

Urinary incontinence

Overview

Urinary incontinence — the loss of bladder control — is a common and often embarrassing problem. The severity ranges from occasionally leaking urine when you cough or sneeze to having an urge to urinate that's so sudden and strong you don't get to a toilet in time.

Though it occurs more often as people get older, urinary incontinence isn't an inevitable consequence of aging. If urinary incontinence affects your daily activities, don't hesitate to see your doctor. For most people, simple lifestyle changes or medical treatment can ease discomfort or stop urinary incontinence.

Urinary incontinence care at Mayo Clinic.

Symptoms

Many people experience occasional, minor leaks of urine. Others may lose small to moderate amounts of urine more frequently.

Types of urinary incontinence include:

- Stress incontinence. Urine leaks when you exert pressure on your bladder by coughing, sneezing, laughing, exercising or lifting something heavy.
- Urge incontinence. You have a sudden, intense urge to urinate followed by an involuntary loss
 of urine. You may need to urinate often, including throughout the night. Urge incontinence may
 be caused by a minor condition, such as infection, or a more-severe condition such as a
 neurologic disorder or diabetes.
- Overflow incontinence. You experience frequent or constant dribbling of urine due to a bladder that doesn't empty completely.
- **Functional incontinence.** A physical or mental impairment keeps you from making it to the toilet in time. For example, if you have severe arthritis, you may not be able to unbutton your pants quickly enough.
- Mixed incontinence. You experience more than one type of urinary incontinence.

When to see a doctor

You may feel uncomfortable discussing incontinence with your doctor. But if incontinence is frequent or is affecting your quality of life, it's important to seek medical advice because urinary incontinence may:

- Indicate a more-serious underlying condition
- Cause you to restrict your activities and limit your social interactions
- Increase the risk of falls in older adults as they rush to the toilet

Causes

Urinary incontinence isn't a disease, it's a symptom. It can be caused by everyday habits, underlying medical conditions or physical problems. A thorough evaluation by your doctor can help determine what's behind your incontinence.

Temporary urinary incontinence

Certain drinks, foods and medications may act as diuretics — stimulating your bladder and increasing your volume of urine. They include:

- Alcohol
- Caffeine
- Carbonated drinks and sparkling water
- · Artificial sweeteners
- Chocolate
- Chili peppers
- Foods that are high in spice, sugar or acid, especially citrus fruits
- Heart and blood pressure medications, sedatives, and muscle relaxants
- Large doses of vitamin C

Urinary incontinence may also be caused by an easily treatable medical condition, such as:

- **Urinary tract infection.** Infections can irritate your bladder, causing you to have strong urges to urinate, and sometimes incontinence.
- Constipation. The rectum is located near the bladder and shares many of the same nerves.
 Hard, compacted stool in your rectum causes these nerves to be overactive and increase urinary frequency.

Persistent urinary incontinence

Urinary incontinence can also be a persistent condition caused by underlying physical problems or changes, including:

 Pregnancy. Hormonal changes and the increased weight of the fetus can lead to stress incontinence.

- Childbirth. Vaginal delivery can weaken muscles needed for bladder control and also damage bladder nerves and supportive tissue, leading to a dropped (prolapsed) pelvic floor. With prolapse, the bladder, uterus, rectum or small intestine can get pushed down from the usual position and protrude into the vagina. Such protrusions can be associated with incontinence.
- Changes with age. Aging of the bladder muscle can decrease the bladder's capacity to store urine. Also, involuntary bladder contractions become more frequent as you get older.
- Menopause. After menopause women produce less estrogen, a hormone that helps keep the lining of the bladder and urethra healthy. Deterioration of these tissues can aggravate incontinence.
- Hysterectomy. In women, the bladder and uterus are supported by many of the same muscles
 and ligaments. Any surgery that involves a woman's reproductive system, including removal of
 the uterus, may damage the supporting pelvic floor muscles, which can lead to incontinence.
- **Enlarged prostate.** Especially in older men, incontinence often stems from enlargement of the prostate gland, a condition known as benign prostatic hyperplasia.
- Prostate cancer. In men, stress incontinence or urge incontinence can be associated with untreated prostate cancer. But more often, incontinence is a side effect of treatments for prostate cancer.
- **Obstruction.** A tumor anywhere along your urinary tract can block the normal flow of urine, leading to overflow incontinence. Urinary stones hard, stone-like masses that form in the bladder sometimes cause urine leakage.
- Neurological disorders. Multiple sclerosis, Parkinson's disease, a stroke, a brain tumor or a spinal injury can interfere with nerve signals involved in bladder control, causing urinary incontinence.

Risk factors

Factors that increase your risk of developing urinary incontinence include:

- Gender. Women are more likely to have stress incontinence. Pregnancy, childbirth, menopause
 and normal female anatomy account for this difference. However, men with prostate gland
 problems are at increased risk of urge and overflow incontinence.
- Age. As you get older, the muscles in your bladder and urethra lose some of their strength.
 Changes with age reduce how much your bladder can hold and increase the chances of involuntary urine release.
- **Being overweight.** Extra weight increases pressure on your bladder and surrounding muscles, which weakens them and allows urine to leak out when you cough or sneeze.
- Smoking. Tobacco use may increase your risk of urinary incontinence.
- **Family history.** If a close family member has urinary incontinence, especially urge incontinence, your risk of developing the condition is higher.
- Other diseases. Neurological disease or diabetes may increase your risk of incontinence.

Complications

Complications of chronic urinary incontinence include:

- Skin problems. Rashes, skin infections and sores can develop from constantly wet skin.
- Urinary tract infections. Incontinence increases your risk of repeated urinary tract infections.
- **Impacts on your personal life.** Urinary incontinence can affect your social, work and personal relationships.

Prevention

Urinary incontinence isn't always preventable. However, to help decrease your risk:

- Maintain a healthy weight
- Practice pelvic floor exercises
- · Avoid bladder irritants, such as caffeine, alcohol and acidic foods
- · Eat more fiber, which can prevent constipation, a cause of urinary incontinence
- Don't smoke, or seek help to quit smoking

By Mayo Clinic Staff

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