

## Women – Do you suffer from an involuntary loss of urine?



**Dr. Selina Pang**  
Specialist in  
Obstetrician and Gynaecologist

It could be more serious than you think

1. Does it happen when you cough, sneeze or laugh sometimes?
2. Did you have a vaginal delivery of your baby?
3. Are you perhaps slightly overweight?
4. Do you have a chronic cough?

What you are experiencing is possibly pelvic organs prolapsing or ‘falling down’. Mothers and menopausal women are most at risk of developing this condition. However, there are several new minimally invasive surgery options which can effectively treat prolapse and stress incontinence.

### High risk for Menopausal women and Mothers

Dr. Selina Pang, specialist in Obstetrics and Gynecology at Hong Kong Adventist Hospital, explained that the term pelvic organ prolapse may involve various parts such as the uterus, top of the vagina, (upper portion loses its normal shape and sags into the vagina canal), rectocele (protrusion of the rectum through the vagina), and cystocele (when wall between the bladder and vagina weakens and the bladder droops into the vagina). If the pelvic support muscles are damaged, the pelvic organs are likely to be involved in some degree of prolapse. Some researchers state that 30% of menopausal women suffer from various degrees of prolapse, a really alarming statistic.

“The most common risk factor is vaginal delivery, especially women who develop symptoms following their second or third child. In addition, difficult deliveries, particularly with the use of forceps, frequently lead to subsequent prolapse. Obesity is another underlying cause in many women, as is also a chronic cough, as seen in women who are long term or heavy smokers.”

### Other symptoms

Besides urinary incontinence you may experience these other discomforts:

1. Pelvic heaviness
2. Backache
3. Standing and walking difficulties because of a mass bulging into the vaginal canal
4. Vaginal bleeding

### Effects on Emotional and Sex life

Symptoms of early stage prolapse may not be significant, but as the condition develops, the patient will experience increasing discomfort and unpleasant side effects. Visits to the toilet may prove distressing, with the prolapse producing vaginal distention and discomfort, and an unpleasant pelvic dragging sensation. There is a risk of developing an infection, with increased vaginal discharge. Eventually, the patient may experience a reduced quality of life in respect of her socializing, physical activity, and sexual activities, leading in many cases to unhappiness and even severe depression and strained marital relationship.

Damage to the pelvic muscles may also undermine support to the urethra, resulting in urinary stress incontinence. Dr. Pang stated that when these patients sneeze, laugh, or cough, they experience an involuntary loss of urine (stress incontinence).

### Minimally Invasive Surgery Provides New Options

Once prolapse is diagnosed, patients may consider the latest minimally invasive surgical treatment, which is called ‘Total Vaginal Mesh’. In this technique, an implanted mesh of synthetic material is used to support the vagina and other organs. The operation has a high success rate, and is considered time efficient. The wound is small, nearly invisible, and the recovery period is short. More importantly, compared to other traditional operations, this option has a lower prolapse recurrence rate.

In treating cases of simple urinary stress incontinence, as opposed to prolapse, doctors now have the option of implanting a tension-free length of tape to support the urethra and bladder neck. It requires a vaginal incision of only 1cm, takes 20 minutes, and has a success rate of over 90% in controlling stress urinary incontinence.