Understanding INCONTINENCE

Keeping Control

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Part-I: Introduction

Incontinence- An Overview

Urinary incontinence is the situation when you are unable to control passage of urine. Such urine passage could be in small leakages or in large amounts. Your body makes urine in your kidneys. The urine comes from waste materials after your body absorbs the nutrients from your intake of food and fluids. The urine flows out from your kidneys into your urinary bladder. This stores your urine until the bladder becomes full. Then your brain signals you to empty your urinary bladder and you urinate through your urethra.

However, sometimes this process is just not that simple. You urinate involuntarily due to various factors. Such urinary incontinence or bladder incontinence is not necessarily an old age problem. It occurs with equal intensity in elders and youngsters, men and women alike. Many people fear discussing this embarrassing problem with a doctor.

Under normal conditions, your urine holding capacity finds support in different organs of the urinary system. Such organs are kidneys, urinary tract, and your nervous system. With these, you need the physical and physiological ability to recognize your urges and then urinate at the proper place and time.

Urination involves both filling and storing of urine and then emptying the bladder. Initially your bladder stretches to accommodate your urine inflow from the kidneys. It has a capacity to store around 350 to 500 ml of urine. You first feel the sensation to urinate when 200 ml of urine accumulates in your urinary bladder. A healthy bladder and nervous system can control the urge for

quite some time after the first urge, and you will get more urine in your bladder generally before you decide to urinate.

The functional sphincter muscle and detrusor muscle of the bladder wall control such filling and storing. Next, the detrusor muscle acts on the brain's signals to empty the urinary bladder. Contraction of this muscle while relaxing the sphincter muscles, pours out urine from your body.

A major misconception among women suffering from urinary incontinence is that this is a gender specific problem and is common with advancing age. It is an intrinsic part of being a woman and can occur because of childbirth.

If you have recently had a baby, and you are losing control, you need to consult with your doctor. If your kids are older and you have been dealing with this problem on your own and it is still troubling you, it's time to talk to your doctor.

You need to erase such misconceptions and seek medical help to address your problem. Timely medical assistance can solve your incontinence problem.

Women die of breast cancer because they do not want to discuss their condition with a doctor and "normal" people live a lifetime of unnecessary misery dealing with coughing, sneezing, laughing and urinating.

Urinary incontinence is mainly due to infections in the urinary tract and other problems associated with the urinary system. Some of you could change your lifestyles and other habits, like intake of alcohol and sedatives, to overcome problems of urinary incontinence. The normal approach to such incontinence problems is bladder training. Kegel exercises and simple medications also

provide relief from incontinence problems. (Kegel Exercises are explained on page 50.)

Kegel exercises strengthen pelvic muscles, which control the functioning of your urinary system. You can practice such exercises while doing simple things like watching television, making a meal, or even while driving your car. Of course, you should not do them while urinating, as they will further weaken your pelvic muscles. Drug therapy, surgeries, urinary catheter, and pads are other solutions for your urinary incontinence problem.

Urinary incontinence is either temporary or chronic incontinence. Again, it could be due to surgeries, nervous disorders, diseases, childbirth, or other psychological disabilities. Such incontinence is due to different factors, which classify the category of urinary incontinence. Normally children below six years old do not fall under this categorization, as they need to develop full toilet habits. However, such problems are prevalent in elderly people and many hospital patients.

Whatever may be the cause for your urinary incontinence, you can receive much relief from medications and advice of doctors. Hence, it is not necessary to hide your problem. Instead, discuss it with urologists and find the proper cure for your incontinence problem.

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Part-II: Understanding Incontinence

2. What is Incontinence?

When you are not able to control your urination, it is urinary incontinence. It is the same as uncontrollable urination or loss of bladder control. Such inability could occur on rare occasions or you could have a total inability to control your urination.

The first time I had incontinence was after my 9 pound 9 ounce son was born. For months, every time I laughed, tried to run or jump or sneeze, I'd wet. There is no elegant way to say it, really. You simply cannot control your bladder. My doctor told me it would go away on its own. Then I found out about Kegel exercise and those helped a lot. Still, my doctor said that they would go away.

I wanted to study more about it, as I found it inconvenient and embarrassing.

