

Initial Management of Urinary Incontinence in Women

Clinical Assessment by GP or Local Continence Team

Incontinence on Physical Activity

Incontinence with Mixed Symptoms

Incontinence with Urgency/Frequency

Complex History
For Example:

- Recurrent Incontinence
- Incontinence associated with
 - Pain
 - Haematuria
 - Recurrent Infection
 - Voiding Symptoms
 - Pelvic Irradiation
 - Radical Pelvic Surgery
 - Suspected Fistula

General assessment
Urinary Diary & Symptom Score
Assess quality of life and desire for treatment
Physical Examination:

- abdominal
- pelvic
- sacral neurological
- oestrogen status

Urinalysis +/- urine culture (if infected = treat & reassess)
Assess PVR: physical exam / ultrasound

Refer to Urology

Stress Incontinence

Mixed Incontinence

Urge Incontinence

Significant PVR
Significant pelvic organ prolapse

Pelvic Floor Muscle Training

Lifestyle Interventions
Pelvic Floor Muscle Training
Bladder Retraining

Antimuscarinics

Refer to Urology or Urogynaecology

Treatment Failure

Refer to Urology or Urogynaecology