

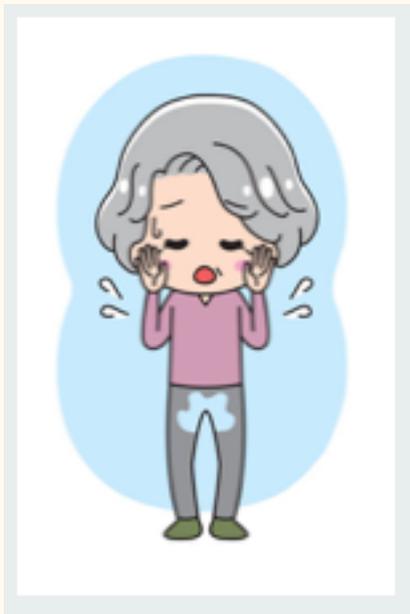
Help is available

Talking about urgency, leakage, pelvic floor dysfunction and other issues might be uncomfortable. But it's the first step toward treatment.

Women's Most Common Urological Concerns How to Treat Them

"I think there are a lot of women who live with these issues and don't realise there are resources or things they can do to improve their quality of life.

[A urologist's gender shouldn't prevent a woman from making an appointment.](#)



Incontinence after pregnancy

The scenario:

This unintentional leakage after laughing, coughing, sneezing or jumping most often occurs in women in their late 30s and older, typically after having children. Excess bodyweight can also contribute to developing leakage

The Solution:

Doctor begins with a physical exam and evaluation. Opting for the "least invasive thing first," will discuss physical and behavioural therapies, including reducing water and caffeine intake as well as trying exercises for the pelvic floor muscles to build strength. Surgical options are available if the problem persists or worsens.



Overactive bladder

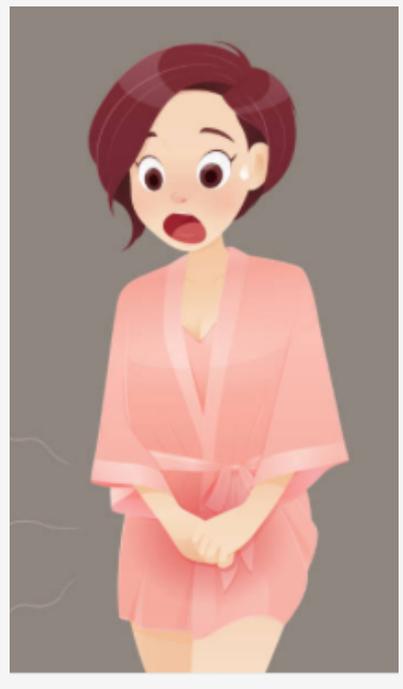


The scenario:

Having to pee at all hours and with little warning can be a nuisance. The cause, typically is simply a side effect of growing older — and it affects men and women alike. Although doctors still aren't sure what causes it, lifestyle factors such as caffeine intake, drinking habits and diuretic medications that rid the body of water can play a role.

The solution:

Behavioural modifications come first: cutting caffeine and alcohol and, if possible, altering the time of taking a diuretic. Physical therapy and medications also are considered. More invasive options include Botox injections and an implantable bladder pacemaker.



Pelvic floor dysfunction

The scenario:

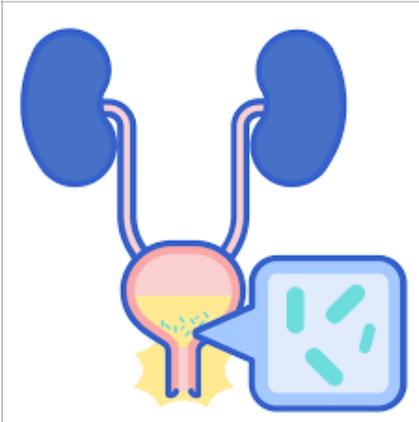
The pelvic floor is a “bowl” of muscles supporting the bladder, vagina and rectum. “Those muscles, particularly after childbirth, get disrupted and can become irritated and inflamed.” The muscles need to relax to urinate well and pass a bowel movement. Tension also can cause pain during intercourse, painful or frequent urination and lower back pain.

