Urinary Incontinence

Urinary incontinence, the loss of bladder control, is a common affliction as one ages. It is often an underreported problem because many elderly patients think urine leakage is a natural part of aging or they are embarrassed to discuss it with their physicians.

Urinary incontinence is NOT a normal part of aging. The aging process can lead to changes in how much urine your bladder can hold and your urine stream, causing you to urinate more frequently. These changes do not necessarily lead to incontinence.

Urinary incontinence can be caused by many different medical problems, including side effects of medications, constipation, obesity, urinary-tract infections, circulatory disease, diabetes, Alzheimer’s disease, cancer, stroke and gait problems. Men often experience symptoms from an enlarged prostate gland or as a complication of prostate surgery. Women often have symptoms from weakened or stretched pelvic muscles after childbirth or thinning and drying of the vaginal walls or urethra after menopause.

Symptoms of urinary incontinence can range from leakage of urine to strong urges to urinate that are difficult to control. There are five types of urinary incontinence: stress, urge, overflow, functional and mixed incontinence.

Stress incontinence is urine leakage from sudden pressure on the lower abdominal muscles from coughing, laughing, lifting or exercising. Urge incontinence occurs when the need to urinate comes on very suddenly before one can get to the toilet. Overflow incontinence results from an overfilled bladder that one is unable to completely empty, which leads to uncontrollable leakage of small amounts of urine. Functional incontinence occurs when one has normal urine control but has difficulty getting to the bathroom due to a mobility issue. Many people often have more than one type of incontinence, resulting in mixed incontinence.

Treatment depends on the type of incontinence and cause of the problem. Treatment options range from bladder-muscle exercises, bladder training and scheduled toileting to medications and surgery.

Left untreated, incontinence puts one at increased risk for rashes, urinary-tract infections, sores and skin infections. Anyone experiencing symptoms should see a physician immediately to be properly evaluated and treated.

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