

## COMPARING TREATMENT OPTIONS FOR STRESS INCONTINENCE

### **Comparing Treatment Options for Stress Incontinence**

Self-Care	Pros	Cons
	<ul style="list-style-type: none"> <li><input type="checkbox"/> Improves leaking in about 50% of women</li> <li><input type="checkbox"/> Learning "the knack" of contracting muscles before a cough or sneeze may show improvement quickly</li> <li><input type="checkbox"/> Changes to exercise and diet have other health benefits</li> <li><input type="checkbox"/> No cost involved</li> <li><input type="checkbox"/> No risk involved</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Does not improve leaking in about 50% of women</li> <li><input type="checkbox"/> Involves changes in lifestyle and behavior which can be difficult for some people</li> <li><input type="checkbox"/> Changes must be maintained or improvements will be lost</li> <li><input type="checkbox"/> Requires motivation to get the best effect</li> </ul>
<b>Pelvic Floor Physical Therapy</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> 60 -70% of clients are satisfied with results</li> <li><input type="checkbox"/> May show improvement quickly, when used with behavior management.</li> <li><input type="checkbox"/> Possible improvement in sexual sensation</li> <li><input type="checkbox"/> No risk involved</li> <li><input type="checkbox"/> Public programs are offered at no cost in Pelvic Floor Pathway clinics and in some health regions.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> 30-40% of clients are not satisfied with results</li> <li><input type="checkbox"/> Takes 3-6 months to see the full effect</li> <li><input type="checkbox"/> Requires commitment to attending sessions and doing daily exercises</li> <li><input type="checkbox"/> Exercises must be continued or improvements will be lost</li> <li><input type="checkbox"/> Wait times may apply for public programs</li> <li><input type="checkbox"/> Cost of private physiotherapy services is paid by the patient, unless covered by private insurer</li> </ul>
<b>Pessary</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> Effective for stress incontinence in 66% of women</li> <li><input type="checkbox"/> Immediately effective</li> <li><input type="checkbox"/> Minimal risk if used correctly</li> <li><input type="checkbox"/> May be used in pregnancy and childbearing years.</li> <li><input type="checkbox"/> Insert and remove by yourself</li> <li><input type="checkbox"/> May be used "as needed" (e.g. for sports, travel or special events)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not effective for stress incontinence in 34% of women</li> <li><input type="checkbox"/> Not all women can be successfully fitted with a pessary</li> <li><input type="checkbox"/> Wait time may apply for pessary fitting and follow up visit.</li> <li><input type="checkbox"/> May require extra visits to answer questions and check fit</li> <li><input type="checkbox"/> May need to switch size to obtain best effect</li> <li><input type="checkbox"/> Leaving the pessary in longer than suggested may lead to vaginal ulcers, bleeding and discharge</li> <li><input type="checkbox"/> Must be removed twice a week and for intercourse</li> <li><input type="checkbox"/> Cost of pessary, topical estrogen is paid by the patient, unless covered by private insurance</li> </ul>
<b>Surgery</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> 80-90% symptoms of stress incontinence cured (slightly lower in those who have had previous surgery)</li> <li><input type="checkbox"/> Immediately effective</li> <li><input type="checkbox"/> Results are permanent in most cases</li> <li><input type="checkbox"/> May be combined with prolapse surgery</li> <li><input type="checkbox"/> Cost of surgery covered by public health plan</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> 10-20% of women not cured (slightly higher in those who have had previous surgery)</li> <li><input type="checkbox"/> Small risk (&lt;5%) of long-term difficulty emptying bladder</li> <li><input type="checkbox"/> Small risk of pain with intercourse requiring removal of mesh</li> <li><input type="checkbox"/> Small surgical risk related to anesthetic, infection, other damage</li> <li><input type="checkbox"/> Not recommended to have children following surgery</li> <li><input type="checkbox"/> Wait times may apply</li> <li><input type="checkbox"/> Possible hospital stay</li> <li><input type="checkbox"/> Postoperative pain (a few days to a few weeks)</li> <li><input type="checkbox"/> No lifting or intercourse for 30 days</li> <li><input type="checkbox"/> May need to be off work for a time</li> </ul>

