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Urinary Incontinence in Older Adults

[Español](#)

Urinary incontinence means a person leaks urine by accident. While it can happen to anyone, urinary incontinence, also known as overactive bladder, is more common in older people, especially women. Bladder control issues can be embarrassing and cause people to avoid their normal activities. But incontinence can often be stopped or controlled.

What happens in the body to cause [bladder control problems](#)? Located in the lower abdomen, the bladder is a hollow organ that is part of the [urinary system](#), which also includes the kidneys, ureters, and urethra. During urination, muscles in the bladder tighten to move urine into the tube-shaped urethra. At the same time, the muscles around the urethra relax and let the urine pass out of the body. When the muscles in and around the bladder don't work the way they should, urine can leak, resulting in urinary incontinence.

Incontinence can happen for many reasons, including [urinary tract infections](#), vaginal infection or irritation, or constipation. Some medications can cause bladder control problems that last a short time. When incontinence lasts longer, it may be due to:

- Weak bladder or pelvic floor muscles
- Overactive bladder muscles
- Damage to nerves that control the bladder from diseases such as multiple sclerosis, diabetes, or Parkinson's disease
- Diseases such as arthritis that may make it difficult to get to the bathroom in time
- Pelvic organ prolapse, which is when pelvic organs (such as the bladder, rectum, or uterus) shift out of their normal place into the vagina or anus. When pelvic organs are out of place, the bladder and urethra are not able to work normally, which may cause urine to leak.

Most incontinence in men is related to the prostate gland. Male incontinence may be caused by:

- Prostatitis, a painful inflammation of the prostate gland
- Injury or damage to nerves or muscles from surgery
- An enlarged prostate gland, which can lead to [benign prostate hyperplasia](#), a condition in which the prostate grows as men age

Types of urinary incontinence

There are different types of incontinence:

- **Stress incontinence** occurs when urine leaks as pressure is put on the bladder, such as during exercise, coughing, sneezing, laughing, or lifting heavy objects. It's the most common type of bladder control problem in younger and middle-aged women. It also may begin later, around the time of menopause.
- **Urge incontinence** happens when people have a sudden need to urinate and cannot hold their urine long enough to get to the toilet. It may be a problem for people who have diabetes, Alzheimer's disease, Parkinson's disease, multiple sclerosis, or stroke.
- **Overflow incontinence** happens when small amounts of urine leak from a bladder that is always full. A man can have trouble emptying his bladder if an enlarged prostate is blocking the urethra. Diabetes and spinal cord injuries can also cause this type of incontinence.
- **Functional incontinence** occurs in many older people who have normal bladder control. They just have a problem getting to the toilet because of arthritis or other disorders that make it hard to move quickly.

Incontinence in Alzheimer's Disease

People in the later stages of Alzheimer's disease often have problems with urinary incontinence. This can be a result of not realizing they need to urinate, forgetting to go to the bathroom, or not being able to find the toilet. These tips may help:

- Avoid drinks like caffeinated coffee, tea, and sodas, which may increase urination. But don't limit water.
- Keep hallways clear and the bathroom clutter-free, with a light on at all times.
- Provide regular bathroom breaks.

- Use underwear that is easy to get on and off, and absorbent briefs or underwear for trips away from home.

> Visit [Alzheimer's Disease: Common Medical Problems](#) for more tips.

Treating and managing urinary incontinence

Today, there are more treatments and ways to manage urinary incontinence than ever before. The choice of treatment depends on the type of bladder control problem you have, how serious it is, and what best fits your lifestyle. As a general rule, the simplest and safest treatments should be tried first.

