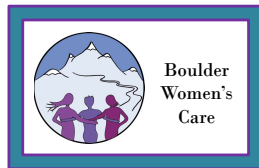


Latest Treatments for a Leaky Bladder

Jeremiah McNamara, MD, OBGYN

Boulder Women's Care

303-441-0587



Boulder
Women's
Care

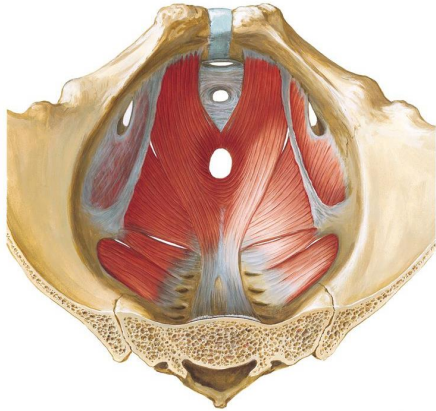
Financial Disclosures

- ▶ None

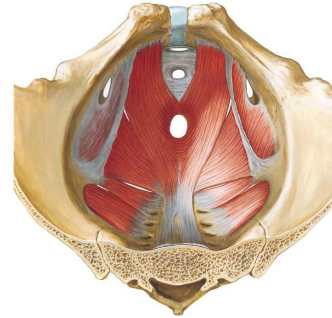
Agenda: Prolapse & Urinary Incontinence

- ▶ The Big Issue: **Pelvic Floor Dysfunction**
- ▶ The Big Problems:
 - ▶ Prolapse
 - ▶ Urinary Issues
 - ▶ Others: Bowel issues, Pain
- ▶ For each:
 - ▶ How does it present? Who is at risk?
 - ▶ Treatments
 - ▶ Lifestyle → Conservative → Procedures

The Pelvic Floor

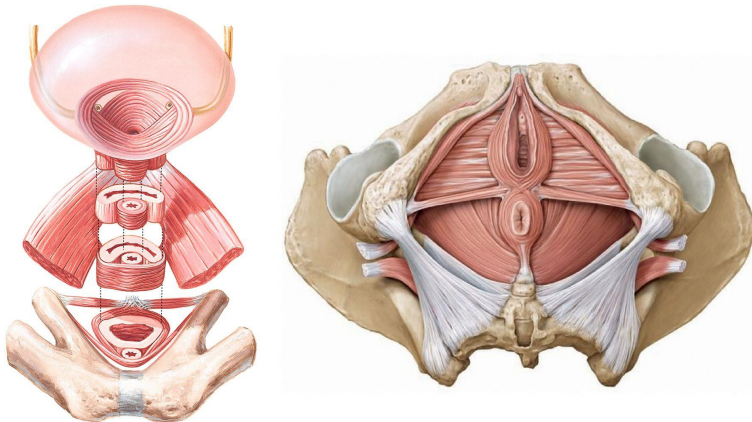


Pelvic Floor (Dysfunction)



'A range of issues that arise out of **weakness, spasm, or discoordination** of the structures that make up the "Pelvic Floor" – A complex association of muscles, the connective tissues that anchor them to the bony pelvis, and the organs that they support physically, and assist functionally.'

The Pelvic Floor



INCIDENCE & IMPACT

- ▶ **Affects 1 in 4 women**
- ▶ **50% of women over 50** live every day with one or more of these problems
 - ▶ **Most Common: Stress urinary incontinence**
 - ▶ **1 in 3 of those** women with urinary incontinence have some degree of bowel dysfunction
- ▶ **60%** of nursing home occupants suffer from daily fecal and/or urinary incontinence
 - ▶ As much as **20% lifetime risk of needing surgery** for prolapse or incontinence
 - ▶ Surgical repair of prolapse is **the most common surgery** performed in women older than 70
- ▶ **Thousands** of dollars per year spent on pads and other products. **\$300 million** on ambulatory care in 2006.

It is **VERY** common.
Many are suffering silently with it.

Voices for PFD

“Well I mean I’ve had these symptoms for years... but didn’t really know there was anything to do about them...”

“I get it... I had had a couple kids – I assumed that some amount of leaking was just part of the deal...”

