



**Male urinary incontinence
(leakage of urine)
– you are not alone**

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It is estimated that 6 million people in the UK have a problem with their bladder. It can happen to anyone despite their age.

Despite being a common problem, bladder difficulties are often hidden because of the embarrassment attached to the condition. Consequently many people particularly men, do not seek help and suffer in silence.

Men can have incontinence due to an enlarged prostate gland or prostate surgery, but other causes may play a role too:

Prostate gland removal for cancer treatment is one of the most common causes.

Other causes may include neurological disorder, spinal injury or diabetes.

Extra weight can also be a cause, this is because as you age, the muscles that control bladder function start to lose strength, and weight gain can put extra pressure on the bladder.

Cigarette smoking, heavy drinking and diabetes also increase a man's risk of bladder problems.

Enlarged prostate gland

Most men experience prostate enlargement with age. It can block the urethra (water pipe) and cause overflow incontinence, which is the leakage of a small amount of urine, or difficulty urinating.

Prostate removal due to cancer can also damage or weaken the pelvic floor muscles and nerves around the bladder, and it may cause significant leakage issues for about half of men just after surgery. One in five still has problems a year or more later.

This is one reason doctors often suggest "watchful waiting" for slow-growing prostate cancers. Delaying the surgery can also help avoidance of erectile dysfunction.

Other causes

In some men, incontinence problems can be caused by nerve damage from diabetes, a stroke, Parkinson's disease or multiple sclerosis.

Male issues

Men can face unique physical and emotional challenges with incontinence. Women are used to wearing pads several days of the month but men are not socially attuned to wearing anything other than underpants. Just the idea of having to wear a pad can be really embarrassing for them.

It may also be hard to avoid situations where leakage is common. For example, jobs that entail heavy lifting or participation sports like golf and tennis, which can put pressure on the bladder.

What can be done to help?

Fortunately, manufacturers of absorbent products for adults have now recognised the need for gender-specific adult products. These can be found in most large supermarkets or chemists.

For severe incontinence episodes, external collection systems which fit like a sheath over the penis and a collection bag (that fits inside a pair of briefs or attached to the leg) are available on prescription. To obtain these, please discuss with your urology specialist nurse or healthcare provider.

Other options exist

Pelvic floor exercises, in which you squeeze and hold the muscles you would use to stop urination, aren't just for women. Men can do them too.

A small Italian study in 2010 suggested that men who do them for one month before prostate removal surgery have less incontinence after.

The exercises however do need to be taught correctly in order for them to be effective and doing too many too soon can actually damage the muscles, so you shouldn't rush into exercising too aggressively. Speak to your healthcare provider.

Men with severe stress incontinence may wish to consider surgery if other therapies fail.

Specialist urological surgeons can implant an artificial urinary sphincter cuff around the urethra (at the bladder neck). The sphincter is inflated and deflated to control urine flow. Another procedure, called the bulbourethral sling (or male sling), supports the urethra with a mesh hammock.

Urge incontinence can be treated with fluid modification, bladder retraining, medication, botox therapy or sacral nerve stimulation (a pacemaker-like electrical stimulator that is implanted under the skin and sends signals to the sacral nerve to control bladder activity). Doctors may also recommend prostate surgery for cases of overflow incontinence caused by an enlarged prostate.

Fluid intake matters

Watching your fluid intake could help you improve incontinence symptoms, even without medication or surgery.

Limiting alcohol, as well as caffeine and carbonated beverages can help. Staying hydrated and drinking water when you are thirsty is always healthy.

Some medications make it worse

Some common medicines, such as diuretics, antihistamines, antidepressants and over the counter preparations such as cold remedies which contain caffeine may exacerbate symptoms. Consult your doctor for a medication review.

Skin problems

Chronic leakage and post-void 'after-dribble' may cause skin irritation such as rashes and skin fungal infections around the perineal area (around the 'back passage') and the scrotum.

Men who use absorbent pads should wash and change the pad every few hours to prevent infection. Specialised barrier creams can keep skin from becoming too dry and inflamed.

There are online resources for men

Men who have had prostate surgery may benefit from a prostate cancer support group, which can help address a range of emotional and physical and issues.

Local support groups can be found at www.prostatecanceruk.org

Other websites

www.bladderandbowelfoundation.org

www.ageuk.org.uk/Incontinence

www.maleincontinence.co.uk

Telephone support at Queen Elizabeth Hospital

Uro-oncology clinical nurse specialists 0121 371 6926

Urology clinical nurse specialist 0121 371 6929

Local Community Support

Birmingham Community Healthcare Continence Service

This is a strictly confidential service and you can self refer by contacting the services listed below:

- **South Central and West Birmingham**
Tel: 0121 466 4230
- **North and East Birmingham**
Tel: 0121 465 2599
- **Heart of England NHS Trust – Solihull Community Services**
Contact: Solihull Continence Service
Tel: 0121 704 2381

Please use the space below to write down any questions you may have and bring this with you to your next appointment.

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The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm

Urology

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