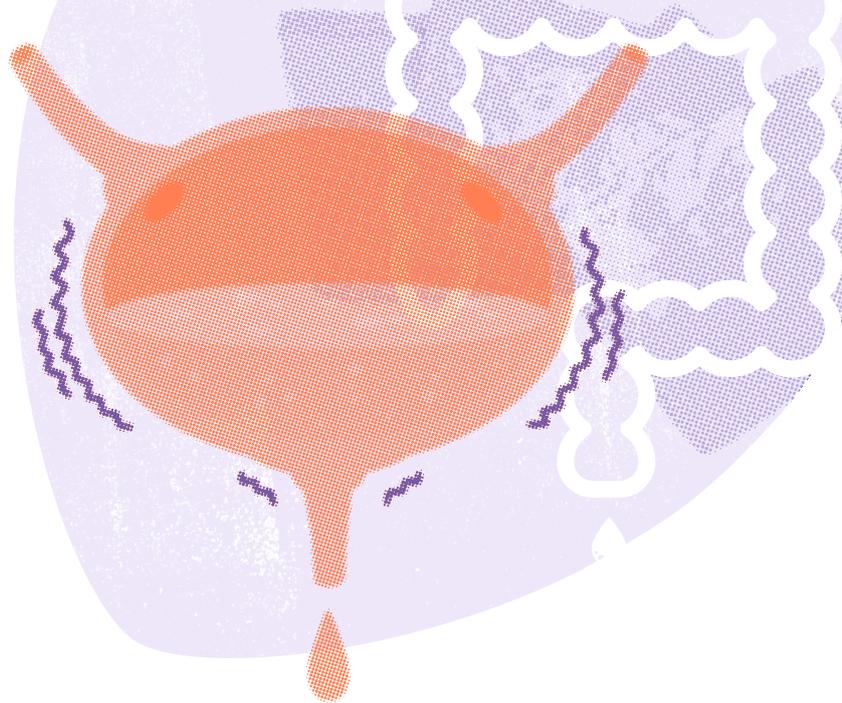


INCONTINENCE

Incontinence means accidental or involuntary loss of urine (wee) from the bladder or faeces (poo) or flatus (wind) from the bowel.



DEFINITIONS

Urinary incontinence:

Involuntary loss of urine (wee).

Faecal incontinence:

Involuntary passage of flatus (wind) or faeces (poo).

Urgency:

Needing to pass urine or faeces urgently with little or no warning.

Nocturia:

Needing to pass urine frequently overnight.

Urinary retention:

Being unable to empty the bladder fully.

Types of urinary incontinence

Stress incontinence:

Leakage of urine when you strain, cough or sneeze.

Urge incontinence:

A sudden strong urge to pass urine, followed by the loss of urine if you don't make it to the bathroom in time. It is also called an overactive bladder.

A mix of both stress and urge incontinence can occur.

Urinary incontinence can also be caused by:

- **Chronic retention** - being unable to completely empty the bladder.
- **Functional** - resulting from a disability.
- **Continuous** - bladder unable to store any urine.

INCONTINENCE IS A COMMON CONDITION THAT RANGES IN SEVERITY FROM 'JUST A SMALL LEAK' TO COMPLETE LOSS OF BLADDER OR BOWEL CONTROL. INCONTINENCE CAN HAVE A HUGE IMPACT ON A PERSON'S QUALITY OF LIFE. INCONTINENCE CAN BE TREATED AND MANAGED, AND IN MANY CASES, IT CAN BE CURED.

What tests are done?

Your doctor or pelvic floor physio may ask you to keep a bladder diary, and request tests such as an ultrasound or urodynamic studies, to help work out the cause and management of symptoms. It is also important to rule out other causes such as infections and medical conditions.

Urinary incontinence

Urinary incontinence describes the involuntary loss of urine from the bladder and is a common condition experienced by women.

There are many factors that increase risk of urinary incontinence including:

- pregnancy
- childbirth
- menopause
- medical conditions including diabetes, stroke, heart conditions, prostate problems, asthma, obesity, multiple sclerosis, arthritis
- urinary tract infections
- constipation
- surgery e.g. hysterectomy (removal of all or part of the uterus and/or ovaries)
- physical or cognitive disability, which makes it harder to access a toilet
- some medications.

Urinary incontinence may feel like:

- an occasional leak when you laugh, cough or exercise
- needing to go to the toilet urgently
- needing to go to the toilet frequently
- a complete inability to control your bladder.

If you are always feeling thirsty as well as having to urinate frequently, talk to your doctor to check that you do not have an underlying medical condition (e.g. diabetes, urinary tract infection). Urinary incontinence can be managed, treated and often cured. However treatment and management will depend on the cause of urinary incontinence, so it is important to see your doctor if you have symptoms.

Faecal incontinence

Faecal incontinence is a term used to describe leakage from the bowel due to poor bowel control. You may also find you have excessive wind or experience staining of your underwear. Poor bowel control can be caused or made worse by a number of things including certain health conditions or medicines taken to treat other problems.

