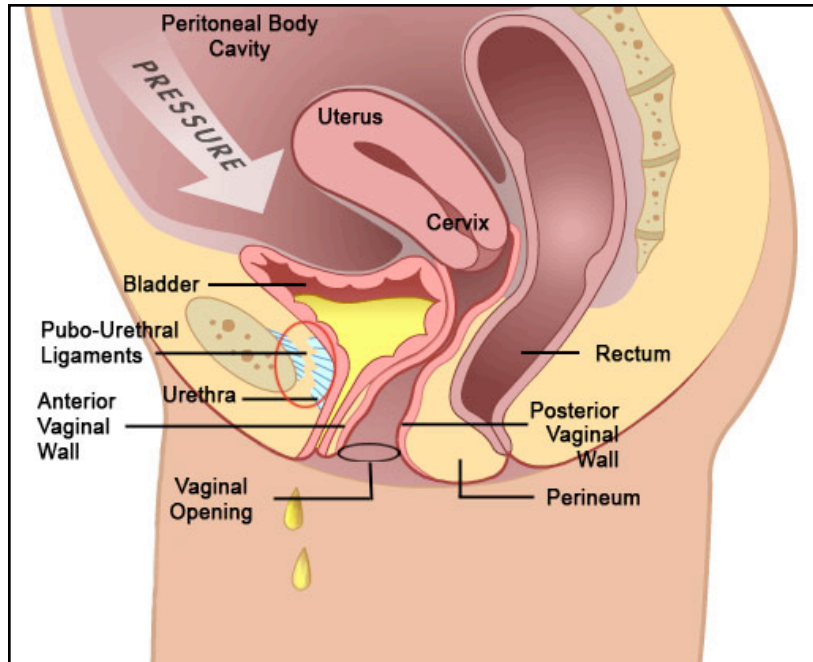


# CONDITIONS

## STRESS URINARY INCONTINENCE

### *A BRIEF OVERVIEW FOR PATIENT REFERENCE*



### WHAT IS IT?

Stress urinary incontinence is leakage of urine with an increase in abdominal pressure, which can be caused by laughing, coughing, sneezing, running, or other activities. It's typically caused by damage to the pubo-urethral ligaments that support the urethra as seen in the figure. This damage can occur during childbirth although symptoms may not manifest until later in life. It is important to distinguish stress incontinence from urge incontinence. Read below for more information on these differences.

### DISTINGUISHING STRESS FROM URGE

Patients with stress incontinence report leaking urine with laughing, coughing, or sneezing. They also may notice urine leaking with exercise, bending over, or while lifting. The urethral attachments have been compromised in these patients.

Urge incontinence patients report an urgent need to empty their bladder sometimes with very little warning. They may need to empty their bladder frequently because of a small capacity. Typically, the bladder muscle itself is causing their symptoms.

### URODYNAMICS AND VOIDING DIARY

There are multiple tools utilized to help diagnosis incontinence, most importantly the history from the patient and her physical exam findings. In our practice, we often utilize an objective bladder test (Urodynamics) to examine the physiology of the bladder during filling and storage of urine and also evaluate the function of the urethra and the pressure generated during coughing and voiding. This test also helps understand the muscle

pattern utilized to empty the bladder of urine. Some patients may not completely empty their bladder, and this is very important information to have when developing treatment plans. The voiding diary is completed over a period of 24 hours while the patient is at home. Information that is collected includes volumes of fluid drank, volumes of urine voided, and times of day that correspond to any episodes of leaking.

## SURGICAL TECHNIQUES FOR INCONTINENCE

Currently the best surgical cure for stress incontinence is by placement of a sling, synthetic or fascia. Urge incontinence is most often treated with medications and other behavioral and dietary modifications. For more information on treatment of stress incontinence please follow the Mid-Urethral Sling link.

Please see the [Surgical Treatments](#) section for more information on [Stress Urinary Incontinence](#).

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*NOTE: This education content is for informational purposes only and not a substitute for professional medical advice, diagnosis, or treatment.*

*Always seek the advice of your physician or other qualified health provider if you have questions or concerns. If you are interested in a consultation with Dr. Veronikis or Dr. Wood, please call for an appointment to address your specific needs.*