



Continence Pessaries *for Urinary Incontinence*

Women who are having leaking from the bladder usually have one of the following problems:

1. **Urge Incontinence** - Failure of the storage system of the bladder
2. **Stress Incontinence** - Failure of the urethra or the “valve” which closes the bladder
3. **Mixed Incontinence** - Both stress and urge incontinence at the same time

Stress Incontinence is a failure of the urethra, the “valve” which closes the bladder. The symptoms of stress incontinence are involuntary loss of small amounts of urine in response to increased pressure on the bladder (*for example, when a person coughs, sneezes, laughs, or lifts heavy objects urine leaks out*).

Causes of stress incontinence

1. Stress Incontinence results from weakened pelvic support of the urethra and/or weakness of the sphincter muscle of the urethra.
2. It may be due to the effects of childbirth or menopause on the pelvic structures.

The weakened urethra fails to act as a valve to keep the urine in the bladder.

Treatments

Treatments for stress incontinence are designed to work on the two problems in the urethra that cause urine leakage with physical activity.

Problem 1 | The urethra isn't tight enough.

Solution | Pelvic exercises (Kegel's) will help to make the urethra tighter to stop leaking.

Problem 2 | The urethra falls down when you cough or sneeze.

Solution | The urethra can be supported to stop it from falling down by pessaries placed in the vagina or by surgery.

Continence pessaries

Current pessaries

A mechanical support device (*pessary*) can be inserted into the vagina to support the urethra. When it's fitted properly you don't feel it inside and it stops the bladder from leaking. There are a number of different continence pessary models. Some of the most popular are the incontinence ring (*figure 1*), the ring with support and knob (*figure 2*) and the incontinence dish.

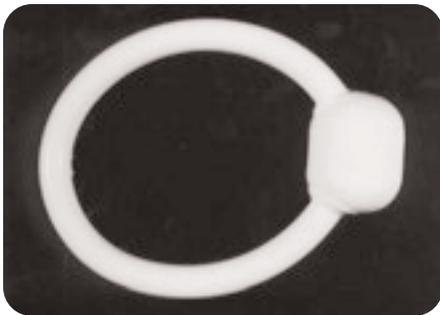


Figure 1

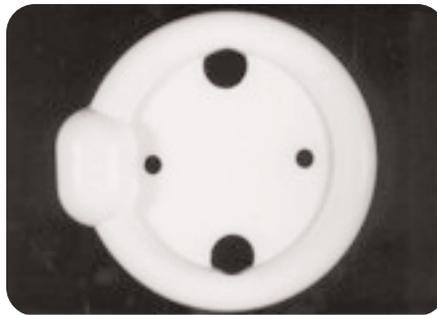


Figure 2

Researchers have found that up to 2/3's of women who try a continence pessary will go on to use them over the long term.

At present, if you are interested in trying a continence pessary you must visit your healthcare professional (*physician or nurse*) to be fitted. They will undertake an evaluation to confirm that you are a candidate for a continence pessary. They will show you examples of the pessaries and explain how to care for them. Once successfully fitted, you will be sent home for a trial period to assess if the pessary will work for you to stop your bladder leaking. At the follow-up visit you will be examined to confirm that the pessary is not irritating the vagina. Most women can learn to care for the pessary themselves and will only need to visit a physician once or twice a year.

Future pessaries

A new continence pessary which is designed to be fitted by a woman without the need for a healthcare professional is expected to be available in the fall of 2007. This pessary, which is called Uresta, will be sold over the counter in pharmacies as a set of three pessaries with a carrying/storage case. Uresta is designed for easy insertion and removal (*figure 3*).



Figure 3

For more information about incontinence contact

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