Faecal incontinence presents as inability control the passage of wind or faeces (poo) or not being able to make it to the toilet in time.

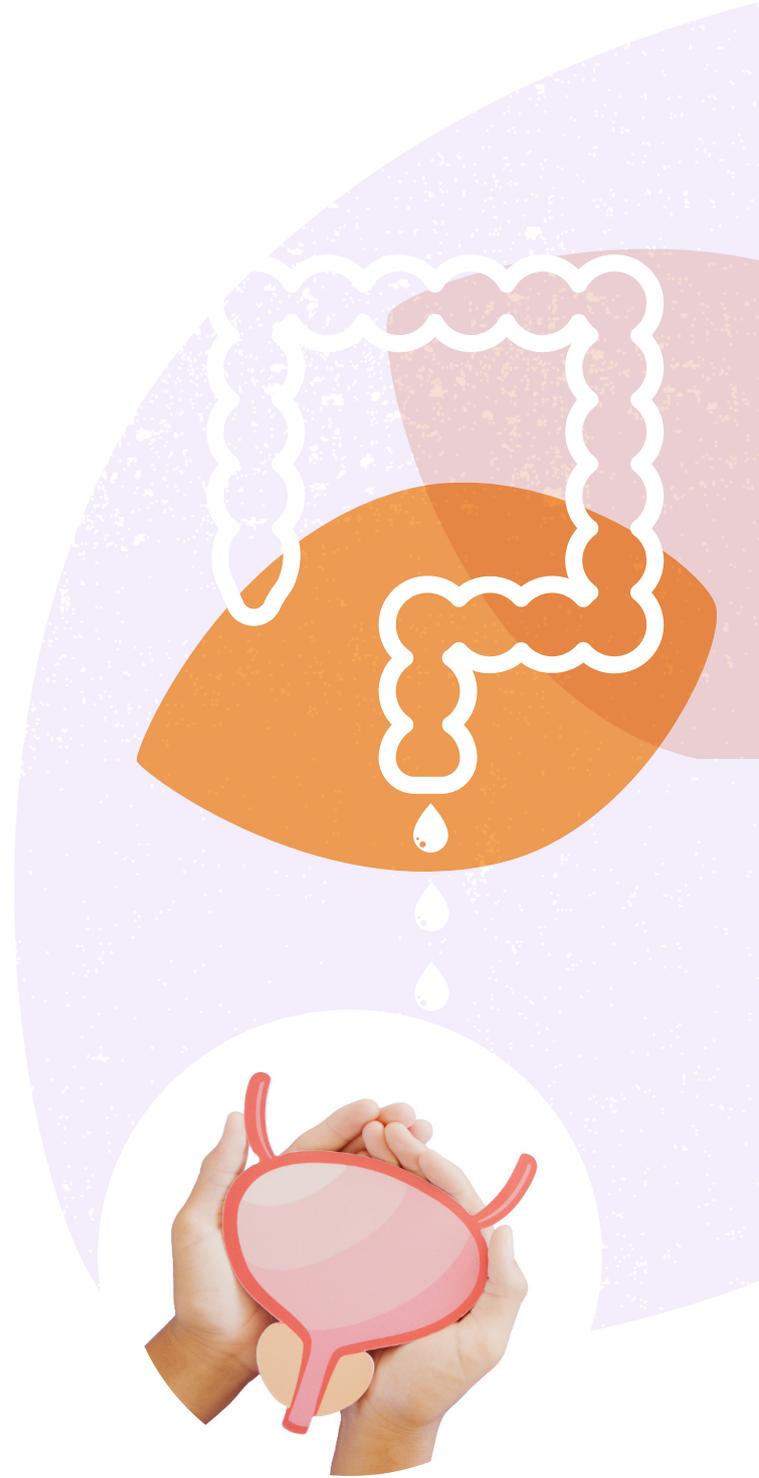
Factors that can contribute to loss of bowel control include:

- long term straining
- medications (e.g. antibiotics, medication for diabetes or arthritis)
- damage to the anal sphincter or pelvis floor muscles (may be caused by heavy lifting, childbirth, surgery, chronic coughing or sneezing)
- inflammatory bowel disease e.g. ulcerative colitis, crohn's disease
- nerve disorders resulting from multiple sclerosis, muscular dystrophy, stroke, parkinson's disease
- dementia
- diarrhoea
- constipation.

Possible treatments for faecal incontinence include:

- pelvic floor exercises.
- changes to diet.
- medications (eg., laxatives for constipation).
- surgery to repair damage to the rectum or anus.

Disclaimer: True Relationships & Reproductive Health (True) has taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to confirm that the information complies with present research, legislation and policy guidelines. True accepts no responsibility for difficulties that may arise as a result of an individual acting on this information and any recommendations it contains.



Further information:

Australian Government:
[Bladder & Bowel website.](#)

Australian Commission on Safety and Quality in Health Care:
[Consumer Factsheet](#)

Continence Foundation of Australia:
[What is incontinence?](#)

For more information visit: true.org.au

