

TREATING INCONTINENCE, STEP BY STEP

Wisconsin Institute of Urology is a one-stop destination for urology and incontinence concerns.

ncontinence is unpredictable, annoying, embarrassing and treatable through a number of options ranging from lifestyle changes to outpatient procedures.

At Wisconsin Institute of Urology, most patients can access all these options under one roof without the need for

costly and time-consuming hospital visits. Its state-of-the-art imaging center, surgery center, and team of experienced physicians make it the destination for urology in the state.

"Our goal is to give patients a better understanding of what they are dealing with and the process for addressing it," says urologist Dr. Tait Fors. "That starts with being good listeners and teachers."

Finding the Path Forward

Most people think the bladder is a vessel, when, in fact, it's a muscle—

and one that can malfunction due to a variety of factors. Women in particular are vulnerable to incontinence because of their anatomy and the physical impacts of pregnancy and childbirth.

Incontinence comes in two main forms: stress incontinence and urge incontinence. Stress incontinence occurs when the muscles connecting the urethra and the bladder weaken and stretch. Once that happens, all it takes is a laugh, sneeze, or cough to cause leakage. Urge incontinence is the result of the bladder contracting and falsely signaling the need to urinate, which also causes leakage.

"Sometimes we can't solve the problem completely, but we can make life a lot better," Dr. Fors says.

The specialists at Wisconsin Institute of Urology generally start by recommending lifestyle changes. What and how much a person drinks throughout the day can make an enormous difference. Specialists may also recommend medication (for urge incontinence) or physical therapy (for stress incontinence). "It's important to tell patients, 'Here's the path forward, and if something doesn't work, here are the next steps,' so they don't get frustrated," Dr. Fors says. If medication for urge incontinence fails, the practice offers two promising outpatient treatments. One is a Botox[®] injection that relaxes the bladder muscles and decreases false signals to urinate. The treatment can require repeat injections over time and can significantly improve a person's quality of life. The other option



is a bladder pacemaker that controls the signal between the brain and the bladder during contractions. This MRI-safe pacemaker is implanted under the skin of the buttocks during a minor procedure and has a battery that lasts up to seven years. There is also a rechargeable version available.

If physical therapy doesn't remedy stress incontinence, the next step is surgery. Doctors either inject material into the urethra to make it tighter and prevent leakage, or they insert a sling that supports the urethra. Both of these procedures can typically be

performed by Wisconsin Institute of Urology specialists at their freestanding surgery center, Wisconsin Institute of Surgical Excellence.

No matter which path patients take, Wisconsin Institute of Urology provides full support at every step. "We're able to help patients find a treatment that improves their quality of life," Dr. Fors says.



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