“I enjoy sex with my partner, but truth be told it is a little painful most of the time, has been that way for years.”

www.voicesforPFD.com

PFD

POP

PELVIC ORGAN PROLAPSE



PFD

Prolapse

Bladder Issues

PFD

Bowel Issues

Pain

PFD

Prolapse

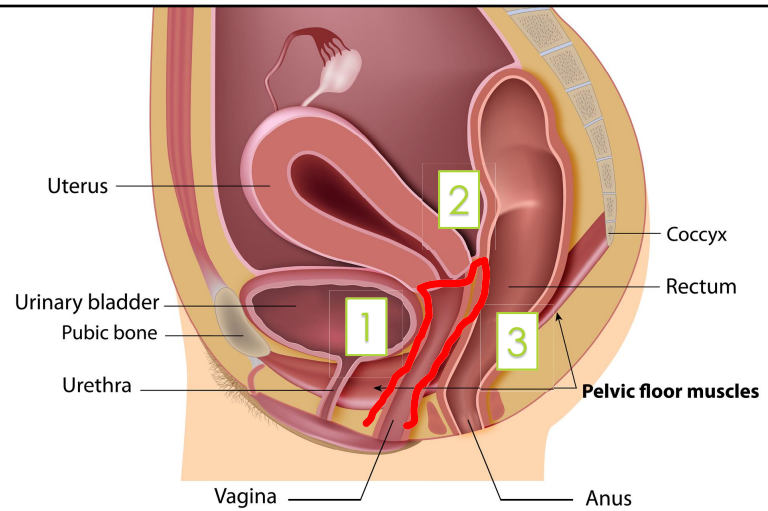
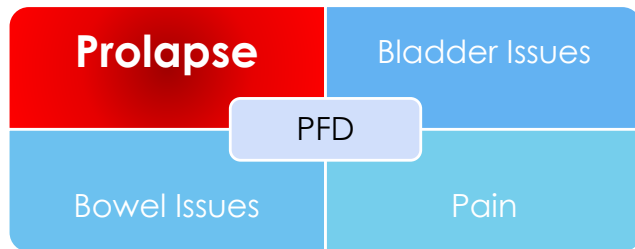
Bladder Issues

