to needle-based PTNS
3. Neurogenic bladder patients
4. Mixed-adult populations with OAB/UI
5. Women taking medication plus TTNS
6. People with multiple sclerosis (MS)

HOW-TO USE AT HOME

STEPS FOR SUCCESS

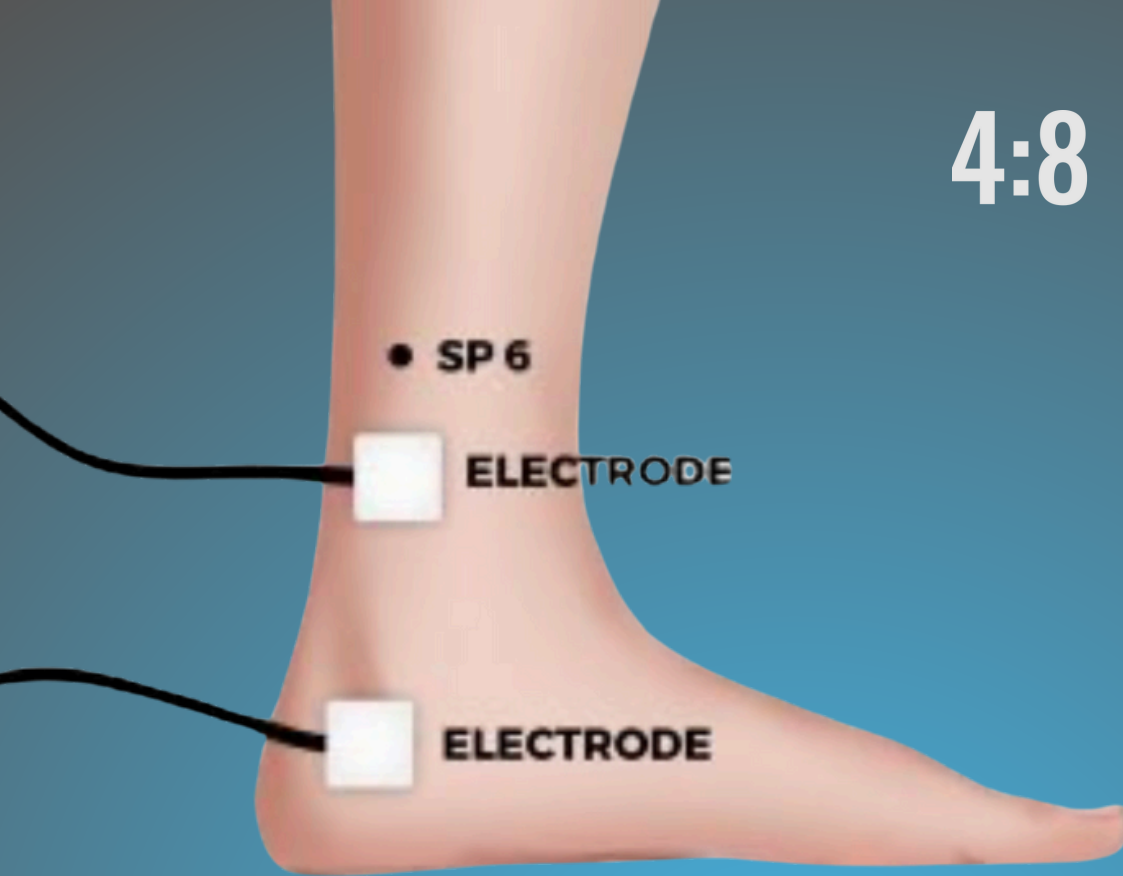
1. Prepare the skin: Clean and dry the lower lateral leg area near the ankle (over the tibial nerve).
2. Apply electrodes: One pad just above the inner ankle bone, another on the lower inside calf—roughly 10 cm apart.
3. Set your TENS unit:
 - Mode: Continuous TTNS (if labeled).
 - Frequency: ~10Hz
 - Pulse width: ~200 μ s
 - Intensity: Increase until you feel a gentle sensation—no pain.
4. Relax: Use it while sitting, watching TV, or reading.
5. Session duration: 30 minutes.
6. Repeat weekly.

SCHEDULE & ESTIMATED TIMELINE

- By 6 weeks: Many patients see noticeable symptom reduction.
- By 12 weeks: Significant improvements are common.
- If there's no improvement by week 6, discuss next steps with your provider.

