Side effects of certain medications • Pregnancy and natural childbirth, leading to pelvic floor damage Menopausal changes Ageing Stroke, dementia

• Spinal cord diseases or injuries

• Restricted physical mobility Obesity, heavy lifting, constipation, chronic cough

Stress incontinence: Due to physical activities such as coughing, sneezing, laughing, exercising or lifting. Common causes include pregnancy, childbirth, obesity and pelvic organ prolapse.

Urge incontinence: A sudden, intense urge to urinate. This type is often linked with overactive bladder conditions.

Mixed incontinence: A combination of both stress and urge incontinence.

Overflow incontinence:

Unrelated to physical exertion or urgency and can result from conditions such as stroke, dementia, diabetes mellitus or complications following childbirth or surgery.

True incontinence:

Continuous leakage due to congenital urinary tract abnormalities or a fistula. This is a rare complication following gynaecological surgery.

TREATMENT FOR URINARY INCONTINENCE

- Lifestyle changes limit fluid intake, especially diuretics such as caffeine and alcohol; reduce weight
- Pelvic floor muscle exercises (Kegels)

Have a leaky bladder? You're not alone

Urinary incontinence is more common than it appears

COMMON CAUSES

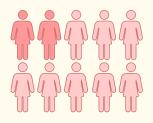
Urinary tract infections

In consultation with Dr Melissa Tay, Consultant, Department of Urology, NUH.

WHO DOES URINARY **CONTINENCE AFFECT?**



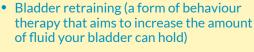
Around **14.5%** of people in Asia suffer from urinary incontinence



In Singapore, about 10% -20% of women

suffer from stress urinary incontinence





- Medications (for urge incontinence)
- Surgery

TYPES OF URINARY INCONTINENCE







