

Urinary incontinence:

Many women suffer from urinary incontinence, which may either be stress urinary incontinence (leaking on sneezing, running, coughing etc), or mixed urinary incontinence (leaking on sneezing, running, coughing as well as going more frequently, sudden desire to urinate which can result in leakage of urine before you reach the toilet).For more details on urinary incontinence see article entitled 'urinary incontinence and prolapse' on the patient info link.

What types of treatment are available?

- After a diagnosis, your doctor will recommend physiotherapy with pelvic floor muscle exercises and bladder re-education and lifestyle changes (in mild cases)
- If this approach is not successful, other treatment options include: sling operation (called TVT or TOT/TVT-O), prescription of anti-cholinergic tablets, neuromodulation, and recently laser treatment called **IncontiLase™**.

IncontiLase™ treatment:

- A 2940nm Er:YAG non-ablative laser with proprietary 'Smooth mode' technology is applied to the vaginal tissue. The laser pulses are delivered to the vaginal canal and opening of the vaginal area (called the introitus), causing an lateration of the collagen fibres and thus tightening of the vaginal canal.
- 2 to 3 sessions are recommended

Advantages:

- Safe and quick procedure
- No cut, no incision
- Painless
- No special pre procedure and post procedure care (except intercourse in not recommended for 1 week after the procedure)

- Immediate return to normal daily activities

Scientific results:

- 70% of patients with mild to moderate stress urinary incontinence were dry after 120 days
- 94% reported improvements (according to the ICIQ-UI SF questionnaire)
- No adverse events noted