The main organs controlling your urination are your bladder, muscles and nervous system. Muscular tissues of your bladder and urethra combine with different voluntary muscles of your skeletal system and nervous system. Together they regulate passage of urine. Sometimes these muscles are unable to function normally due to certain physiologic, pathologic, or anatomical abnormalities. You may also encounter problem of urinary incontinence due to different specific muscular disorders or congenital disorders like multiple sclerosis, spina bifida, and ALS. Hence, you are unable to store or control passage of urine.

Urinary incontinence in infants and children below six years old is normal, as they are yet to develop complete toilet habits. Such young children may also wet their beds at night. Some children suffer from infections and anatomical irregularities in the urinary tract, nervous disorders, or spinal injuries resulting in urinary incontinence. Some young girls may have slight urinary seepages while laughing.

The majority of the problem of urinary incontinence is high among elderly people, especially with women. Though this is not a major problem, yet it is better to seek advice of urologists and gynecologists. They can assess the severity of the issue and treat it accordingly.

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3. Physiology and Function of the Bladder and Urinary Tract?

Your urinary system with the help of different organs ensures normal excretion of urine from your body. When such normal excretion does not take place, you suffer from urinary incontinence.

Physiology of Urinary System

Kidneys, bladder, ureters, and urethra constitute your urinary system. Your hipbones in your pelvis region encompass the urinary bladder behind the pubic bone. This muscular and hollow sac in the shape of a balloon stores urine. Strong and fibrous tissue keeps your urinary bladder intact maintaining contact with other pelvic organs. Normal storage capacity of your bladder is around sixteen ounces for around two to five hours. The urethra is a tubular structure, which flushes out your urine through the bladder. It opens into the bladder through bladder neck.

Male and Female Urethra

The urethra in women is approximately four centimeters long, starting from the bladder neck to the vaginal opening. It has many smooth muscular fibers, sphincter fibers, mucous membrane, and a layer of elastic tissue. Collagen tissue keeps all these fibers together.

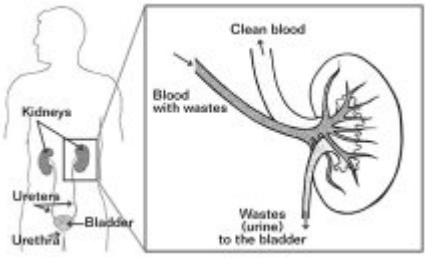
The male urethra is around eight to nine inches long from the bladder neck to the end of the penis. Three main parts of the male penis are prostatic, spongy, and membranous.

- **Membranous part** is around three-quarter of an inch between triangular parts of pelvis region.

- **Prostatic**, widest part of penis consists of muscular fibers, fibrous tissue, and many glandular openings connecting to prostate gland.

- The longest part of male urethra is the **spongy part**, through the entire penis until the glands at the tip of penis. Corpus spongiosum encompasses and protects the male urethra.

Working of your Urinary System



Your body absorbs essential nutrients from your food to maintain your health, provide energy, and restore injured tissues. Your body absorbs the moisture content from your solid and liquid diets. Your urinary system removes waste products, specifically urea from your body fluids. Digestion of protein rich foods like poultry, some vegetables, and meat forms urea, which passes into your kidneys through blood. They combine with other waste products and water to form urine. Kidneys are bean shaped organs mainly responsible for excretion of waste products from your body.

A human adult forms and excretes around one and half quarts of urine every day. This quantity varies from individual to individual. It depends on intake of fluids and food, fluids lost through breathing and sweat, and intake of diuretics and other medicines.

The urine flows out from kidneys into ureters to enter the urinary bladder. Every ten to fifteen seconds a few drops of urine accumulate in your urinary

bladder. When the bladder becomes full and round, your body needs to excrete urine. The brain signals the urinary system to relax to allow flow of urine out of your body through the urethra. This is a normal process in continent persons, who can control excretion of urine.

Urethral sphincter muscles keep the urethra closed until you are free to urinate. Pubococcygeus (PCG) muscles enclose the urethra to stop unwanted seepage of urine. **Bladder muscles** tighten and contract to push out urine from your body only when you feel the pressure of urination. Relaxed sphincter and pubococcygeus muscles allow normal urination. However, if you are unable to control the urination process, you suffer from urinary incontinence.

