

# Urinary Incontinence

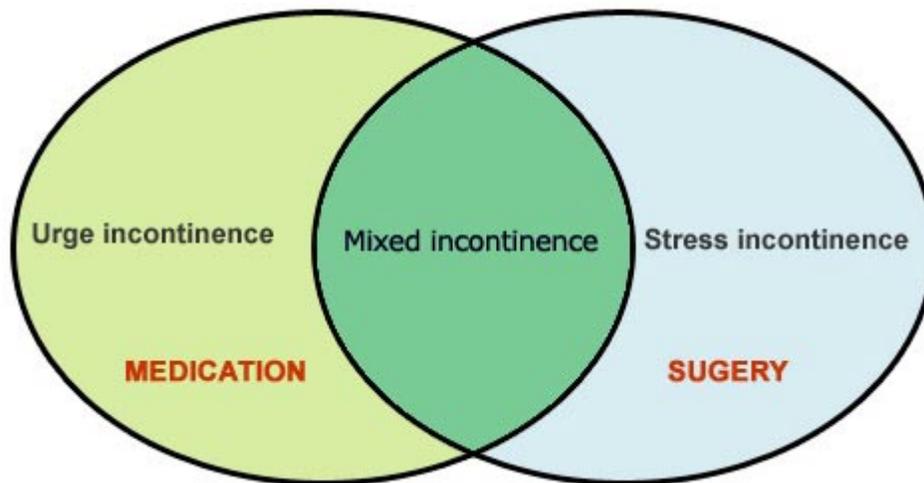
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by Steve Goldwasser, MD

## **What is it?**

Urinary (yer-ih-nair-e) incontinence (in-kon-tih-nens) is not being able to control when and where you urinate. People often call this "having an accident," "wetting yourself,". Urinary Incontinence is not a normal part of aging as many people believe. It is a condition that can be treated, cured, or at least improved.

**Different types of incontinence: Stress, Urge & Mixed**  
- which one do you have?



Over 17 million adults in the United States suffer from urinary incontinence. It affects both men and women. The prevalence increases with age

Many people are so embarrassed about having Urinary Incontinence that they won't talk to their doctor. But, Urinary Incontinence can be treated if caregivers know about your problems.

**There are different types of urinary incontinence**

**STRESS:** involuntary loss of urine during physical activity- cough, sneeze, lifting, exercise, daily activity

**URGE:** sudden onset of the strong desire to urinate

**MIXED:** combination of STRESS and URGE incontinence

**OVERFLOW / ENURESIS:** involuntary loss of urine without any associated urge to urinate or physical activity. For example- wetting the bed while sleeping.

## TREATMENT OPTIONS

### STRESS INCONTINENCE:

#### Surgery:

- Suburethral sling
- Burch procedure
- Urethral bulking - COAPTITE

#### Non-Surgical:

- Kegel exercises
- Pessary - medical insert that blocks urine loss
- Electrical stimulation - used to strengthen pelvic floor muscles
- Medication - helps tighten the muscles around the urethra

### **URGE INCONTINENCE:**

**MEDICATIONS** - these medications (Vesicare, Detrol, Enablex, Sanctura, Ditropan, Tofranil, Oxytrol) relax the bladder to stop bladder spasms and frequent urges to urinate

**NEUROMODULATION** - INTERSTIM

**KEGEL EXERCISE** - help the bladder muscle relax

**TIME VOIDING**

**DIET MODIFICATION** - elimination of bladder irritants: caffeine

### **MIXED INCONTINENCE:**

Surgery may treat both problems.

Medication & Surgery

### **OVERFLOW / ENURESIS:**

Surgery

Medication

Self catheterization

Tests: You may need one or more of the following tests to with planning your treatment:

- **Cystoscopy (sis-toss-kuh-p):** The cystoscope is a long tube with a light on the end. It is put in your urethra and guided into your bladder. The scope may be hooked to a camera so you and your doctor can see inside of your bladder and urethra on a TV monitor. The scope may be used to take a tissue sample for tests.
- **Physical exam:** Your caregiver will examine you and ask you questions about your current and past health and urinary habits.
- **Post-void residual:** A small soft tube is put into the bladder or ultrasound is used to measure how much urine is left in the bladder after urinating.
- **Voiding Diary:** Caregivers may give you a record to keep track of when you urinate and when you are incontinent.
- **Urine tests:** Your urine is examined to look for signs of infection, blood, or other problems.
- **Urodynamic (yer-o-di-na-mik) testing:** This study helps evaluate the function of the bladder, urethra, and pelvic floor muscles.

### Overview

\* The bladder is a hollow organ that holds urine. The kidneys produce urine and send it to the bladder thru two tubes ( the left and right ureters) As urine collects in the bladder, the bladder enlarges like a balloon. When the bladder reaches a certain level of fullness it triggers your urge to void. Normally you are able to suppress this urge until you can reach the bathroom. When you are ready to urinate, the urine travels from the bladder through the urethra. The urethra is a small tube that goes from the bladder to the outside of the body.

Causes: Following are some of the many causes of Urinary Incontinence. Blocked urethra- from prolapse of the vaginal walls (often described as a bulge from the vagina creating vaginal pressure). The urethra may also be blocked from having previous vaginal or incontinence surgery. Constipation. Hormones unbalanced in women. Being immobile (not being able to move around). Overactive bladder muscles. Some medicines. Urinary tract infection. Vaginal infection. Weakness of the bladder or the muscles that hold it in place. Weakness of the muscles that keep the urethra closed. Signs and Symptoms: The symptoms of Urinary Incontinence are different depending on which type of Urinary Incontinence that you have.

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