

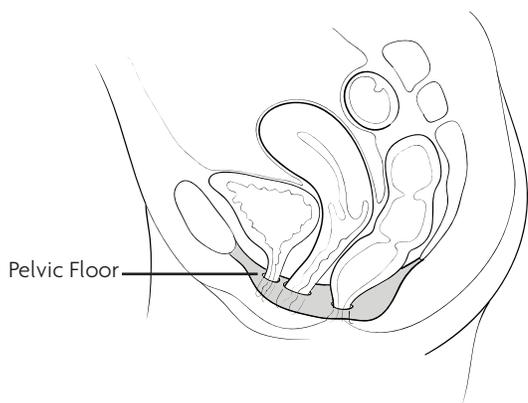
Surgery to Treat Stress Incontinence for Women

FACT SHEET

What is stress urinary incontinence?

Urinary incontinence is leaking of urine. It is not a disease but it is a symptom of many other health conditions, some surgery or even childbirth. More than 15 million Americans, mostly women, suffer from incontinence. Although it is more common in women over 60, it can occur at any age.

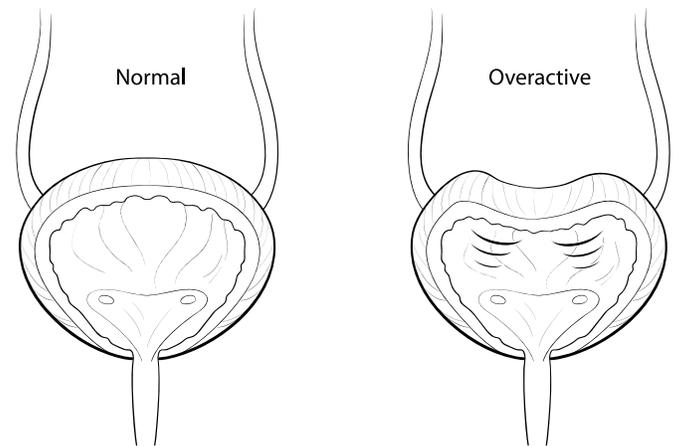
Stress incontinence: Stress incontinence is the most common type of leakage. This occurs when urine is lost during activities such as walking, exercising, or even a sneeze or cough. The added pressure on the abdomen from these activities can cause urine to leak. The pelvic floor muscles, which support the bladder and urethra, can be weak, preventing the sphincter muscles from working properly. This can also occur if the sphincter muscles are weak or damaged from childbirth or surgery. After menopause women can also suffer from small amounts of leakage partly due to loss of natural estrogen.



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Other common types of incontinence for women:

Also called overactive bladder, **urge incontinence** is another form of leakage. This can happen when a person has an urge to urinate but cannot reach the bathroom in time and has an accident.



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Some people have mixed incontinence, a combination of types of incontinence; most commonly stress and urge incontinence.

How do they treat stress incontinence in women?

Behavior modification and pelvic floor exercise may help treat stress incontinence in women. Sometime techniques, like biofeedback or electrical stimulation of the pelvic muscles, can help. When these options are not helping, the treatment is surgery. Bulking agents may increase continence for some women. Doctors inject these bulking agents while the patient is under local anesthesia. This is minimally invasive, but the cure rates are lower than the success seen with surgery.

Anterior repair (known as Kelly plication) is a common option used by gynecologists but has not given good long-term results. Another option is abdominal surgery (Burch suspension) in which the vaginal tissues are secured to the pubic bone. The most common surgery for stress incontinence is the sling procedure. In this operation, the doctor places a strip of tissue or material under the urethra to provide compression and improve urethral closure.

What can women expect after treatment?

The goal of any treatment for incontinence is to improve quality of life for the woman. In most cases, great improvements and even cure of the symptoms are possible. Medical therapy is usually effective, when coupled with behavioral changes. Changes in weight and activities that promote abdominal and pelvic straining may cause any surgery to fail. With common sense, proper body mechanics and care, women who chose these treatments can expect positive, long-term outcome.

Surgery for stress urinary incontinence in women is usually helpful for improving symptoms. Choosing the proper procedure is important. Many women may also have other conditions like bladder prolapse,

rectocele or uterine prolapse. The doctor should treat those at the same time. Women with a mix of stress and urge incontinence symptoms should use medical treatment first to try to improve their symptoms. For simple stress incontinence with mild to moderate incontinence, a sling is the procedure of choice. Those women can expect more than 80 percent cure or improvement. Women needing other abdominal surgery should talk to their doctor about their best choices to treat incontinence. Injectable bulking agents can cure and improve patients but may require multiple applications. Ask your doctor which treatment is right for you.

For more information on incontinence, go to www.UrologyHealth.org or call 800-828-7866.

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For more information call the National Urology Health Line at 1-800-828-7866 or visit www.AUAFoundation.org

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