PFD

Bowel Issues

Pain

Pelvic Floor Dysfunction



- 1. Cystocele
- 2. Uterine Prolapse
- 3. Rectocele
- 4. Combination

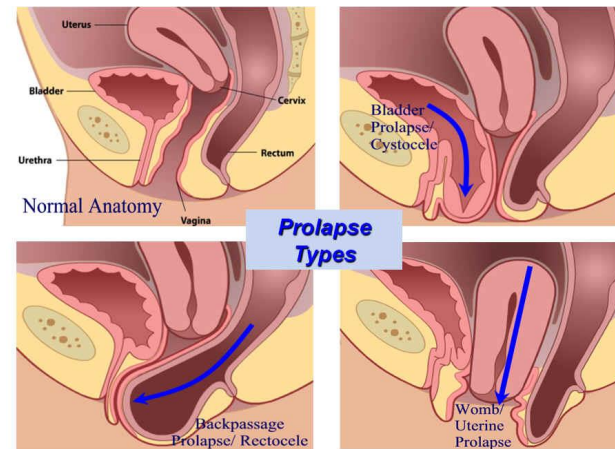
PFD: Pelvic Organ Prolapse

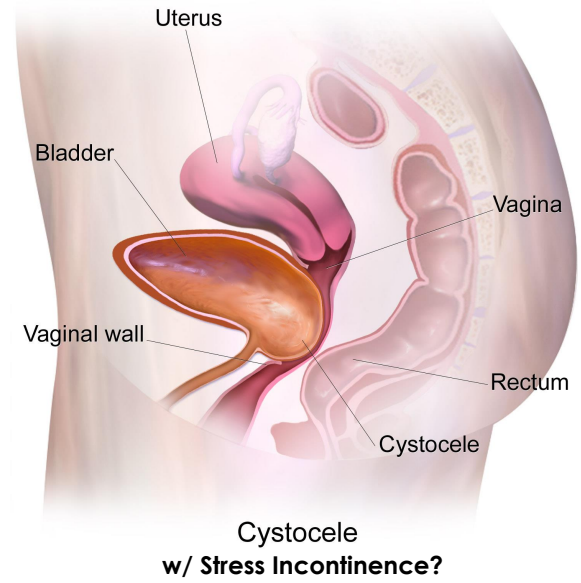
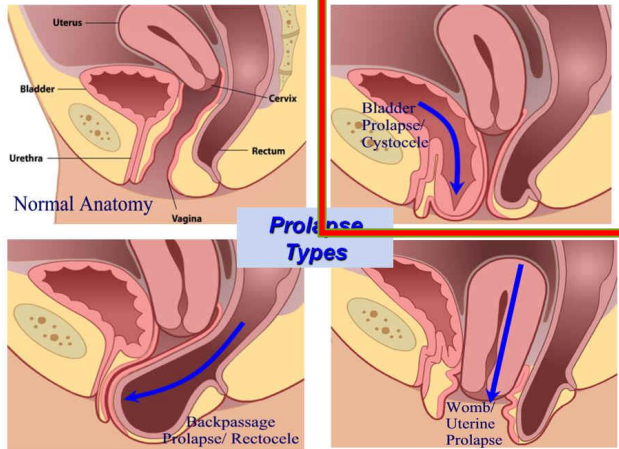
Risk Factors

- ▶ **Pregnancies, Age, Obesity**, Chronic constipation
 - ▶ VD > Cesarean (size of babies not necessarily correlated, cesarean not completely protective)
 - ▶ BMI >25 = two-fold higher risk (weight loss = amazing improvement)
 - ▶ Hysterectomy = Historically - Increased risk of **apical/vault** prolapse

Presentation

- ▶ **Bulge** (vaginal fullness/pressure) 1
- ▶ **Organ system dysfunction** 2
 - ▶ **Cystocele**: Incontinence or Urgency, Double voiding, Splinting, Weak/changing stream, Feeling of needing to pee during intercourse
 - ▶ **Rectocele**: Obstructed/painful BM's, Splinting, Stool trapping, Accidental Bowel leakage, Feeling of needing to have BM during intercourse
- ▶ Low back or pelvic pain





PFD

Prolapse

Bladder Issues

PFD

Bowel Issues

Pain

Pelvic Floor Dysfunction

Prolapse

Bladder Issues

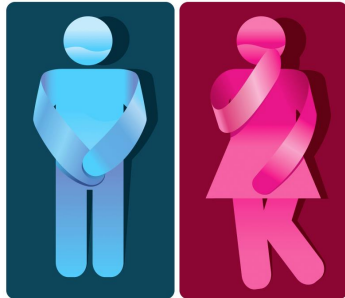
PFD

Bowel Issues

Pain

PFD Bladder Issues

- ▶ Urinary Incontinence
- ▶ Urinary Retention
- ▶ Recurrent UTI's
- ▶ Painful bladder



* With or Without underlying prolapse

"Stress" vs. "Urge"

Stress incontinence



It is the most common, causing involuntary bladder leakage.

Urge incontinence



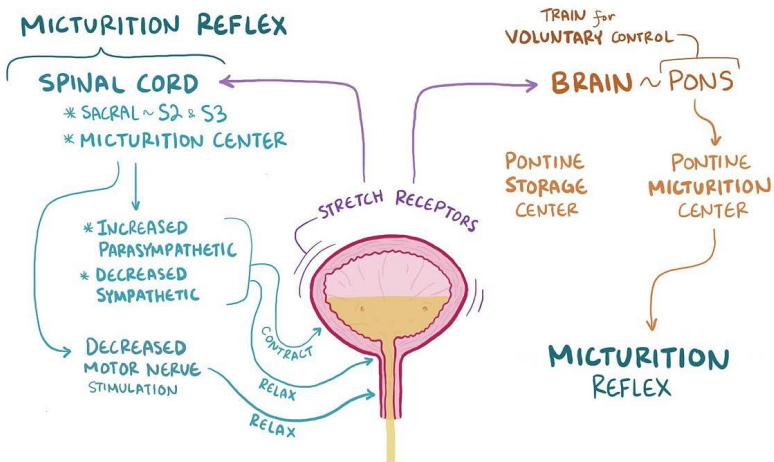
It results in the uncontrollable need to use the bathroom.

