



Female Incontinence - From the desk of Dianne Hotmer, M.D.

Many women cope with the issue of incontinence assuming that it is a normal and untreatable condition caused by past pregnancies and childbirth. Incontinence is not normal and while pregnancy and childbirth can contribute they are not the only possible causes. Others include urinary tract infections, menopause, prior pelvic surgeries, weight, advanced age or illnesses such as diabetes, stroke or multiple sclerosis. Incontinence is a medical condition that affects both men and women yet women are almost twice as likely to experience the condition. It affects somewhere between 25% to 45% of women and can begin at any age. These rates increase with age with up to 50% of older women suffering. Incontinence can affect a person's emotional state, quality of life, sexuality, and body image as well as just being a general nuisance. Often we see that incontinence changes a person's everyday activities to the point of experiencing isolation, not engaging in physical activity and often embarrassment and depression. There are four types of incontinence defined as stress, urge, mixed and overflow. There are many treatment options ranging from basic life style changes to surgery. The best treatment depends upon the type, the cause, and on the individual body's response. Often times doctors will begin by recommending simple life changes and progress to more advanced techniques as needed.

Stress incontinence happens when stress is placed on the bladder by normal actions such as coughing or sneezing. This condition can be the result of childbirth, being overweight or playing high impact sports. Women with stress incontinence may also have a pelvic organ prolapse contributing to the symptoms. The underlying problem with most pelvic floor prolapse occurs because of the lack of connective tissue support to the pelvic floor muscles, the bladder, vagina and rectum. *Urge incontinence*, referred to as an overactive bladder is a condition caused by involuntary spasms of the bladder and can have a variety of different causes including urinary tract infections, or neurologic conditions such as Multiple sclerosis or Parkinson's disease or can be idiopathic, meaning we just aren't certain why it develops. Lastly, mixed incontinence simply refers to having more than one type of incontinence with stress and urge incontinence being the most common combination

Overflow incontinence is a condition causing a constant leak of urine and happens because the bladder does not empty properly, it becomes overfilled. It is due to damages to bladder muscles or bladder obstructions. When the bladder becomes stretched with large volumes of urine it overflows, or leaks. Some medicines can cause this problem, and people with nerve damage from diabetes and other conditions can also experience it.

The evaluation of incontinence starts with a comprehensive history and physical. Our approach is to start with the simple and more conservative strategies. Doctors often recommend life style changes as the first attempt for treatment of stress, urge and mixed continence issues since these changes often reduce or eliminate the problems. Changes include "fluid management" addressing how much you drink, what you drink and when you drink, tightening your pelvic floor muscles or using a tampon to support the urethra when you are concerned about leaking during activity.

If life style changes do not address the issue a doctor may recommend a treatment. We might offer you an incontinence ring which is a rubber device that is placed in the vagina that helps to restore the urethra's proper position. If you are unable to perform a pelvic floor muscle tightening on your own, we refer you to a Physical therapist who specializes in pelvic floor therapy. Here you learn how to use your pelvic floor muscles. Biofeedback and electrical stimulation play a role in helping you toward success. Medications can be extremely helpful to treat urge incontinence and lastly topical



hormone creams to the vagina may show benefit and provide significant improvement of symptoms. Though this is not fully proven in clinical studies, depending on the urinary complaint it has been found to be successful.

Surgery is an option when more conservative treatments aren't successful. The most prevalent procedure is known as a Sling procedure that involves supporting the urethra and restoring it to its proper anatomical position by placing a support underneath the urethra. This minimally invasive approach has been very successful for many women but like any surgery has incumbent risks. We emphasize that it is important to first talk with your doctor, be thoroughly evaluated and then develop a plan of therapy and treatment that best serves your individual needs.

This article is provided as informational and not intended to be a substitute for professional medical advice. Only your doctor is qualified to diagnose and treat your symptoms, so please be sure to contact us at Chester County OB/GYN about the latest treatment options and how to work together for your success. You may contact CCOGA with any questions, concerns, or to make an appointment by email at info@chestercountyobgyn.com