Urinary Incontinence [1]

This section has been reviewed and approved by the Cancer.Net Editorial Board [2], 02/2013

Some cancers and cancer treatments may result in incontinence, the inability to control urination. Incontinence, which can occur in men or women, may be short-term (temporary) or long-term (permanent). There are different types of incontinence, ranging from mild to severe.

- Stress incontinence can cause a person to leak urine during activities such as coughing, laughing, sneezing, or exercising.
- Overflow incontinence means it takes a long time to urinate and there is a dribbling stream of urine.
- Urge incontinence is a sudden, urgent need to urinate.
- Continuous incontinence is the loss of all ability to control urination.

Because incontinence can cause discomfort or affect your quality of life, it is important to talk with your health care team about how to treat or manage this condition. Relieving side effects, also called symptom management, palliative care [3], or supportive care, is an important part of your cancer care and treatment.

Causes

After urine forms in the kidneys, it flows into the bladder, a hollow, balloon-like organ. From the bladder, urine flows down a tube called the urethra and out of the body. Sphincter muscles (which act like a valve that holds urine in or releases it) work together with nerves that carry signals to them and the bladder to control urination. Some cancers and cancer treatments may damage or change these muscles and nerves, or they may cause other changes to the body that lead to incontinence.

Cancers that may put you at greater risk for incontinence include:

- Cancers in or near the pelvic region (the area of the body that holds the bladder and reproductive organs), such as prostate, colon, rectal, urethra, and bladder cancers, as well as gynecological cancers (cancers that affect a woman?s reproductive system), such as cervical cancer and uterine cancer
- Brain or spinal cord cancers, which can affect nerves that help control the bladder or pelvic muscles
- Lung or esophageal cancer, which can cause chronic coughing that places stress on the

bladder
- Breast cancer, which can cause hormonal changes that dry out the urethra

Cancer treatments that may put you at greater risk for incontinence include:

- Radiation [4] to the pelvic area, which can irritate the bladder
- Chemotherapy [5], because it may cause nerve damage, vomiting (which strains the muscles that control urination), or loss of hormones
- Surgery [6] to the pelvic area, which can damage muscles or nerves that help control urination
- Bone marrow/stem cell transplant [7] with high dose chemotherapy because it can cause vomiting and bladder inflammation
- Hormone therapies, which can dry out the urethra

Diagnosis

If you find that you are having problems controlling your bladder, your health care team will work with you to find out why. Evaluation methods include:

- A bladder journal in which you keep track of items such as when you urinate, how often, and how much
- Urine testing to look for signs of infection or other causes
- A stress test in which you are asked to cough as hard as possible with a full bladder
- Techniques that measure pressure in the bladder and urine flow
- Ultrasound [8] (a test that uses high-frequency sound waves to create a picture of your bladder and other body parts that help control urination)
- Cystoscopy (a tiny camera is inserted into the bladder)
- Cystogram (an x-ray of the bladder)

Treatment

Incontinence is often treatable. How it is treated depends on what caused it, the type, how long it has occurred, and severity. A combination of treatments is often used, including:

- Behaviorial techniques, such as bladder training, which includes learning to delay urination after you get the urge to go, scheduling toilet trips, fluid and diet management, and biofeedback (measuring devices that help you gain control over the muscles that hold in urine)
- Physical therapy, which includes kegel exercises (an exercise that strengthens muscles used to hold in urine) and electrical stimulation
- Medications, such as oxybutynin (Ditropan, Ditropan XL) and tolterodine (Detrol, Detrol LA), or the anti-depressants imipramine (Tofranil) and duloxetine (Cymbalta)
- Medical devices such as a urethral insert (a plug inserted into the urethra) or a pessary (a stiff ring placed in a woman?s vagina to help support bladder muscles)
- Injections of collagen into the neck of the bladder to reduce leaking
- Estrogen (a type of hormone) applied to the urethra or vaginal tissue (for women)
- Surgery to insert an artificial urinary sphincter or to create a ?sling? around the neck of the bladder and urethra to keep it closed
- Catheterization, a procedure in which a tube is inserted through the urethra and into the bladder to drain urine

Management

If you have incontinence, the following methods and tips may help you manage it:

- Limit the amount of fluids you drink, particularly coffee and alcohol.
- Urinate before bedtime and before strenuous activity.
- Wear an absorbent pad inside your underwear. You can buy pads at your local grocery store or drugstore.
- Practice Kegel exercises. To perform these exercises, contract (tighten or clench) the muscles in your pelvis like you do when you try to stop the flow of urine or avoid passing gas. During the contraction, keep the muscles in your abdomen, buttocks, and thighs relaxed.
- Lose extra weight, which can place pressure on the bladder and supporting muscles.
- Stick to a urination schedule.
- Avoid foods that can irritate the bladder, including dairy products, citrus fruits, sugar, chocolate, soda, tea, and vinegars.
- Quit smoking. Nicotine can irritate the bladder, causing excessive coughing.
- Get support. Incontinence is common so do not be embarrassed to talk about it with your health care team or a support group.

More Information

After Treatment for Prostate Cancer: Managing Side Effects [9]

Managing Side Effects [10]

Additional Resources

National Institutes of Health: Urinary Incontinence [11]

LIVE**STRONG**: Urinary Incontinence [12]

Links:
[1] http://www.cancer.net/navigating-cancer-care/side-effects/urinary-incontinence
[2] http://www.cancer.net/about-us
[3] http://www.cancer.net/node/25282
[4] http://www.cancer.net/node/24728
[5] http://www.cancer.net/node/24723
[6] http://www.cancer.net/node/24720
[7] http://www.cancer.net/node/24717
[8] http://www.cancer.net/node/24714
[9] http://www.cancer.net/node/24373
[10] http://www.cancer.net/node/25238
[11] http://health.nih.gov/topic/UrinaryIncontinence
[12] http://www.livestrong.com/urinary-incontinence/