Overflow incontinence

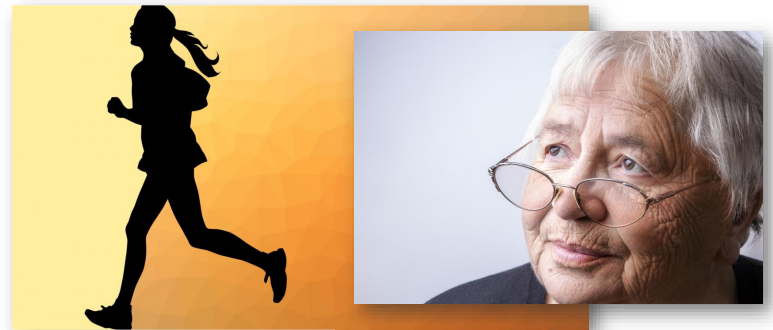


It appears as frequent, constant dripping from the urethra.

MICTURITION REFLEX



PFD Stress Urinary Incontinence



PFD Stress Urinary Incontinence

► Risk Factors

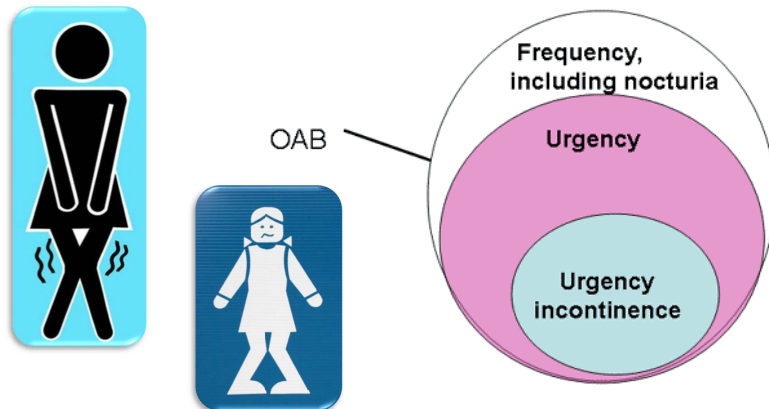
- Pregnancies (VD>CD), but just carrying pregnancy implicated
- Age (Effects of menopause as well as cognitive impairment)
- Overuse of Bladder irritants
- Obesity

► Presentation

- Leaking with cough, sneeze, laugh, position changes, activity
- Unexpected, insensible loss of urine
- Unusual symptoms: Uncontrollable loss of urine, Enuresis, or Incontinence with sexual intercourse



PFD Urgency / Urge Incontinence



PFD Urgency / Incontinence

► Risk Factors

- Lifestyle: Smoking, Bladder irritants
- Prolapse, or H/o bladder/prolapse interventions
- Family history (Twin studies: 35-55% genetic, only 1.5% for SUI)
- Recurrent UTI's

► Presentation

- Frequency ("OAB")
- Bladder pain/bladder spasm, Chronic pelvic pain related to voiding, Urgency, Urge accidents

Treatments



Treatments

• Lifestyle

• Conservative

• Procedures

Treatments: Prolapse

• Lifestyle

• Conservative

• Procedures

Treatments: Prolapse

• Lifestyle

• Conservative

• Procedures

Treatments: Prolapse

• Lifestyle

▶ Correction of Risk Factors

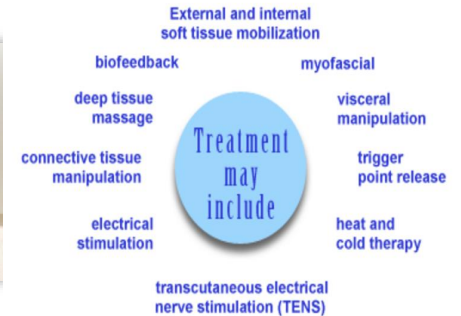
- ▶ Weight loss & Increased physical activity
- ▶ Addressing constipation
- ▶ Quitting smoking