A [combination of treatments](#) may help you get better control of your bladder. Your doctor may suggest you try the following:

Bladder control training

- **Pelvic muscle exercises** (also known as Kegel exercises) strengthen the muscles that support the bladder, which can help you hold urine in your bladder and avoid leaks. [Learn more about pelvic floor exercises and how to do them.](#)
- **Urgency suppression** helps control strong urges to urinate so you can make it to a toilet on time. For example, you can try distracting yourself to help keep your mind off needing to urinate, taking long relaxing breaths, holding still, and squeezing the pelvic floor muscles.
- **Timed voiding** is used to help control your bladder through scheduling time to urinate. For example, you can set a plan to urinate every hour. As time goes on, you can slowly extend the time between toilet breaks.

Medical treatments

- **Medications** that come in a pill, liquid, or patch may be prescribed to help with bladder control problems. However, some medications for overactive bladder have been associated with a higher risk of cognitive decline in adults over age 65. Talk with your doctor about what medications, if any, would work best for you.
- **Vaginal estrogen cream** may help relieve urge or stress incontinence. A low dose of estrogen cream is applied directly to the vaginal walls and urethral tissue.

- **Bulking agents** can be used to help close the bladder opening. Doctors can inject a bulking gel or paste that thickens the area around the urethra. This can reduce stress incontinence but may need to be repeated.
- **Medical devices** may also be used to manage urinary incontinence, such as a catheter that drains urine from your bladder; a urethral insert that helps prevent leakage; and a vaginal pessary ring that provides pressure to lessen leakage.
- **Biofeedback** uses sensors to make you aware of signals from your body. This may help you regain control over the muscles in your bladder and urethra.
- **Electrical nerve stimulation** sends mild electric currents to the nerves around the bladder that help control urination and your bladder's reflexes.
- **Surgery** can sometimes improve or cure incontinence if it is caused by a change in the position of the bladder or blockage due to an enlarged prostate.

Behavioral and lifestyle changes

> [Share this infographic](#) and help spread the word about five ways to improve your bladder health.

Changing your lifestyle may help with bladder problems. Losing weight, quitting smoking, saying “no” to alcohol, choosing water instead of other drinks, and limiting drinks before bedtime can help with some bladder problems. Preventing constipation and avoiding lifting heavy objects may also help with incontinence. Even after treatment, some people still leak urine from time to time. There are bladder control products and other solutions, including disposable briefs or underwear, furniture pads, and urine deodorizing pills that may help.

> Visit the National Institute of Diabetes and Digestive and Kidney Diseases for more information on [urinary incontinence in men](#) and [urinary incontinence in women](#).

When to see a health care provider and what to expect

Talk to your health care provider if you have urinary incontinence or any signs of a bladder problem, such as:

- Needing to urinate more frequently or suddenly
- Cloudy urine

- Blood in the urine
- Pain while urinating
- Urinating eight or more times in one day
- Passing only small amounts of urine after strong urges to urinate
- Trouble starting or having a weak stream while urinating

> Get tips on [talking to your doctor about sensitive subjects](#).

Your doctor may recommend [urodynamic testing](#) and perform the following to try to figure out what might be causing your bladder problem:

- Give you a physical exam and take your medical history.
- Ask about your symptoms and the medications you take.
- Take urine and blood samples.
- Examine the inside of your bladder using a cystoscope — a long, thin tube that slides up into the bladder through the urethra. This is usually done by a urinary specialist.
- Fill the bladder with warm fluid and use a cystoscope to check how much fluid your bladder can hold before leaking.
- Order or perform a bladder ultrasound to see if you are fully emptying your bladder with each void.
- Ask you to keep a daily diary of when you urinate and when you leak urine. Your primary care doctor may also send you to a urologist, a doctor who specializes in urinary tract problems.

You may also be interested in

- Learning [tips to keep your bladder healthy](#)
- Sharing an infographic of [ways to improve bladder health](#)
- Watching videos on [bladder and aging](#)

For more information on urinary incontinence and bladder health

National Association for Continence

800-252-3337

www.nafc.org

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)

800-860-8747

866-569-1162 (TTY)

www.niddk.nih.gov

MedlinePlus

National Library of Medicine

www.medlineplus.gov

Simon Foundation for Continenence

800-237-4666

www.simonfoundation.org

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