WEEK	FREQUENCY	SESSION DURATION	SETTINGS	NOTES
1-3	5x/wk	30 mins	Low frequency (10 Hz), duration ~200 μ s; intensity just below muscle twitch—should feel comfy but noticeable.	Note any skin irritation
4-6	3x/wk	20 mins		Improvements often start around session 6
7-12	1-2x/wk	20 mins		Maintenance if symptoms recur

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PLACEMENT

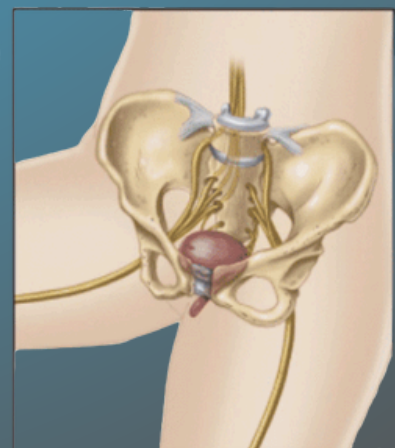
MEDIAL ANKLE - EITHER LEG

Pad 1 (Active/Negative Electrode):

- Place just above the medial malleolus (inner ankle bone), 2-3 cm superior and posterior to it.
- This is where the posterior tibial nerve runs superficially and can be targeted effectively.

Pad 2 (Dispersive/Positive Electrode):

- Place it on the same leg, either:
 - 5-10 cm higher up the leg along the calf, OR
 - On the arch of the foot, if using a more traditional setup with a foot-based return.



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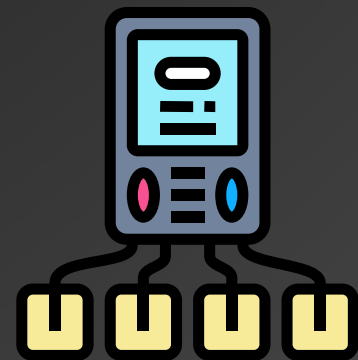
COMBINING WITH PELVIC PT



A structured pelvic floor physical therapy (PFPT) program—including strength training, biofeedback, manual techniques, and education—strongly supports recovery from urinary incontinence. Telehealth or in-person options both work well. Your provider can guide you in strengthening pelvic control, posture, and bladder habits, giving you a comprehensive path toward long-term improvement.

WHERE TO GET YOUR TENS UNIT

- Carewell Intensity 10 – A medical-grade, dual-channel unit; eligible for insurance/prescription coverage.
- TENS 7000 2nd Edition – Available directly through clinic; high-quality FDA-cleared unit (~\$53).
- MEGAWISE 48-Mode – Affordable Amazon OTC option (~\$17) that meets basic needs.



DISCLAIMER & LIABILITY STATEMENT

THIS GUIDE IS FOR EDUCATIONAL PURPOSES ONLY AND IS NOT A SUBSTITUTE FOR INDIVIDUALIZED MEDICAL ADVICE, DIAGNOSIS, OR TREATMENT. ALWAYS CONSULT YOUR PHYSICIAN OR LICENSED PHYSICAL THERAPIST BEFORE BEGINNING ANY NEW TREATMENT OR DEVICE. 4:8 PHYSIO AND YOUR TREATING PROVIDER ASSUME NO LIABILITY FOR MISUSE, IMPROPER APPLICATION, OR OUTCOMES RELATED TO UNSUPERVISED HOME USE OF TENS OR OTHER NEUROMODULATION THERAPIES. BY CHOOSING TO USE A TENS UNIT, YOU ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTOOD THE SAFETY RISKS, AND AGREE TO USE THE DEVICE RESPONSIBLY AND DISCONTINUE USE IF DISCOMFORT OR ADVERSE EFFECTS OCCUR.

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CONGRATULATIONS ON TAKING ACTIONABLE STEPS
TOWARD BETTERING YOUR PELVIC HEALTH!

Combining nerve stimulation with specialized pelvic PT gives you the best chance of reducing urinary incontinence. Stick with the program for at least 6–12 weeks, celebrate small wins along the way, and reach out to your provider with any questions or concerns.

When paired with pelvic floor physical therapy (PFPT), the results are even more effective - helping improve muscle coordination, reduce pain, support bladder and bowel function, and enhance intimacy.

At 4:8 Physio, our expert pelvic floor therapists offer both in-person and Telehealth sessions, so you can get the care you need, wherever you are.

READY FOR MORE?

Visit pt48physio.com or call 850-312-8747 to schedule your PFPT appointment today.

**WE'RE HERE TO SUPPORT YOUR HEALING JOURNEY -
YOU ARE WORTH IT!**