Men who are leaking urine from the bladder usually have one of the following problems:

1. **Stress Incontinence**: Leakage of urine when pressure is exerted on the bladder – for example with exercise, bending over, or lifting something heavy. This type of incontinence may occur after surgery for prostate cancer.

2. **Urga incontinence**: Leakage of urine that happens with sudden intense urges to go to the bathroom.

3. **Mixed incontinence**: A combination of stress and urge incontinence.

4. **Reflex incontinence**: Leakage of urine due to a bladder spasm without an urge sensation. It occurs in people with neurological diseases such as spinal cord injury or multiple sclerosis.

Conservative methods of managing incontinence include pelvic muscle exercises, bladder retraining, physiotherapy and in some cases medication. If these therapies are not effective, men are left with four choices: additional surgery, incontinence pads, condom catheter leg drainage, or a penile compression device.

External penile compression devices or clamps are placed around the penis to compress the urethra (the tube which carries urine to the outside of the body) to prevent or reduce leakage. They are most often recommended for stress incontinence.

They should be used cautiously and are recommended only for men who are mentally alert, are able to open and close the device, and ideally have normal genital sensation and awareness of bladder filling. The clamp must be removed at regular (2 - 3 hourly) intervals to empty the bladder and restore blood flow in the penis. Improper use of these devices can result in serious damage to the penis and urethra.

A 2004 study* of 3 devices showed that the Cunningham clamp was the most effective and preferred, although none of them completely eliminated urine loss. There are newer devices available that have not yet been scientifically reviewed.

It is important to consult with a health care professional about the correct type, size and placement of the device.