## COMPARING TREATMENT OPTIONS FOR URGE INCONTINENCE

### **Comparing Treatment Options for Urge Incontinence**

Self-Care	Pros	Cons
	<ul style="list-style-type: none"> <li><input type="checkbox"/> Improves leaking in about 50% of women</li> <li><input type="checkbox"/> Eliminating caffeine shows effects after 1-2 weeks</li> <li><input type="checkbox"/> Fluid management and toileting management may have immediate effect</li> <li><input type="checkbox"/> No cost involved</li> <li><input type="checkbox"/> No risk involved</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Does not improve leaking in about 50% of women</li> <li><input type="checkbox"/> Involves changes in lifestyle and behavior, which can be difficult for some people</li> </ul>
<b>Pelvic Floor Physical Therapy</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> 60 -70% of clients are satisfied with results</li> <li><input type="checkbox"/> May show improvement quickly when used with freeze and squeeze</li> <li><input type="checkbox"/> May be able to discontinue urge incontinence medication</li> <li><input type="checkbox"/> Possible improvement in sexual sensation</li> <li><input type="checkbox"/> No risk involved</li> <li><input type="checkbox"/> Public programs are offered at no cost in Pelvic Floor Pathway clinics and in some health regions.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> 30-40% of clients are not satisfied with results</li> <li><input type="checkbox"/> Takes 3-6 months to see the full effect</li> <li><input type="checkbox"/> Requires commitment to attending sessions and doing daily exercises</li> <li><input type="checkbox"/> Exercises must be maintained or improvements will be lost</li> <li><input type="checkbox"/> Wait times may apply for public programs</li> <li><input type="checkbox"/> Cost of private physiotherapy services is paid by the patient, unless covered by private insurer</li> </ul>
<b>Medications</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> Improves leaking in 50-60% of women</li> <li><input type="checkbox"/> Oxybutinin takes 1-2 weeks to see full effect</li> <li><input type="checkbox"/> Other medications take about 1 month</li> <li><input type="checkbox"/> Oxybutinin is fast acting and can be used on an occasional basis</li> <li><input type="checkbox"/> Side effects go away when medication is stopped</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Does not improve leaking in 40-50% of women</li> <li><input type="checkbox"/> Side effects include dry mouth, dry eyes, stomach upset, constipation and blurred vision</li> <li><input type="checkbox"/> Not recommended if pregnant or trying to conceive</li> <li><input type="checkbox"/> Hassle of remembering to take the medication regularly</li> <li><input type="checkbox"/> Need to talk to doctor or nurse practitioner frequently until the best medication and dose is determined</li> <li><input type="checkbox"/> Symptoms return if you stop taking the medication</li> <li><input type="checkbox"/> Cost of medications is paid by the patient, unless covered by private insurer</li> </ul>

## COMPARING TREATMENT OPTIONS FOR VAGINAL PROLAPSE

### **Comparing Treatment Options for Vaginal Prolapse**

	Pros	Cons
<b>Pelvic Floor Physical Therapy</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Some improvement when mild prolapse is present</li> <li><input type="checkbox"/> Improvement in bladder and bowel emptying with toileting techniques</li> <li><input type="checkbox"/> Possible improvement in sexual sensation</li> <li><input type="checkbox"/> No risk involved</li> <li><input type="checkbox"/> Public programs are offered at no cost in Pelvic Floor Pathway clinics and in some health regions.</li> </ul> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> Significant improvement of prolapse symptoms is not expected</li> <li><input type="checkbox"/> Takes 3-6 months to see the full effect</li> <li><input type="checkbox"/> Requires commitment to attending sessions and doing daily exercises</li> <li><input type="checkbox"/> Exercises must be continuous or improvements may be lost</li> <li><input type="checkbox"/> Wait times may apply for public programs</li> <li><input type="checkbox"/> Cost of private physiotherapy services is paid by the patient, unless covered by private insurer</li> </ul>
<b>Pessary</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Immediate, comfortable relief of vaginal pressure for most women</li> <li><input type="checkbox"/> Minimal risk if used correctly</li> <li><input type="checkbox"/> May be used in pregnancy and childbearing years</li> <li><input type="checkbox"/> Insert and remove by yourself</li> <li><input type="checkbox"/> May be used "as needed" (e.g. sports, travel, special events)</li> </ul> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not all women can be successfully fitted with a pessary</li> <li><input type="checkbox"/> Wait time may apply for pessary fitting and follow up visit.</li> <li><input type="checkbox"/> May require 1 or 2 extra visits to answer questions and check fit</li> <li><input type="checkbox"/> May need to switch size to obtain best effect.</li> <li><input type="checkbox"/> Leaving the pessary in longer than suggested may lead to vaginal ulcers, bleeding and discharge</li> <li><input type="checkbox"/> Must be removed twice a week and for intercourse</li> <li><input type="checkbox"/> Cost of pessary, topical estrogen is paid by the patient, unless covered by private insurer</li> </ul>
<b>Surgery</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> 70-75% chance of long term improvement</li> <li><input type="checkbox"/> Immediately effective</li> <li><input type="checkbox"/> May be combined with stress incontinence surgery</li> <li><input type="checkbox"/> Cost of surgery covered by public health plan</li> </ul> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> 25-30% chance of not having long term success</li> <li><input type="checkbox"/> Small risk (less than 5%) related to anaesthetic and surgery</li> <li><input type="checkbox"/> Small risk of pain with intercourse from narrowing of vagina or tenderness in incisions</li> <li><input type="checkbox"/> Not recommended to have children following surgery</li> <li><input type="checkbox"/> Wait times may apply</li> <li><input type="checkbox"/> 1-3 day hospital stay</li> <li><input type="checkbox"/> May go home with a catheter</li> <li><input type="checkbox"/> No lifting allowed for 6 weeks</li> <li><input type="checkbox"/> No intercourse allowed for 6 weeks</li> <li><input type="checkbox"/> Need to be off work for 6 weeks</li> </ul>