



Bladder Health - the ladies room

As we get older, many of us find that we need to make more frequent trips to The Ladies Room. We may notice that occasionally, a little urine escapes when we are exercising, dancing, or sneezing. These symptoms are caused by urinary incontinence. Urinary incontinence has been reported in 10 to 30 per cent of post-menopausal women, and occurs more frequently among older women.

If this is happening to you, you need to know that this is normal, and treatable, and is the result of diminishing hormones and the physical aging of the urinary tract and bladder function.

Many women live with urinary incontinence even though there are good treatment options available. They don't realize that something can be done because they are too embarrassed to bring this up with their doctors. Untreated, these symptoms can become serious health problems such as more frequent urinary tract infections (UTIs) and vaginal infections, urinary incontinence and bleeding.

I have trouble controlling my urination from time to time. What can I do about it?

As they age, many women have trouble with urinary incontinence, the medical term for when your body accidentally leaks urine. There are a number of reasons why incontinence occurs and thankfully many treatments exist, including a wide range of non-surgical approaches. You can make lifestyle adjustments, find out about non-surgical support devices, do pelvic exercises, and investigate operations that might provide a more permanent solution.

Physicians and other health professionals can help you work out what will work best for you. Take the first step and let them know you need help.

What is urge incontinence?

Women with "urge incontinence" usually have a sudden and urgent desire to urinate that

sometimes comes on so fast that there isn't enough time to get to a toilet. This leakage can be embarrassing and stressful. This type of incontinence usually indicates that the bladder's storage system isn't working properly.

A variety of treatments exist for urge incontinence and they include eliminating certain fluids and foods from your diet which may irritate your bladder (such as caffeine), prescription medications and as well as surgical interventions.

Sometimes this type of incontinence can be combined with stress incontinence.

What is stress incontinence?

Stress incontinence indicates a problem with the urethra or the "valve" that closes the bladder. Women will leak from the bladder when they cough, laugh or sneeze, or even change positions. This type of incontinence is usually related to the effects of childbirth or menopause which have weakened the pelvic support for the urethra.

Pelvic exercises (e.g. Kegel exercises), support devices inserted in the vagina and some surgical procedures, can help this condition.

Sometimes this type of incontinence can be combined with urge incontinence. Current research has not proven that hormone therapy (HT) improves incontinence conditions in any significant way.

Are urinary tract infections more common during perimenopause and menopause?

A urinary tract infection (UTI) is a sign that something is out of balance and needs to be treated. As hormone levels decline at this time of life, there can often be a direct impact on the tissues, muscles, glands and functions of the vagina and urinary tract.

Chronic UTIs are cause for some concern and a health professional should always be consulted since this type of infection can cause more serious problems (e.g. bladder infections). It is not necessarily true that UTIs are more common during perimenopause and menopause, but they may be related to other physical changes to the vagina and urinary tract that occur as women age.

What are some of the treatments for urinary incontinence?

A variety of lifestyle, non-surgical support devices, and surgical options are available to address urinary tract issues. Sometimes it is as simple as pelvic exercises (e.g. the Kegel exercises that are often recommended before and after childbirth), that strengthen muscles in the pelvic floor, or even the use of a mechanical support device such as a pessary, which can be inserted into the vagina to support the urinary tract and its function.

Lifestyle can play a role too. Smokers are more at risk for bladder problems, as are obese women. Excessive caffeine consumption can irritate a bladder condition. So losing weight and reducing the amount of fluids you drink each day can modify incontinence problems to some degree. Addressing a chronic cough (if you have one) can also be helpful, along with a few more planned trips to The Ladies Room each day.

How do I discuss difficult problems with my healthcare professional?

- Make a list of what you want to discuss.
- Discuss the most important or most difficult questions first.
- Write down what the doctor tells you.
- If there is anything that you don't understand, ask for clarification.
- If you feel embarrassed, take along some information with you. It can be difficult to discuss embarrassing problems face-to-face, but if you find

information on the Internet or in a book or magazine about your symptoms, you can use this to help explain and avoid having to make eye contact with your physician while discussing the problem.

- If you still feel unable to discuss the subject, write it all down and hand it to the doctor.
- Don't wait to be asked – give the doctor any information that you feel is relevant including a history of the condition, symptoms, the impact they are having on you, any lifestyle factors that may have contributed, any medications you are taking etc.

What other resources can I consult about problems I am having with urinary tract infections and/or incontinence?

The following web sites may also be helpful:

<http://www.continence-fdn.ca>

The Canadian Continence Foundation

A patient support web site developed to help people deal with urinary incontinence.

<http://www.womensbladderhealth.com>

A web site developed by Canadian health professionals.

Women have a lot of questions about the emotional and physical changes that occur during perimenopause and as they reach menopause. The Society of Obstetricians and Gynaecologists of Canada (SOGC) has developed a range of information resources for women. Of course, your family physician, gynaecologist or obstetrician is your best front-line resource for the questions you may have about menopause.

Visit www.menopauseandu.ca for more information about menopause and other women's health issues.