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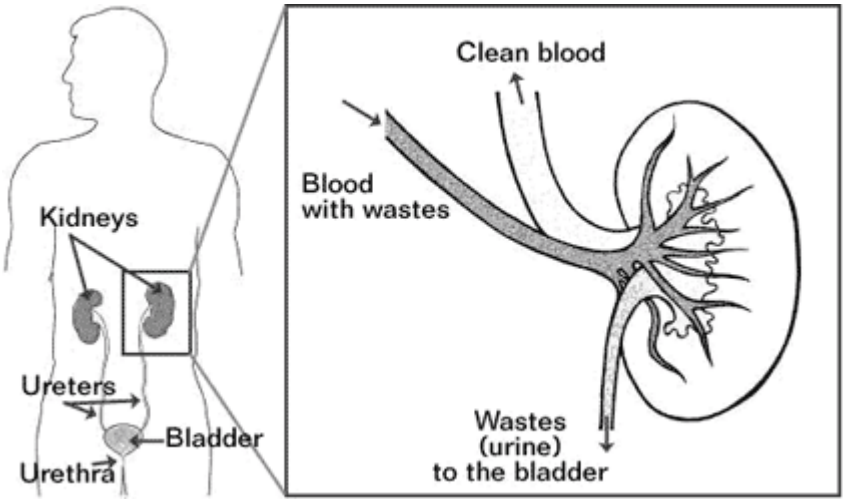
Kidney Stones

Your Kidneys

Your kidneys are bean-shaped and each is about fist-size. They sit near the middle of your back, just below the rib cage. They gather your body's waste. Every day, your kidneys 'harvest' about 2 quarts of waste products and extra water from your bloodstream which becomes urine.

That goes through ureter tubes to your bladder where it is stored until expelled.



Your kidneys also help control blood pressure and to make red blood cells.

What is a Kidney Stone?

A kidney stone is a lump formed in the kidney from waste in the urine.

Small stones may be expelled in the urine without much pain. But larger stones may stick in a ureter, the bladder, or the urethra and then block the flow of urine, causing intense pain.

Types of Kidney Stones

There are four main types.

1. The most common type contains **calcium** (KAL-see-um). Calcium is an essential part of your healthy diet but any which isn't used by your body for your bones and muscles goes to your kidneys.

    a. Mostly, they flush it out in your urine. If all the calcium is not flushed, it combines with other waste products and calcium kidney stones result.

2. A **struvite** stone sometimes forms after a urinary system infection. They contain **magnesium** and waste ammonia.

3. A **uric acid** stone may form if there is too much acid in the urine. If you get uric acid stones, you may need to cut down on the meat you eat.

4. **Cystine** stones are uncommon. Cystine is a component needed for you to build muscles, nerves etc., but it can build up in the urine to become a stone. This condition is hereditary.

Examples of Kidney Stones

Kidney stones may be smooth or bumpy, are usually yellow or brown and vary in size from a small grain to pearl-size though occasional ones can be as big as a golf-ball. These examples are not to size:

Some Available Treatments

If you have a stone and cannot pass it, consult your doctor as soon as possible.

Surgery used to be the only way to remove it. However, research is ongoing.

Here are some of the current methods;

Shock Waves

Doctors send shock waves to the kidney stone. They break large stones down to a size which will pass with your urine.

With some machines, you sit in a tub of water, while you lie on a table with other machines.

This method is called extracorporeal lithotripsy. Lithotripsy is a Greek word that means stone crushing.

Tunnel Surgery

The doctor makes a small cut in your back and a narrow tunnel through the skin to the stone in the kidney. Then, the doctor puts a special instrument through the tunnel, finds the stone and removes it. This is percutaneous nephrolithotomy.

Ureteroscope

A ureteroscope is like a long wire. The doctor puts it into the patient's urethra, up through the bladder to the ureter where the stone is. The instrument has a camera that lets the doctor see the stone. Then, either a cage is used to catch the stone and pull it out, or the doctor may destroy it right there.

How Doctors Identify the Stone

If you know that you are passing a stone, try to catch it in a strainer. Seeing the stone is the best way for your doctor to identify what kind of stone you have and it is also the easiest on you.

Your doctor may ask for a urine sample (or you may need to collect your urine for a 24-hour period) or take blood to find out what causes your stones. These tests help your doctor suggest how you might avoid stones in future.

