

# **Management of Urinary Incontinence**

#### Assessment -

### History-

- Bladder function urgency, frequency, type of incontinence (stress or Urge), nocturia, voiding difficulties, recurrent UTI, painful mictuirition, pain on full bladder digitate to mictuirition.
- Bowel function- constipation, incomplete emptying, digitate or perineal support to defecate, fecal incontinence
- Sexual function- sexually active, dyspareunia
- Prolapse- bulge felt
- Pain- vaginal pain or any other pain
- Report bothersomeness of all symptoms on the questionnaire. Use QOL questionnaire –Australian Queensland
- Rule out red flag symptoms-hematuria.

## **Examination-**

- Abdominal- to r/o palpable bladder or any pelvic mass
- Vaginal examination -to check prolapse ( POP-Q)
   Oxford score to assess pelvic floor strength
   Urethral hypermobility
   Any clinical evidence of stress incontinence
- Investigation-

Urine analysis and PVR; Fluid Volume Chart

### **Initiate Conservative management-**

- 1. PFMT, BT, Fluid advice, reduce weight, stop smoking
- 2. Trial of anticholinergics or Mirabegron if symp s/o of OAB or urgency predominant mixed UI (calculate anticholinergic burden). No anticholinergics in patients with closed angle Glaucoma
- 3. Vaginal estrogen if vaginal atrophy

## Urodynamics (UDS) – who failed conservative management

#### **Indications**

- 1. Recurrent urinary incontinence with previous surgery for stress incontinence
- 2. Urge predominant mixed urinary incontinence not responding to conservative management
- 3. Symp suggestive of voiding dysfunction
- 4. In patients where type of urinary incontinence is not clear

# Surgical management-

# Discuss in MDT for all surgical interventions for UI (primary and recurrent)

Stress incontinence- discuss Colposuspension, autologous sling, anterior repair and UB (if associated prolapse) and bulkamid. Provide department information leaflet

Urge urinary incontinence- Discuss BOTOX, Neuromodulation, CONDUIT

## Reference-

NICE guidance on urinary incontinence (NG123) - April 2019

Version 1, DOA-2/4/20, DOR-2/4/25

Author- Monika Vij

Consultant Gynaecologist, subspecialist urogynaecologist