

The Food and Drug Administration, or FDA, is a United States government agency. It's FDA's job to make sure drugs and other medical treatments work and are safe.

Do You Have This Problem?

If you sometimes wet yourself, you are not alone. Millions of adults have this problem, called "incontinence." This is when urine leaks out before you get to the bathroom. You may think that the only way to deal with this problem is to wear adult diapers, or pads. But today there are better ways to treat this problem, including taking medicines.

With proper treatment, you will not have to worry about getting rashes, sores, or bladder infections; problems having sex; or being unable to sleep, go out in public, or meet with friends. This brochure tells about the many ways to treat this problem called incontinence.



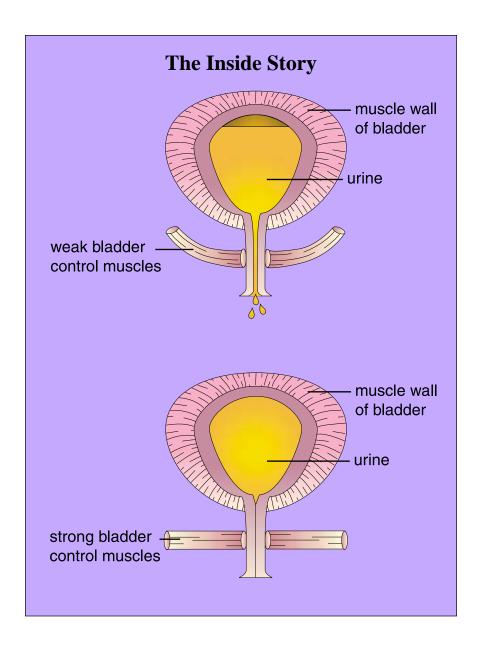
What Causes Incontinence?

There are many reasons adults may leak urine. Sometimes it's caused by an illness, and when the illness goes away, so does the incontinence. For example, bladder infections and, if you are a woman, infections in the vagina can cause incontinence for a short while. Being unable to have a bowel movement or taking certain medicines also may make it hard to control your bladder.

Sometimes incontinence lasts longer. Then the urinary leakage may be

caused by:

- a weak bladder
- weakening of muscles around the bladder.
 This happens with women who have had children. Sometimes the weakened muscles cause urine to leak out when you cough, laugh, sneeze, or do a certain activity.
- a blocked urinary passageway
- O damage to the nerves that control the bladder
- O diseases, such as arthritis, that limit movement.



Facts About Incontinence

- O There are many good ways to treat incontinence.
- O Women are more likely to leak urine than men.
- Incontinence, or urinary leakage, is not normal at any age.
 Older people are more likely to have it, though.
- O Incontinence can be stopped or decreased in almost everyone—even the very old and frail.



Treatment

There are many ways to treat incontinence, from exercises to surgery. Ask your doctor what is best for you.

Bladder or habit training. This will train your bladder to hold urine better. Your doctor may ask you to urinate at set times, such as once every hour. If you stay dry during these times, you may be told to wait longer before going to the toilet—for example, every one-and-a-half-hours. The doctor also may tell you



not to drink beverages with caffeine—such as coffee, tea and colas. You may want to cut down on how much you drink before going to bed. But drink your usual amount of fluids during the rest of the day.

Bladder exercises. These help make the muscles around the bladder strong so you can hold your urine in your bladder longer. They are easy to do—tighten the muscles that you use to stop yourself from urinating. Keep the muscles tightened for about 4 seconds to 10 seconds. Then relax the muscles for the same

amount of time. Increase the number of times you do this over several weeks. The doctor may also suggest using a small device that you put in your vagina or rectum, the low end of the bowel. The device gives a painless electrical pulse that exercises the muscles. This helps the muscles get stronger quicker.

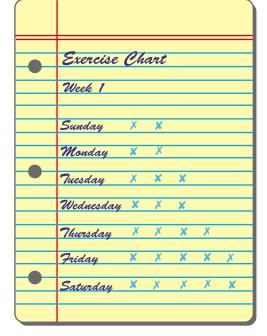












Drugs. Some common ones are Detrol, Cyctospaz, Ditropan, and Levsin. You must have a prescription from a doctor to get these drugs.

Surgery. Surgery can fix problems such as blocked areas. It also can move the bladder so it isn't bumping into another body part, make the bladder bigger, and make weak muscles stronger. A

surgeon can also put in the body a small device that acts on nerves to control bladder contractions.

Catheters. If nothing else helps, the doctor may suggest catheters, thin tubes placed in the bladder by a doctor or by the person. Both drain the bladder for you, sometimes into an attached plastic bag.

Other Treatments for Women Only

Throw-away Patch.

Sold in drug stores as **UroMed or Miniguard** Patch, the patch is about the size of a quarter and is sticky on one side. The woman puts the sticky side over her urinary opening. The patch helps hold in urine. It is not good for heavy leakage and may not always control medium leakage. Women with leakage that is more than light may need to use a panty liner with the patch. The patch can be used for two to three hours at a time during the day, and all night long. You take off the patch to urinate and when

done, put on a new one.

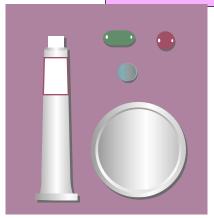
A Plug, called the Reliance Urinary Control Insert. This tiny device must be prescribed by a doctor. You put it in your urethra, the urinary passageway. It helps prevent leakage. To urinate, you remove the insert, and, when you're done going to the bathroom, put in another one.



More Treatments for Women Only

Collagen. This is a type of protein that your doctor shoots into your body with a needle. Collagen thickens the area around the urethra so that you can control your urine flow better.

Estrogen. For women who have reached menopause, estrogen can be taken as a pill, worn as a patch on your skin, or put into the vagina as a cream or ringlike device. You also need a doctor's prescription for estrogen.



More Help

National Association for Continence PO Box 8310 Spartanburg, SC 29305-8310 1-800-BLADDER (1-800-252-3337) www.nafc.org

Simon Foundation for Continence Box 835 Wilmette, IL 60091 1-800-23-SIMON (1-800-237-4666)

U.S. Agency for Healthcare Research and Quality Publications Clearinghouse PO Box 8547 Silver Spring, MD 20907-8547 1-800-358-9295 www.ahcpr.gov/consumer

National Kidney and Urologic Diseases Information Clearinghouse 3 Information Way Bethesda, MD 20892-3580 www.niddk.nih.gov/health/urolog/urolog.htm

How To Do Bladder Exercises www.agenet.com/kegel_exercises.html

Do You Have Other Questions About Bladder Problems?

FDA may have an office near you.

Look for the number in the blue pages of the phone book.



Or, call FDA's toll-free number, 1-888-INFO-FDA (1-888-463-6332).



Or, look on the World Wide Web at www.fda.gov.