



# Treating Stress Urinary Incontinence in Women

*Urology Care*  
FOUNDATION™

*The Official Foundation of the  
American Urological Association*

## WHAT IS STRESS URINARY INCONTINENCE (SUI)?

Stress Urinary Incontinence, or SUI, is when urine leaks out. It's caused by sudden pressure on the bladder and urethra. The pressure causes the sphincter muscles to open briefly. When they open it causes urine to leak. With mild SUI, pressure may be from sudden forceful actions, like workouts, sneezing, laughing or coughing. More severe SUI is when you leak while doing less forceful actions such as standing up, walking or bending over. Urinary "mishaps" like this can be a few drops of urine, or enough to soak through your clothes.

## TYPES OF INCONTINENCE

Urinary incontinence is a problem with the loss of control over urination. There are two main types:

- **Stress Urinary Incontinence (SUI)** a small to moderate amount of urine is released, without control. This happens when you cough, sneeze, or laugh.
- **Urge Urinary Incontinence (UUI) or Overactive Bladder (OAB)** a sudden, uncontrollable need to urinate. Leaks may be moderate to large.

## WHAT CAUSES SUI?

The most common risk factors for SUI are:

- Females are more likely to get SUI
- Pregnancy and giving birth
- Nerve wounds to the lower back
- Smoking (which leads to coughing)

- Life-long coughing
- Being overweight

## SUI MYTHS

There is a lot of misinformation on SUI. These myths are simply not true:

- It is part of being a woman
- It is a normal part of aging
- It is hereditary – my mom had it, and so will I
- I could have stopped it
- There is nothing that can be done for it

## WHAT ARE THE SYMPTOMS OF SUI?

The main symptom of SUI is when urine leaks out during any action that puts pressure on your belly. These leaking "mishaps" can be a few drops to enough to soak through clothes.

## HOW IS SUI TREATED?

**Lifestyle Changes and Products:** Making a few changes in your everyday life can help SUI symptoms. You can lose weight, stop smoking (to help you cough less) and keep yourself healthy. Exercises, bladder training to schedule bathroom visits, and SUI products may also help.

- **Pelvic Floor Muscle Exercises (Kegels):** Daily Kegels are proven to strengthen your pelvic floor. This helps support the bladder and other organs. It's of great value to do Kegels the right way and often.

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- **Absorbent Products:** As a quick-fix, or long-term choice, absorbent pads are a choice if leaks are not a major problem in your life. They come in many shapes and forms. They can be pads, or pull-on briefs.
  - **Medical Devices for Women:** If your pelvic floor muscles are weak, a tool may be used to help with symptoms.
  - **Vaginal Pessairies:** A vaginal pessary is a firm yet flexible tool that is put into the vagina. It repositions and supports the urethra and/or uterus. There are many kinds that can be either re-used or thrown away. Pessaries are often safe, with a small risk of infection. If you use a pessary, set a plan to visit your healthcare provider. That way it can be checked, cleaned and refitted as needed.
  - **Urethral Plug:** To help stop SUI during high actions, you may have the choice of an occlusive tool (also called urethral plug). At this time, there are no approved urethral plugs ready in the U.S. They are a tool that blocks the urethra, while a vaginal tool adds support through the vagina.
- Surgical Treatment:** If surgery is needed, there are many choices. Learn the risks and benefits, and what to expect during and after surgery before you decide. Aim to work with a urologist with knowledge in SUI surgery. Female Pelvic Medicine and Reconstructive Surgeons (FPMRS) are certified in SUI and other pelvic surgery.
- **Urethral Injections / Bulking Agents:** Urethral shots are used to “bulk up” the urethra. “Bulking agents” are put into the urethra and bladder sphincter to help the way the sphincter closes the bladder. This treatment may not have long lasting results, and may need to be repeated over time.
  - **Sling:** The most common surgery for SUI in women is “sling” surgery. A small strip of matter (a sling) is placed under your urethra to stop it from moving downward during actions. It acts as a hammock to support the urethra and the neck of the bladder. There are many types of slings. The midurethral sling is most common. This is a thin strip of man-made mesh, placed under the urethra. The traditional sling (autologous) is when a strip of your own tissue is taken from the lower belly or thigh and used as a sling.
  - **Bladder Neck Suspension:** Is also called Retropubic Suspension, Colposuspension, or Burch Suspension. In this

surgery, stitches are placed in the tissue along the bladder neck and urethra. They are attached to a section along the pubic bone. This supports the urethra and sphincter muscles to stop them from moving downward and opening by mistake. (This is not as common as sling surgery).

**Drugs:** There are no drugs approved in the U.S. to treat SUI at this time. If you have mixed incontinence, your healthcare provider may tell you to take OAB drugs or treatments. They do not treat SUI, just OAB symptoms.

## WHAT HAPPENS AFTER TREATMENT?

The goal of any treatment for incontinence is to help your quality of life. Surgical treatments often work, and, work even better when blended with lifestyle changes. Keep up with daily Kegel exercises to care for pelvic muscle strength. But, if you still have problems with SUI, talk with your healthcare provider about other choices.

## ABOUT THE UROLOGY CARE FOUNDATION

The Urology Care Foundation is the world’s leading urologic foundation – and the official foundation of the American Urological Association. We provide information for those actively managing their urologic health and those ready to make health changes. Our information is based on the American Urological Association resources and is reviewed by medical experts.

To learn more, visit the Urology Care Foundation’s website, **UrologyHealth.org/UrologicConditions** or to go **UrologyHealth.org/FindAUrologist** to find a doctor near you.

## DISCLAIMER

This information is not a tool for self-diagnosis or a substitute for professional medical advice. It is not to be used or relied on for that purpose. Please talk to your urologist or health care provider about your health concerns. Always consult a health care provider before you start or stop any treatments, including medications.

For copies of other printed material and other urologic conditions, visit **UrologyHealth.org/Order**.

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