

Title: Non-Surgical treatment of Urinary Incontinence

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According to International continence society, Urinary incontinence (UI) is defined as the involuntary loss of urine.
Types: Stress urinary incontinence (SUI), Urge urinary incontinence (UUI), mixed urinary incontinence (MUI)
Others functional, overactive bladder.

Risk factors: age, parity, vaginal delivery, obesity, body mass index, diabetes and family history. 5-10% adult women>65yrs.70percentage Curtail activities, alter lives, limit social outings, intimacy, ashamed, embarrassed, fears surgery.
Improved and frequently cured using simple nonsurgical interventions.

Non-surgical treatments: Change in lifestyle, Avoid beverages -alcoholic, carbonated, spicy food, coffee, tea, caffeine, chocolate, sugary foods, acidic citrus food, cut high fat food , saturated fat. Daily fluid 30 ml/body weight /24hr. Control Diabetics.
Medications affecting bladder habit; Alternative Weight: BMI>30kg/m2, stress on PFM* structural and neurological damage.

Dietary guideline: nutritional food, Calcium and supplements, Iron, Fibers

Behavioral interventions: Pads, urethral inserts, Time voiding, PFM training, Increase intervals, Educate bladder, Local estrogen cream.

Naturopathic treatment: Kegel exercise (Increase PFM tone by contraction and relaxation), Phytoestrogens (soy: nuts, milk, powder, proteins, capsule .Tofu)

Anti-inflammatory: Bromelain, Flaxseed oil, Vit C, Vit E
Herbal: Buchu, Cleavers, Corn silk
Homeopathy: Causticum, Sepia

Physical therapy: biofeedback, myofascial release, exercises (Calm shell, straight leg circle)

Yoga: Mulabandha (root lock)- controls and manipulates energy, contracting Pubococcygeous seals- locks and redirects energy into higher center stopping leakage, improves concentration, mental clarity, restores energy at perineum, offers stability and calm, urogenital function harmonized.
Yoga: Basic abdomino-diaphragment breathing and toilet meditation.
Poses: Goddess, Chair, Cat, Bridge, Half moon, Triangle, Cobblers, Extended child, Pigeon pose (improves hip and lumbo-pelvic stability, mobility alignment)
Physical therapy with yoga optimize success in treatment of UI.

Conclusion: Simple UI can almost always be improved and frequently can be cured by relatively simple, low cost, non-surgical interventions, improves associated disease conditions like Diabetes, hypertension, joint pain of old age.
**PFM – Pelvic Floor Muscle*

Biography

Dr Gopa Chowdhury, **Rtd. Associate Prof, Obstetrics & Gynaecology, MD, FICOG,** has her expertise in different areas of Gynecology and Obstetrics and is passionate about spreading her knowledge through papers, articles, Knowledge sessions and her work with patients in the rural region of Jharkhand. She is an Executive member of ROGS and has held different positions as Speaker, Panelist, Chair-person in ROGS and National conferences. Dr Gopa was also the Vice President – FOGSI ROGS (Ranchi Obst, & Gynae Society); 2013-2015 and is an ongoing active member of the group. Besides her work as Associate Prof., she **Several Papers published in State,** National, International Journals and has been an active participant in CMEs, Conferences (State, National, International): FIGO-SAFOG, RCOG, FIGO, AOCOG, SICOG (research paper presentation), National-YUVA-FOGSI, AICOG as delegate and faculty

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Session name/ number:
Category: Oral Presentation