



Education

Stress Incontinence in Women

What is stress incontinence?

Urinary incontinence is loss of bladder control. It is a problem for as many as 1 in 3 Americans age 60 or older. It is twice as common in women as men. Stress incontinence is the most common kind of urinary incontinence in women. It is the term used for leakage of urine during exercise, coughing, sneezing, laughing, or lifting.

What causes stress incontinence?

The pelvic floor muscles normally fit snugly around the neck of the bladder. They form a ring of muscle that prevents urine from escaping through the urethra, which is the tube that carries urine out of the bladder. However, the pelvic floor muscles can be stretched or torn during childbearing. There may also be further loss of muscle tone after menopause due to a thinning of tissues caused by a lack of estrogen. Sudden pressure on the bladder (for example, from coughing or sneezing) can overcome the weakened muscles and cause a little urine to escape. Diabetes, obesity, and urinary tract infections also contribute to stress incontinence.

What are the symptoms?

Symptoms include leakage of urine during exercise, laughing, coughing, sneezing, or lifting.

How is it diagnosed?

Your health care provider will take a careful history and examine you to see if the incontinence is caused by an underlying condition that can be corrected. Your blood and urine will be checked for infection or other abnormalities. You may be referred to a urologist or gynecologist for further investigation and treatment. (A urologist is a health care provider who specializes in disorders of the urinary tract in both men and women and in the reproductive tract of men. A gynecologist specializes in women's health care and especially in disorders of the reproductive tract of women.)

How is it treated?

Weak pelvic muscles can often be strengthened by Kegel exercises. You can feel the muscles to use by squeezing the muscles in your genital area. You might find that it helps to pretend you are stopping a flow of urine or trying to stop from passing gas.

- Tighten these muscles and hold the contraction for 4 seconds. Do this 10 to 20 times. Allow the muscles to relax completely between contractions.
- Do these sets of contractions 10 times a day. Doing fewer repetitions than this will keep the exercises from being as effective for you.
- You can do Kegel exercises anywhere: while sitting at a desk, waiting for a bus, washing dishes, driving a car, waiting in line, or watching television. No one will know you are doing them.
- Do not do these exercises while you are urinating.

You may see a change for the better after doing the Kegels for just a few weeks. However, you may not notice a lot of improvement until after 3 to 6 months of daily exercises. You should continue doing Kegels every day to keep the pelvic muscles strong.

Women may want to ask their health care provider about cones that may be used to help strengthen the pelvic floor muscles. The cones range in size. You may start with a large cone. You put it into your vagina and try to hold it in place for 15 minutes a couple times a day. When this is easy for you to do, you may then try keeping a smaller cone

in place.

When symptoms are severe and attempts to strengthen these tissues with exercise or other nonoperative treatments have not succeeded, surgery may be done.

How can I take care of myself?

- Consult your health care provider if you begin to have urinary incontinence. Follow his or her advice for correcting or managing your incontinence.
- Practice bladder control. Do Kegel exercises regularly.
- Use incontinence pads to help catch urine leaks and protect your clothing. Be sure to change them regularly.
- Keep your groin area as clean and as dry as possible.

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