

Stress Urinary Incontinence: Condition Information

Body Part

Pelvis - bladder and pelvic floor muscles.

Condition:

Stress Urinary Incontinence (SUI), unwanted leaking of urine under physical stress.

Summary

SUI is the unwanted leaking of urine when intra-abdominal pressure is increased - that is, a pressure within your abdo-pelvic region that your pelvic floor can't match, resulting in leakage of urine. The amount of urine leaked can vary from just a few drops, to almost full bladder loss. SUI is more common in women, but can also be present in men, especially as they get older or if they have undergone prostate surgery. It commonly causes issues for women in pregnancy and the early postnatal period, as well as in the post-menopausal period. Other conditions such as obesity, chronic cough, pelvic organ prolapse, pelvic floor muscle injury or nerve injury (just to name a few), can also affect urinary continence. This issue can be transient, for example only an issue in pregnancy or the postnatal period, or it can also be a long term issue that many people put with, thinking there is nothing they can do. SUI can be present with urgency urinary incontinence (UUI) as well, this is called mixed urinary incontinence (MUI). Urinary incontinence is more prevalent than most people think as it isn't something widely spoken about, but of the people sitting in a GP waiting room 65% of the women, and 30% of the men, will be suffering from some type of incontinence. 70% of people with urinary incontinence do not seek advice or treatment, despite many forms of incontinence being simple to address.



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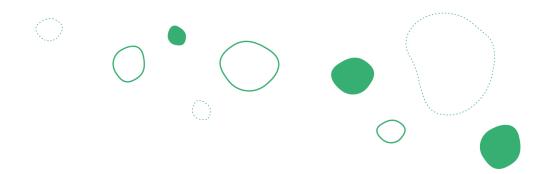
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Symptoms:

Common symptoms of SUI include loss of urine with coughing/sneezing, laughing, high impact activity (running, jumping), and a change of position (getting up off a chair or out of bed).

Treatment:

Treatment of SUI relies on an accurate diagnosis of the cause. A thorough history including respiratory conditions, gut and bowel conditions, pregnancies and births, abdominal and pelvic surgeries, sports/activities often narrows down the cause. An internal vaginal examination of the pelvic floor muscles will indicate if these muscles are injured, asymmetrical, weak or having trouble relaxing, which will then guide your physiotherapist in establishing an individualised pelvic floor muscle training program. Understanding SUI and it's causes will also assist in managing leakage better.

If MUI is being experienced, then UUI management strategies, such as behavioural retraining, may also be required.

Prognosis:

As with any skeletal muscle, consistency of exercises is paramount in the condition resolving. It takes six weeks of muscles to start to adapt, and change (however small) should be noted by around twelve weeks. Complete resolution of SUI often depends on the extent of any injury present, as well as how long the individual has had the issue for.

Further information:

For further information, please contact our friendly team at Gen Health.



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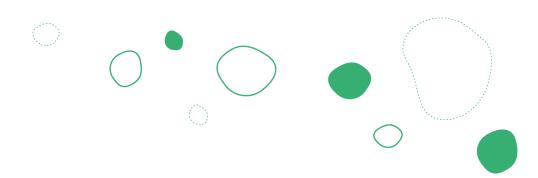
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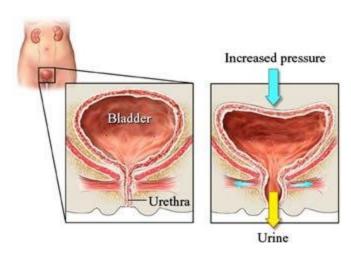
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Picture Link:

https://hartfordhealthcare.org/services/urology-kidney/patient-education/stress-urinary -incontinence



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