

Original link: <http://www.uptodate.com/contents/urinary-incontinence-in-women-beyond-the-basics>

## **Patient information: Urinary incontinence in women (Beyond the Basics)**

### **URINARY INCONTINENCE OVERVIEW**

Urinary incontinence, also known as urinary leakage, is an embarrassing problem that affects millions of women. Although it is more common in older women, it can affect younger women as well. Urinary frequency, the need to run to the bathroom frequently, is another bothersome problem that can affect women.

There is no need to live with urine leakage or frequency because effective treatments are available. This article discusses the different types of leakage and the tests that may be done during your evaluation. The treatment of incontinence and frequency is discussed separately. (See ["Patient information: Urinary incontinence treatments for women \(Beyond the Basics\)"](#).)

More detailed information about incontinence is available by subscription. (See ["Approach to women with urinary incontinence"](#) and ["Treatment and prevention of urinary incontinence in women"](#).)

### **TYPES OF URINARY INCONTINENCE**

The two most common types of urine leakage in women are urge and stress incontinence.

**Urgency incontinence** — In people with urgency incontinence, there is a sudden, overwhelming urge to urinate. You may leak urine on the way to the toilet. Common triggers of urgency incontinence include unlocking the door when returning home, going out in the cold, turning on the faucet, or washing your hands.

Some people with urgency incontinence also have to go to the bathroom frequently during the day and/or night. Frequency is defined as the need to urinate more often than other people (normal is considered to be eight times in 24 hours).

**Stress incontinence** — Stress incontinence occurs when the muscles and tissues around the urethra (where urine exits) do not stay closed properly when there is increased pressure ("stress") in the abdomen, leading to urine leakage. As an example, coughing, sneezing, laughing, or running can cause stress incontinence. Stress incontinence is a common reason for incontinence in women, especially those who have had children.

Mixed incontinence — People with both stress and urgency incontinence are said to have mixed incontinence.

Overactive bladder — People with overactive bladder have a sudden, overwhelming urge to urinate, but may or may not leak urine before getting to the toilet. People with overactive bladder often have to go to the bathroom during the day and/or night.

Other types of incontinence — In addition to stress and urgency incontinence, there are other, less common types of urinary incontinence.

- The bladder does not empty completely, causing leakage when the bladder becomes overly full. This is called overflow incontinence.
- Incontinence may be caused or worsened by medical problems, medications, and/or difficulty with thinking clearly.

## INCONTINENCE DIAGNOSIS

Although leaking urine can be difficult to talk about, it is not normal at any age and is often treatable by exercises and/or medications. Talking about it with your healthcare provider is the first step in getting help for this problem that is affecting your life. (See ["Epidemiology, risk factors, and pathogenesis of urinary incontinence"](#).)

Important questions to discuss include:

- When do you leak? (when you get a sudden urge, with coughing/sneezing, or does it occur without warning?)
- When did your leakage begin? Has it worsened or improved over time?
- Have you tried any treatments to reduce leakage?
- Do you ever leak stool (smears or pieces of stool)?

Bladder diary — A bladder diary is a record of how much urine you make and how frequently you go. You may also be asked to write down how much fluid you drink and activities that caused leakage ([form 1](#)). This diary provides useful information about the cause(s) and potential treatment of your leakage.

Tests — Simple tests may be done during an office visit to determine the type of leakage you are experiencing. This may include a cough test, when you are asked to cough while your doctor or nurse watches for urine leakage.

A urine test (urinalysis) is usually done to look for signs of infection or blood in the urine. Blood tests may be ordered to measure the kidney function.

Urodynamic testing — A urodynamic test is a test that measures how much urine your bladder can hold, what makes you leak urine, and determines if there are problems emptying the bladder. This test can be done in the office, and may be recommended if you are planning surgery for urine leakage or if the cause of your leakage is not clear.

## INCONTINENCE TREATMENT

The treatment options for urinary incontinence are discussed in a separate topic review. (See ["Patient information: Urinary incontinence treatments for women \(Beyond the Basics\)".](#))

## WHERE TO GET MORE INFORMATION

Your healthcare provider is the best source of information for questions and concerns related to your medical problem.