▶ Pelvic Physical Therapy

- ▶ Strengthen pelvic support
- ▶ Improve bowel and bladder function
- ▶ Address PFD-related pain



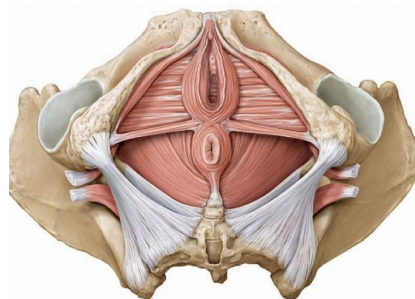
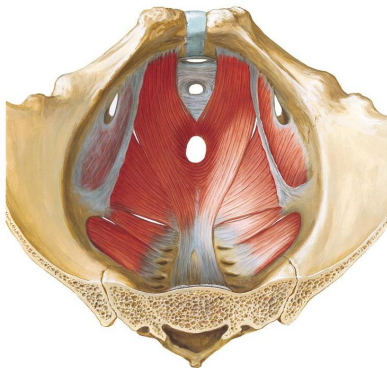
Pelvic Physical Therapy



Move Forward.
Physical Therapy Brings Motion to Life

APTA
American Physical Therapy Association.

Pelvic Physical Therapy



Treatments: Prolapse

• Lifestyle

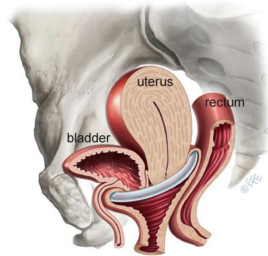
• Conservative

• Procedures

Treatments: Prolapse

• Conservative

▶ Pessary



Treatments: Prolapse

• Lifestyle

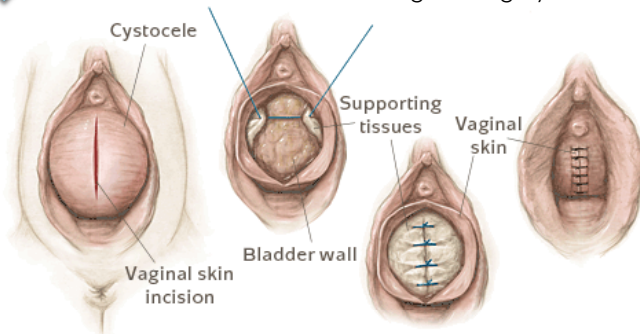
• Conservative

• Procedures

Treatments: Prolapse

• Procedures

- Does not always involve hysterectomy
- Does not mean removing ovaries
- All Vaginal Surgery – no belly incisions



