

Urinary

Bladder Control

Incontinence

Chapter 11

Lack of bladder control (urinary incontinence, or UI) refers to an inability to hold your urine until you can get to a toilet. This condition affects more than 13 million Americans and is twice as common in women as in men.

The bladder stores urine, controlling its release by tightening special muscles (sphincters) around the area where urine is emptied into a tube (urethra) that carries it out of the body. When it is time to urinate, the bladder walls contract and sphincter muscles relax, allowing urine to be forced out of the bladder into the urethra and removed.

UI may be more common in women because of the structure of the female urinary tract and the body stresses involved in pregnancy and childbirth. UI is sometimes blamed on menopause, but this condition is not an unavoidable part of aging. Remember—UI can be treated.

There are several types of UI.

- ▶ *Stress incontinence* refers to leaking urine in response to any movement that puts pressure on the bladder, such as coughing, sneezing, or laughing. Stress incontinence is the most common type of UI in women and is treatable.
- ▶ *Urge incontinence* is a condition in which you lose urine for no apparent reason while suddenly feeling the need or urge to urinate. It is usually caused by inappropriate contractions of the bladder wall, which may be due to damage to the muscles or nerves of the bladder or to the nervous system itself. Women with urge incontinence may find that their bladder empties

after they drink a small amount of water, during sleep, or even when they touch water or hear it running.

- ▶ *Functional incontinence* occurs in people with problems thinking, moving, or communicating that prevent them from reaching a toilet. For example, a person with Alzheimer's disease may not be able to plan a timely trip to the bathroom.
- ▶ *Overflow incontinence* means your bladder is always full so that it continually leaks urine. This condition, which is not common in women, may result from weak bladder muscles or a blocked urethra.
- ▶ Other forms of incontinence include *mixed incontinence* (for example, having both stress and urge incontinence) and *transient* (temporary) incontinence, which may be triggered by medications, urinary tract infection, and reduced mental ability, among other causes.

Your doctor can usually treat UI. Treatments may include exercises or electrical stimulation to strengthen bladder muscles, biofeedback, bladder training, or medications, among others.

Additional resources include—

The Incontinence Solution: Answers for Women of All Ages by William Parker, Amy Rosenman, and Rachel Parker. Fireside, 2002.