Urinary incontinence can impact your quality of life. This condition should not be an embarrassing situation. Urinary incontinence is treatable. Speak to your Landmark provider for help if you are experiencing urinary incontinence symptoms.

Urinary incontinence affects up to 34% of elderly men, and up to 55% of elderly women. Although relatively common, it is important to address urinary incontinence, because in severe cases, it can lead to social isolation and nursing home placement.

Note that urinary incontinence can be caused by multiple factors. There are different types of urinary incontinence, such as stress, urge, overflow, and mixed (meaning you have both urge and stress incontinence).

Risk factors or factors that can worsen urinary incontinence include:

- Prostate cancer treatments
- Diabetes
- Congestive heart failure
- Degenerative joint disease
- Sleep apnea
- Severe constipation
- Mobility problems
- Medications
- Altered thinking due to medical conditions or medications
- Age
- Obesity
- Pregnancy and childbirth (higher rate of urinary incontinence after vaginal delivery)
- Family history
- Ethnicity/race
- Smoking
- Vitamin B12 deficiency
- Infection
- Neurological disorders

Urinary incontinence can lead to emergency room visits due to:

- Falls, which can cause severe injury.
- Urinary tract infection, which can cause mental changes or death.
- Skin breakdown, leading to infection.
Report your symptoms to your doctor if you:

• Leak urine when you cough, sneeze, laugh, or stand up.
• Leak urine without realizing it.
• Leak urine before you make it to the bathroom.

Treatments for urinary incontinence may include:

• Medications. Your Landmark provider can work with your primary care doctor or urologist to determine the best treatment plan for you.
• Simple exercises to strengthen the muscle around your urethra.
• New and improved incontinence undergarments. Speak to your Landmark SW to see if your insurance will help cover the costs of undergarments.
• Lifestyle modifications such as timed urination, bladder training, or weight loss.
• Surgical interventions. (This should not be the first intervention.)

Your provider may wish to order lab work and other noninvasive testing to identify the cause of the incontinence.

Resources

**Geriatric health maintenance**
Author: Mitchell T Heflin, MD, MHS
Section Editor: Kenneth E Schmader, MD
Deputy Editor: Jane Givens, MD

**Urinary incontinence in men**
Author: J Quentin Clemens, MD, FACS, MSCI
Section Editor: Michael P O’Leary, MD, MPH
Deputy Editor: Jane Givens, MD

**Treatment of urinary incontinence in women**
Author: Emily S Lukacz, MD, MAS
Section Editors: Linda Brubaker, MD, FACOG
Kenneth E Schmader, MD
Deputy Editors: Jane Givens, MD
Kristen Eckler, MD, FACOG

**Evaluation of women with urinary incontinence**
Author: Emily S Lukacz, MD, MAS
Section Editors: Linda Brubaker, MD, FACOG
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Kristen Eckler, MD, FACOG

If you have any questions or concerns, contact your Landmark provider or primary care physician.