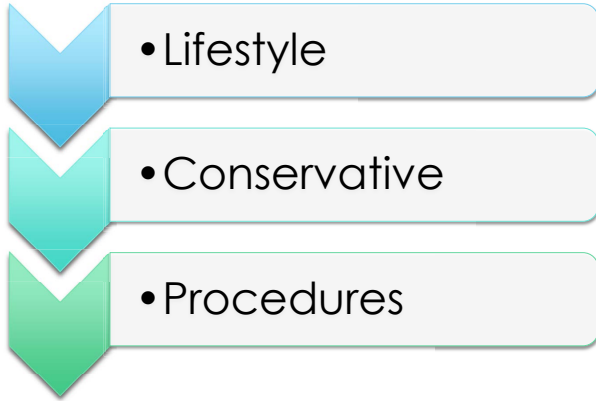
Treatments: Urgency

• Lifestyle

• Conservative

• Procedures

Treatments: Urgency

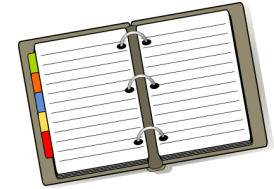


Treatments: Urgency

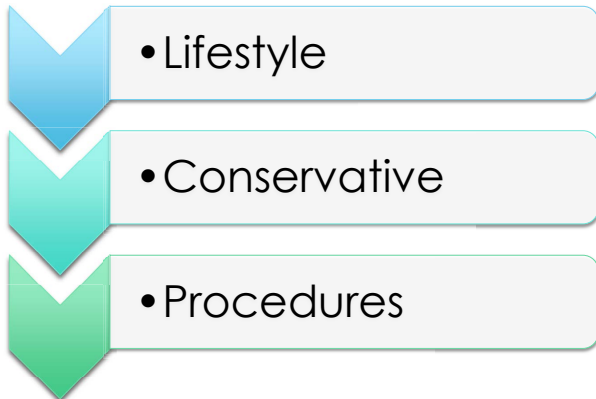


• Lifestyle

- ▶ **Correction of Risk Factors**
 - ▶ Voiding Diary
 - ▶ Avoiding Irritants
 - ▶ Timed Voiding
- ▶ **Pelvic Physical Therapy**
 - ▶ Biofeedback



Treatments: Urgency



Treatments: Urgency



• Conservative

▶ Medications

- ▶ Reduce bladder spasm and reactivity
- ▶ "Anticholinergics" – Oxybutynin, Detrol, etc.
- ▶ Side effects: Dry mouth, dry eyes

Detrol^{LA}
tolterodine tartrate
extended release capsules



Toviaz[®]
fesoterodine fumarate
extended release tablets 4mg and 8mg

Treatments: Urgency

• Lifestyle

• Conservative

• Procedures

Treatments: Stress Leaking

• Lifestyle

• Conservative

• Procedures

Treatments: Stress Leaking

• Lifestyle

• Conservative

• Procedures

Treatments: Stress Leaking

• Lifestyle

▶ **Correction of Risk Factors**

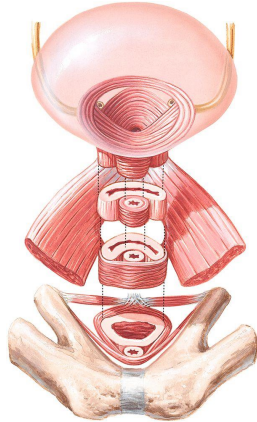
- ▶ Obesity: Weight reduction
- ▶ Quitting smoking
- ▶ Addressing constipation
- ▶ Voiding Diary & Avoiding irritants

▶ **Pelvic Physical Therapy**

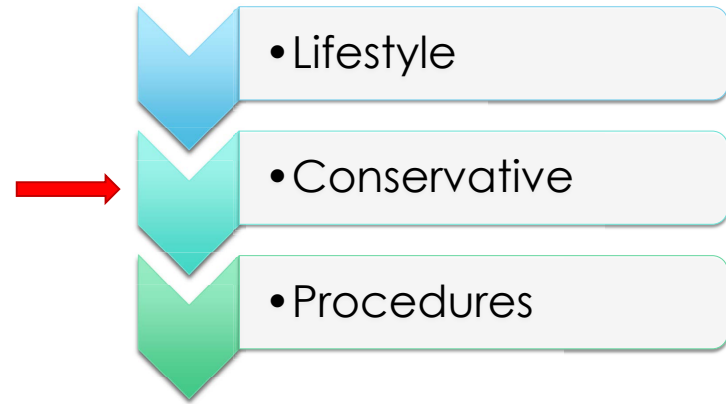
- ▶ PF strengthening (Support AND Sphincters)


**KEEP
CALM
AND
DO YOUR
KEGELS**

Pelvic Physical Therapy



Treatments: Stress Leaking



Treatments: Stress Leaking

• Conservative

▶ Pessary



Poise
IMPRESSA[®]
... BLADDER SUPPORTS ...

