

Urinary incontinence assessment

Types of urinary incontinence

- **Stress incontinence:** Complaint of involuntary loss of urine during effort or physical activity (sports), or when sneezing or coughing.
- **Urge incontinence:** Complaint of involuntary loss of urine associated with an urge to urinate.
- **Mixed incontinence:** Combination of stress urinary incontinence and urge urinary incontinence.
- **Overactive bladder syndrome (OAB):** Urinary urgency, usually accompanied by frequency and nocturia, with or without urgency urinary incontinence, in the absence of urinary tract infection or other obvious pathology.

Initial assessment

- Urinary analysis and exclusion of other pathologies (urinary tract infections, screening for malignant tumors, bladder stones, hematuria, etc.)
- Evaluation of discomfort (ICIQ-UI-SF)
- Renal function evaluation
- Evaluation of fluid balance (bladder diary and information on fluid intake)
- History of pelvic pathology or surgery (traumatic deliveries, history of irradiation)?
- Neurological symptoms?
- Comorbidities affecting lower urinary tract symptoms (diabetes, heart disease)
- Medications affecting lower urinary tract symptoms (diuretics)

Clinical history

Clinical check-up

- Pelvic organ prolapse
- Oxford scale

Validated questionnaires

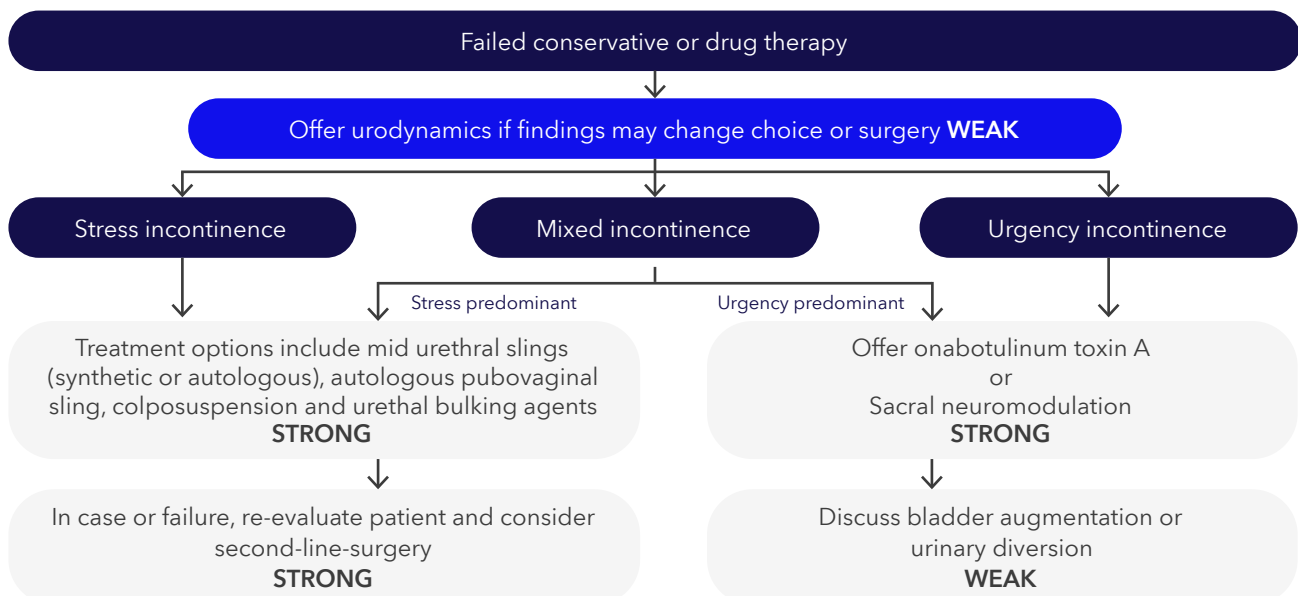
- Bladder diary

Additional tests

- Bladder ultrasound

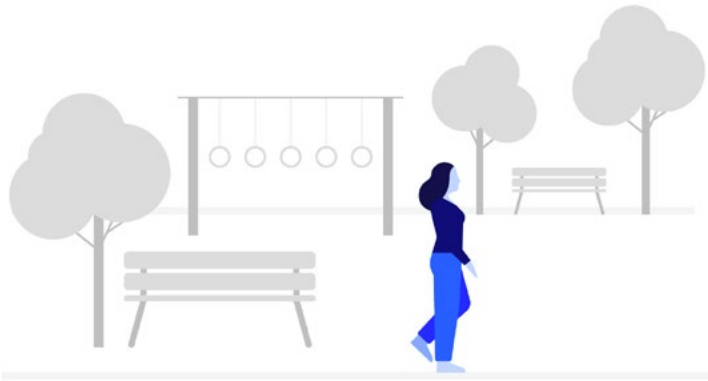
Cardozo, L, Rovner, E, Wagg, A, Wein, A, Abrams, P. (Eds) Incontinence 7th Edition (2023). ICI-ICS. International Continence Society, Bristol UK, ISBN: 978-0-9569607-4-0.

If conservative treatment fails, refer to a specialist for the following management:



Urge incontinence and OAB

Treatment options



First-line treatments of urge urinary incontinence and OAB

- Engage in moderate physical activity every day
- Reduce intake of stimulants:
 - Caffeine,
 - Theine,
 - Alcohol
- Maintain a healthy weight
- Maintain an appropriate level of hydration
- Perform bladder training
- Medical treatment: anticholinergics, beta-3 agonists

Focus on bladder training

- **Kegel exercises:** Kegel exercises can help strengthen the muscles under the uterus, bladder and large intestine. They can help men and women who experience problems with urinary leakage or bowel control.
- **Hypopressive exercises:** Hypopressive abdominal gymnastics involves working on the abdominal region using breathing techniques based on expiratory apnea.



Minimally invasive procedures

- **Sacral Neuromodulation (SNM):** SNM provides continuous stimulation of the sacral nerves, using low-amplitude electrical impulses to restore control of bladder functions.
- **Botulinum toxin A (Botox):** Botox injections are used to reduce bladder contractions by acting on nerve endings in the bladder wall.

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