This article will be updated as needed on our web site ([www.uptodate.com/patients](http://www.uptodate.com/patients)). Related topics for patients, as well as selected articles written for healthcare professionals, are also available. Some of the most relevant are listed below.

Patient level information — UpToDate offers two types of patient education materials.

The Basics — The Basics patient education pieces answer the four or five key questions a patient might have about a given condition. These articles are best for patients who want a general overview and who prefer short, easy-to-read materials.

[Patient information: Urinary incontinence \(The Basics\)](#)

[Patient information: Pelvic muscle \(Kegel\) exercises \(The Basics\)](#)

[Patient information: Urinary incontinence in men \(The Basics\)](#)

[Patient information: Neurogenic bladder in adults \(The Basics\)](#)

[Patient information: Surgery to treat stress urinary incontinence in women \(The Basics\)](#)

[Patient information: Treatments for urgency incontinence in women \(The Basics\)](#)

Beyond the basics — Beyond the Basics patient education pieces are longer, more sophisticated, and more detailed. These articles are best for patients who want in-depth information and are comfortable with some medical jargon.

[Patient information: Pelvic floor muscle exercises \(Beyond the Basics\)](#)

[Patient information: Urinary incontinence treatments for women \(Beyond the Basics\)](#)

Professional level information — Professional level articles are designed to keep doctors and other health professionals up-to-date on the latest medical findings. These articles are thorough, long, and complex, and they contain multiple references to the research on which they are based. Professional level articles are best for people who are comfortable with a lot of medical terminology and who want to read the same materials their doctors are reading.

[Approach to women with urinary incontinence](#)

[Epidemiology, risk factors, and pathogenesis of urinary incontinence](#)

[Lower urinary tract symptoms in men](#)

[Pelvic floor disorders associated with pregnancy and childbirth](#)

[Pelvic organ prolapse and stress urinary incontinence in women: Combined surgical treatment](#)

[Stress urinary incontinence in women: Persistent/recurrent symptoms after surgical treatment](#)

[Treatment and prevention of urinary incontinence in women](#)

[Stress urinary incontinence in women: Choosing a primary surgical procedure](#)

[Vaginal pessary treatment of prolapse and incontinence](#)

[Stress urinary incontinence in women: Choosing a type of midurethral sling](#)

[Stress urinary incontinence in women: Retropubic midurethral slings](#)

[Stress urinary incontinence in women: Transobturator midurethral slings](#)

The following organizations also provide reliable health information.

- National Library of Medicine

([www.nlm.nih.gov/medlineplus/urinaryincontinence.html](http://www.nlm.nih.gov/medlineplus/urinaryincontinence.html), available in Spanish)

- The American Urogynecology Association

([www.mypelvichealth.org/](http://www.mypelvichealth.org/))

- National Association for Continence

1-800-BLADDER

([www.nafc.org](http://www.nafc.org))

- Simon Foundation

([www.simonfoundation.org](http://www.simonfoundation.org))

- National Institute of Diabetes & Digestive & Kidney Diseases

(<http://kidney.niddk.nih.gov/kudiseases/pubs/uiwomen/>)

- Continence Worldwide (Continence resources outside the United States)

([www.continenceworldwide.com](http://www.continenceworldwide.com))

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Literature review current through: Oct 2013. | This topic last updated: Feb 8, 2013.

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3. Fantl JA, Newman DK, Colling J, et al. Urinary Incontinence in Adults: Acute and Chronic Management. Clinical Practice Guideline, No. 2, 1996 Update, AHCPR Publication No. 96-0682.

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4. [Brown JS, Bradley CS, Subak LL, et al. The sensitivity and specificity of a simple test to distinguish between urge and stress urinary incontinence. Ann Intern Med 2006; 144:715.](#)
5. [Wyman JF, Choi SC, Harkins SW, et al. The urinary diary in evaluation of incontinent women: a test-retest analysis. Obstet Gynecol 1988; 71:812.](#)