# **Urinary Incontinence**



#### **Causes of Incontinence**

Incontinence is often seen as part of aging, but it can occur for many other reasons. For example, urinary tract infections, vaginal infection or irritation, constipation, and some medicines can cause bladder control problems that last a short time. When incontinence lasts longer, it may be due to:

- weak bladder muscles
- overactive bladder muscles
- damage to nerves that control the bladder from diseases such as multiple sclerosis or Parkinson's disease
- diseases such as arthritis that may make it difficult to get to the bathroom in time
- blockage from an enlarged prostate in men

### **Bladder Control**

The body stores urine in the bladder. During urination, muscles in the bladder tighten to move urine into a tube called the urethra. At the same time, the muscles around the urethra relax and let the urine pass out of the body. Incontinence occurs if the muscles tighten or relax without warning.

### **Diagnosis**

The first step in treating incontinence is to see a doctor. He or she will give you a physical exam and take your medical history. The doctor will ask about your symptoms and the medicines you use. He or she will want to know if you have been sick recently or had surgery. Your doctor also may do a number of tests. These might include:

- urine and blood tests
- tests that measure how well you empty your bladder

In addition, your doctor may ask you to keep a daily diary of when you urinate and when you leak urine.

### **Types of Incontinence**

There are different types of urinary incontinence:

- **Stress incontinence** happens when urine leaks as pressure is put on the bladder, for example, during exercise, coughing, sneezing, laughing, or lifting heavy objects. It's the most common type of bladder control problem in younger and middle-age women. It may also begin around the time of menopause.
- **Urge incontinence** happens when people have a sudden need to urinate and aren't able to hold their urine long enough to get to the toilet in time. It is often, but not only, a problem for people who have diabetes, Alzheimer's disease, Parkinson's disease, multiple sclerosis, or stroke.
- Overflow incontinence happens when small amounts of urine leak from a bladder that is always full. A man can have trouble emptying his bladder if an enlarged prostate is blocking the urethra. Diabetes and spinal cord injury can also cause this type of incontinence.

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• **Functional incontinence** happens in many older people who have normal bladder control. They just have a problem getting to the toilet because of arthritis or other disorders that make it hard to move quickly.

#### **Treatment**

Today, there are more treatments for urinary incontinence than ever before. The choice of treatment depends on the type of bladder control problem you have, how serious it is, and what best fits your lifestyle. As a general rule, the simplest and safest treatments should be tried first.

## **Bladder Control Training**

Your doctor may suggest bladder training to help you get better control of your bladder. With bladder training, you can change how your body stores and releases urine. There are several ways to do this:

- **Pelvic muscle exercises** (also known as Kegel exercises) work the muscles that you use to stop urinating. Making these muscles stronger helps you hold urine in your bladder longer.
- **Biofeedback** uses sensors to make you aware of signals from your body. This may help you regain control over the muscles in your bladder and urethra. Biofeedback can be helpful when learning pelvic muscle exercises.
- **Timed voiding** may help you control your bladder. In timed voiding, you urinate on a set schedule, for example, every hour. You can slowly extend the time between bathroom trips. When timed voiding is combined with biofeedback and pelvic muscle exercises, you may find it easier to control urge and overflow incontinence.
- **Lifestyle changes** that may help with incontinence include losing weight, quitting smoking, avoiding alcohol, drinking less caffeine (found in coffee, tea, and many sodas), preventing constipation, and not lifting heavy objects.

#### Management

Besides bladder control training, you may want to talk to your doctor about other ways to help manage incontinence:

- Some drugs can help the bladder empty more fully during urination. Other drugs tighten
  muscles and can lessen leakage. Talk with your doctor about the benefits and side effects of
  using these medicines.
- A doctor may inject a substance that thickens the area around the urethra to help close the bladder opening. This reduces stress incontinence in women. This treatment may have to be repeated.
- Special devices for both men and women could help control incontinence.
- Surgery can sometimes improve or cure incontinence if it's caused by a change in the position of the bladder or blockage due to an enlarged prostate.
- You can buy special absorbent underclothing that can be worn under everyday clothing.

If you suffer from urinary incontinence, tell your doctor. Remember, under a doctor's care, incontinence can be treated and often cured. Even if treatment is not fully successful, careful management can help you feel more relaxed and confident.

Source: http://nacanet.nia.nih.gov/HealthInformation/Publications/urinary.htm

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