The solution:

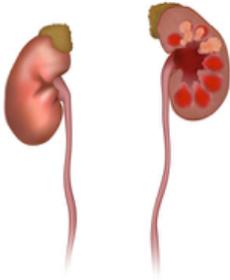
Because most women aren't taught how to relax those muscles, some proactive effort is required. typically directs a patient toward pelvic floor therapy — weekly sessions that help a woman identify and unclench the affected area. (“Some people hold stress in their pelvis and don't even realise it,”) Vaginal medications or muscle injections may help, too.



Urinary tract infection



Pyelonephritis

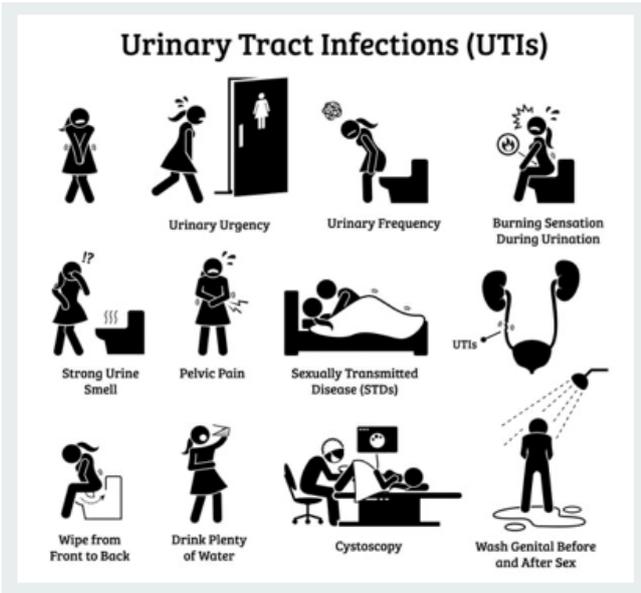


The scenario:

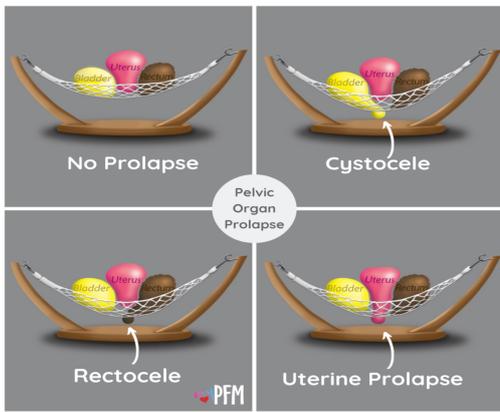
It's the most common condition: painful, sometimes cloudy or foul-smelling urine, often accompanied by urgency, frequency, burning and pain with urination — and often occurring several times a year. But women too frequently receive antibiotics for this issue without confirming a UTI (a practitioner might also miss an overlapping issue, such as overactive bladder). Worse, antibiotic resistance can develop if overprescribed.

The solution:

We will help women to determine what might be causing a relapse. “Fluid intake is important, as is managing your bowels,”. “Constipation can be a big contributor.” Anatomic problems that may be a factor. Research has shown the benefit of vaginal estrogen cream for postmenopausal women to alter their pH levels and promote healthy bacteria growth.



Pelvic organ prolapse



The scenario:

Weak spots in the walls and muscles of the vagina can cause adjacent organs to fall out of their normal positions — “essentially a hernia of the vagina.” Our best understanding is that injury to the pelvic floor muscles during childbirth causes the loss of support and prolapse. Signs of trouble: a sensation of a bulge in the vagina or discomfort when sitting.

The solution:

If the patient is bothered or in pain, surgery can follow. It is not a condition that has to be surgically corrected; it all depends on the patient’s symptoms.” A silicone or rubber diaphragm (known as a pessary) inserted into the vagina to support the pelvic floor is an option as well.

DOS AND DON'TS

 Maintain normal body weight	 Smoke - tobacco or marijuana
Eat a high-fiber diet and drink plenty of fluids	Strain during bowel movements
Exercise your pelvic muscles (Kegels)	Do repetitive strenuous activities
Get a pelvic exam	Lift with your back

Causes



Childbirth



Age



Menopause



Obesity



Heavy

