



BASIC INFORMATION

DESCRIPTION

An involuntary loss of urine that accompanies any action that suddenly increases pressure in the abdomen. It can affect both sexes (males rarely) and all ages. It is the most common type of incontinence in older women.

FREQUENT SIGNS AND SYMPTOMS

Unintentional loss of urine with lifting, sneezing, singing, coughing, laughing, crying or straining to have a bowel movement.

CAUSES

A change in the relationship of the uterus to the bladder resulting in shortening of the urethra (tube from the bladder to the outside), and loss of the normal muscular support for the bladder and floor of the pelvis. These changes occur during pregnancy and after childbirth, particularly repeated childbirth. Obesity is also a factor. They may also occur as a natural consequence of aging.

RISK INCREASES IN/WITH

- Repeated vaginal childbirth.
- Vaginal birth of large children.
- Adults over 60.
- Obesity.
- Chronic lung disease with a cough.

PREVENTIVE MEASURES

- Eat a normal, well balanced diet and exercise regularly to build and maintain muscle strength.
- Obtain regular physical exams to detect early problems.
- Learn and practice Kegel exercises after childbirth, before symptoms of stress incontinence begin.

Kegel exercises:

The purpose is to recognize, control and develop the muscles of the pelvic floor. These are the ones used to interrupt urination in mid-stream. The following exercises strengthen these muscles so you can control or relax them completely:

- To identify which muscles are involved, alternately start and stop urinating when using the toilet.
- Practice tightening and releasing these muscles while sitting, standing, walking, driving, watching TV, etc.
- Tighten the muscles a small amount at a time, "like an elevator going up to the 10th floor." Then release very slowly, "one floor at a time."
- Tighten the muscles from front to back, including the anus, as in the previous exercise.
- Practice exercises every morning, afternoon and evening. Start with 5 times each, and gradually work up to 20 or 30 each time.

EXPECTED OUTCOME

Kegel exercises are effective if a woman has mild stress incontinence, but if there is severe incontinence or moderate to severe prolapse involved, then surgery is more effective.

POSSIBLE COMPLICATIONS

- Urinary tract infections, kidney failure.
- Social isolation due to concern about embarrassment.



TREATMENT

GENERAL MEASURES

- Urinalysis and other laboratory studies will help determine if a urinary tract infection is causing the symptoms. Your health care provider may have you keep a 24-hour bladder diary to help diagnose any specific problems.
- Treatment as needed for any infections or tumors.
- Weight loss, smoking cessation, or cough suppression may be indicated. Practice good genital hygiene.
- Other therapy possibilities include biofeedback, electrical stimulation, magnetic innervation or special weights to strengthen pelvic muscles.
- Learn and practice Kegel exercises. Use the technique just before any sudden increase in intra-abdominal pressure from a sneeze or a cough.
- Wear absorbent underpants or incontinence pads if needed.
- A pessary (support device) made of rubber or other material to fit inside the vagina to support the uterus and lower muscular layer of the bladder is helpful for some. Other types of devices include urethral plugging or stenting.
- It may be necessary to have urodynamic testing (studies of the actual urine flow), either in the health care provider's office or at a special clinic, to evaluate the incontinence.
- Surgery to tighten relaxed or damaged muscles that support the bladder helps some. Newer procedures that show high clinical success rates are the Pubovaginal Sling procedure and Burch urethropexy (colposuspension) procedure. Some of these procedures can be done laparoscopically.
- Additional information available from the National Association for Continence, (800) BLADDER; www.nafc.org or the Simon Foundation for Continence, 800-23-SIMON; www.simonfoundation.org.

MEDICATION

- Antibiotics for any complicating urinary tract infection.
- Sympathomimetic (alpha-adrenergic) drug therapy, which helps urethral muscles, may be prescribed.
- Estrogen therapy may be prescribed.

ACTIVITY

No restrictions.

DIET

- Start a weight loss program if you are overweight.
- Decrease your intake of caffeine and alcohol.
- Avoid high volume of fluid intake in situations where access to bathroom facilities is limited (such as airplane trips).



NOTIFY OUR OFFICE IF

You or a family member has symptoms of stress incontinence and self treatment isn't helping, the problem is embarrassing and disruptive, or an absorbent pad is needed for urine loss.