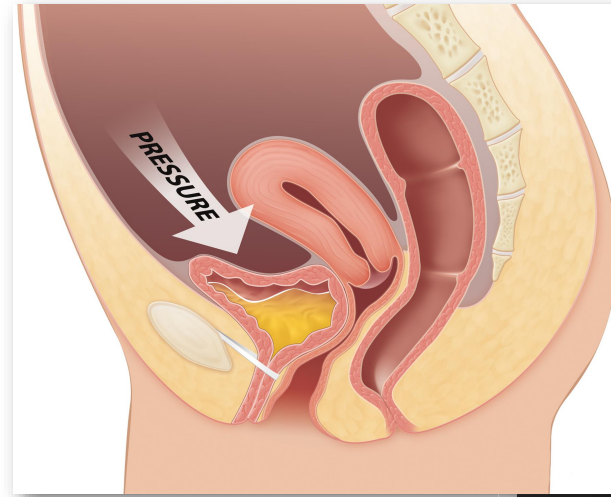


Treatments: Stress Leaking

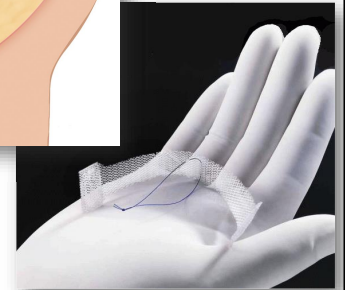
• Lifestyle

• Conservative

• Procedures

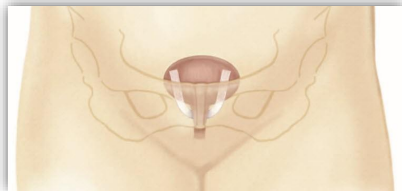


“Incontinence Slings”



Incontinence Slings

- Same day surgery
- Single 1cm incision upper vagina
- Thin strip of permanent mesh
- Benefits:
 - 71-97% cure rate at one year
 - Maintained at 5 yrs
- Risks:
 - Injury to bladder or urethra during operation (1-5%)
 - Post-op urinary retention (1-2%) & Urgency (15%)
 - Mesh erosion (1.1-2.6%)



PFD

Prolapse

Bladder Issues

PFD

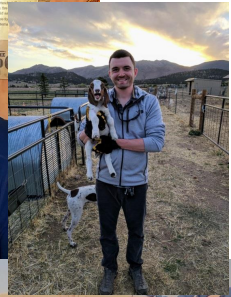
Bowel Issues

Pain

Conclusion

- ▶ PFD is very common, and very undertreated.
- ▶ There are very effective changes you can make on your own.
- ▶ If you need surgery, there are options with short recovery and good success.
 - ▶ Do your Kegels!

Thanks!



LIGHTHEARTED RANCH

Located at the base of the foothills in beautiful Boulder, Colorado.

MEET OUR GOATS

Sources:

- American UroGyn Society (aug.s.org)
- Uptodate.com
- Voices for PFD (voicesforpfd.com)
- The International Pelvic Pain Society (pelvicpain.org)
- The University of Michigan Bowel Control Program (medicine.umich.edu/dept/michigan-bowel-control-program)
- The American Physical Therapy Association (apta.org)
- "Ultrasound Post-Void Residual", Michael Zwank, youtube.com
- The Poise Impressa, Kimberly-Clark Worldwide, Inc. (poise.com/products/impressa)
- Netter Atlas of Human Anatomy, 6e: Copyright © Elsevier Inc. (netterimages.com)

IUGA 
international urogynecological association

PFD



American Urogynecologic Society
Advancing Female Pelvic Medicine and Reconstructive Surgery

<https://vimeo.com/45420786>

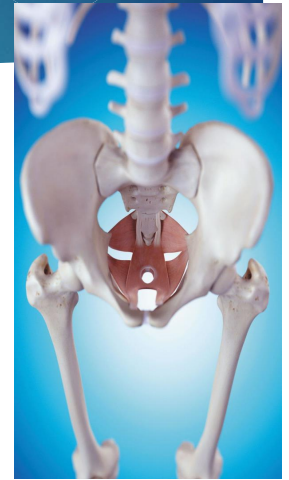


VICTORIA SNELL PT, DPT
MOLLY BARFIELD PT, DPT



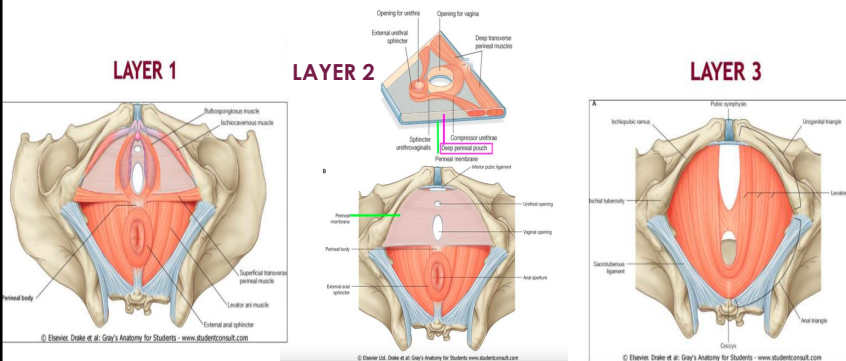
Pelvic Physical Therapy

- What is a pelvic floor physical therapist?
- What does your first visit look like?



