

## **HAVE YOU LOST CONTROL? LEAKING? STRESS INCONTINENCE, AN EMBARRASSING PROBLEM**

by **Kevin Fleishman, M.D.**

### **What is urinary incontinence?**

Urinary incontinence, or the loss of bladder control, is a common but treatable problem. Symptoms can range from mild leaking after coughing or laughing, to uncontrollable wetting. A recent study suggested that 13 million people in the United States suffer from urinary incontinence. It is far more common in women than men. Up to 30 percent of all women and more than 50 percent of those in nursing homes are affected by the condition. The sale of adult garment protection products like pads are a multimillion-dollar industry.

### **What is the treatment for urinary incontinence?**

It is important to know that despite being common and embarrassing, in most cases it is very treatable. The first step in treatment is to see a gynecologist, urologist or urogynecologist who specializes in the treatment of incontinence. The doctor will conduct a thorough history and physical exam, as well as recommend a voiding diary. There are some beverages, like coffee, and medications, like diuretics and blood pressure medicines, that make incontinence worse. The next step usually is an office evaluation of voiding function. This information can help delineate the cause of incontinence and, therefore, direct the treatment.

### **What is the difference between Stress incontinence and Urge incontinence? Are they treated differently?**

Stress incontinence, which is more common in women, causes urine to leak when you laugh, cough, or lift something heavy. Overactive bladder, or urge incontinence, is caused by uncontrollable bladder muscle spasms that cause an urge to urinate and sometimes leakage. Some women have a combination of problems. Risk factors include having multiple children, large children, advanced age, and increased weight.

Treatment for stress incontinence usually starts with lifestyle modification, such as limiting too much fluid intake and timed voiding. Physical therapy is usually the next step, and it starts with kegel exercises to strengthen the bladder control muscles. Some women are referred for physical therapy and biofeedback training. If these interventions are not successful, surgery may be recommended. It is important to know that the newer surgeries are much less invasive than older ones, can often occur in an outpatient setting, and allow for a quicker recovery. One of the more common surgeries is tension free urethral slings that work by keeping the urethra from moving during coughing and, therefore, preventing the loss of urine.

Treatment for overactive bladder also starts with lifestyle changes, such as avoiding too much caffeinated beverages, which are bladder irritants, as well as not waiting too long to void.

Medications may be suggested to control the spasms of the bladder. In difficult cases, implantable bladder stimulators may be suggested.

It is important to know that women do not have to live with incontinence, that it is very treatable in most cases, and that this is a part of their life that they can start gaining control. The first step is to make an appointment with a physician specializing in incontinence so that treatment can be started.

*Kevin Fleishman, M.D., is a board-certified gynecologist and obstetrician with Physicians' Primary Care of Southwest Florida.*