What exactly is the pelvic floor?

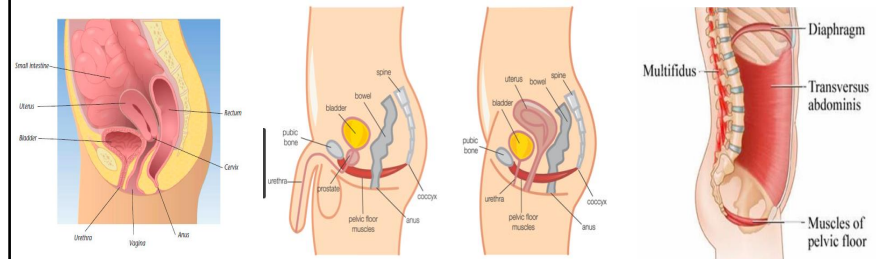
- Muscles that sit at the bottom of your pelvis
 - Span from pubic bone to tailbone
- Voluntary skeletal muscles
- Three different layers
- 22 muscles in total
- 70% slow twitch, 30% fast twitch



What does your pelvic floor do?

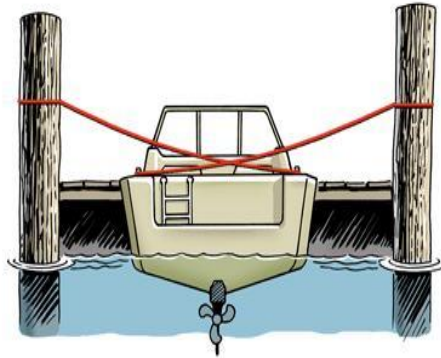
Function of Pelvic Floor 5 S's

1. Sphincteric;
2. Sexual;
3. Support;
4. Stability;
5. Sump Pump



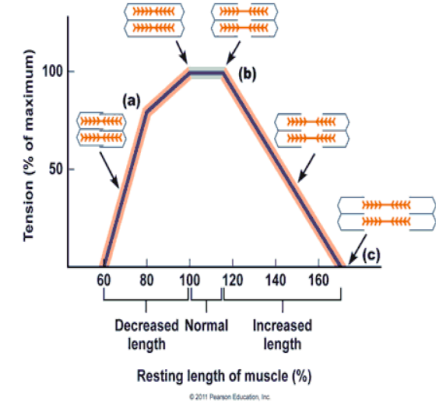
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Pelvic Organ Support



Should you be doing kegel?

- It depends on muscle tone
 - Go see a pelvic PT to determine this
- Muscle tone is the muscles resting tension
- If a muscle has higher than normal resting tone, then pelvic floor contractions or “kegels” may actually make you weaker



How to properly perform a kegel?

- Pelvic floor muscle contraction = kegel
- Internal vaginal/rectal digital exam
- Look at strength and coordination of contraction
 - Strength is graded on a 0-5 scale

Pelvic Floor Strength/Endurance

Laycock's "Modified Oxford Scale"

By Laycock in Therapeutic Management of Incontinence and Pelvic Pain

- 0-Zero-- No Palpable Contraction
- 1-Trace-- Flicker or Pulsation
- 2-Poor-- Contraction (No Lift)
- 3-Fair-- Moderate Contraction w/ Lift Post >Ant
- 4-Good-- Contraction and lift with compression from anterior, posterior and lateral walls
- 5-Strong-- Stronger Lift and compression with cephalic lift of the finger with resistance against posterior vaginal wall

Kegel Homework!

- Normal or lower tone
- Strength
- Endurance



Pessaries: A Quick Note



THANK YOU!

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www.bch.org/Locations/Boulder-Womens-Care

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