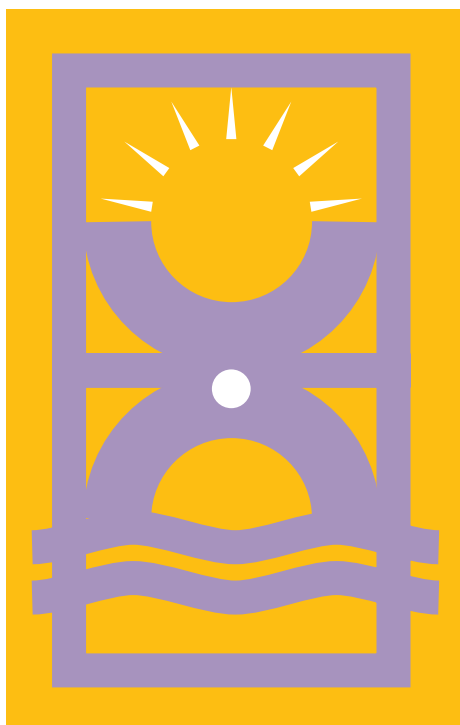




Bladder Problems and the Prostate



What is the prostate?

The prostate is a gland found only in men. It is about walnut size and is located below the neck of the bladder surrounding the bladder outlet or urethra. Its job is to secrete a milky fluid, which becomes part of the semen and nourishes the sperm.

As men age, the prostate gland enlarges. This may take many years. For the majority of men this does not create any difficulties but for some this enlargement can cause urinary symptoms such as a slow and/or interrupted stream; difficulty starting to pass urine; increased need to pass urine more frequently; a feeling of incomplete emptying; and, in some cases, loss of urinary control, that is, incontinence.

Incontinence can also occur as a result of other medical conditions. It causes a lot of suffering and embarrassment. If you have any changes in your urinary symptoms, or concerns about your prostate gland, contact your doctor or a continence advisor for advice.

Prostate conditions

Common prostate conditions:

1. Prostatitis is inflammation of the prostate gland and may be associated with urinary tract infection. It more commonly affects younger men.
2. Benign Prostatic Hyperplasia (BPH) causes progressive enlargement of the prostate usually commencing in middle age. About 25% of men will need surgery for this problem. BPH does not lead to cancer.
3. Prostate cancer may present initially without any symptoms. It is a relatively common cancer, which increases with age. However, it is also usually one of the most responsive to treatment.

Bladder problems and the prostate

A man with a prostate problem may have any one, or a combination of these symptoms:

- Difficulty initiating the flow of urine;
- Slow urine stream once urination has started;
- The need to pass urine more often than usual during the day (frequency) or overnight (nocturia);
- Dribbling either after passing urine or between visits to the toilet;
- Returning to urinate within a short time after initial urination;
- Feeling of urgency to urinate;
- Burning, discomfort or even pain while passing urine;
- The urine may be blood stained; and
- Sensation that emptying is not complete.



Prostate and incontinence

Why may incontinence be associated with prostate conditions?

- Obstruction of the urethra by the prostate may prevent complete bladder emptying with urination. This retention of urine may become severe enough to lead to ‘overflow’ incontinence, a situation demanding medical attention.
- Irritability of the bladder muscle may develop as a result of increased effort of the bladder to overcome outflow resistance. An irritable bladder can contract involuntarily resulting in episodes of ‘urge’ incontinence. After treatment of outflow obstruction with surgery, any underlying bladder irritability may, at least initially, result in some people noticing an increase in ‘urge’ incontinence until the bladder returns to normal.
- Surgery for prostate problems can sometimes cause muscle and nerve damage to the sphincter, which is the muscle that helps hold urine in the bladder. Incontinence may result. This incontinence may be short or long term and may depend on the degree or extent of surgery undertaken.

Finding help

If you are concerned about your urinary symptoms you should talk to your doctor. The doctor will ask about your general health, medical problems and medications you are taking as these may be causing some of the problems.

If you are at all concerned about prostate cancer, discuss your fears with your doctor.

Make sure you take part in making decisions about the diagnosis, treatment options, outcomes, risks, complications and costs.

Treatment

There are several possible ways that might help incontinence associated with prostate disease:

1. Reassurance and Observation

After medical tests and discussion with your doctor you may feel that no treatment is required. Symptoms sometimes improve spontaneously with time, or with simple changes to daily habits.

2. Medication

There are a number of prescription drugs available, which are effective for some.

3. Surgery

Involves the removal of the whole or part of the enlarged prostate. The size of the prostate gland may influence the type of surgery required.

Other options may include:

• **Bladder training**

Aims to improve bladder control, increase the amount of urine the bladder can hold without urgency or leakage of urine and reduce urgency and frequency in those with bladder irritability.

• **Pelvic Floor Exercises**

Strengthen the muscles that control the function of the bladder and the bowel. Familiarise yourself with the exercises prior to surgery and commence them as soon as it is comfortable to do so.



• *Incontinence aids*

A wide range of incontinence aids are available to help cope with any urine loss. Contact your local continence advisor or obtain the leaflet 'Incontinence Aids and Appliances' in this series.

Ask for help.

You are not alone. Bladder problems can be cured or managed better if treated.

Who can help?

- Your doctor.
- National Continence Helpline freecall 1800 33 00 66.
(The Helpline can arrange telephone interpreters.)
- Your community or health worker, or physiotherapist.
- Special continence advisers at hospitals, community health centres, continence clinics or at the Continence Foundation of Australia Resource Centres or Branches.

Interpreters. Some services can arrange an interpreter (of the same sex, if preferred), at no cost to you. Check with your service.

Telephone interpreter services are cheaper and often available immediately. For example, the Translating and Interpreting Services (TIS) Doctors Priority Line provides a free service for doctors in private practice to talk with patients with poor English skills. Your doctor can book this service by phoning 1300 131 450.

You can get more information from these other leaflets in this series:

- Urinary Incontinence. What is it?
- Good Bladder Habits for Everyone
- Bladder Training
- Constipation and Urinary Incontinence
- Pelvic Floor Exercises for Men
- Pelvic Floor Exercises for Women
- Dementia and Urinary Incontinence
- Incontinence Aids and Appliances
- Incontinence: Myths and Facts
- What is a Continence Assessment?
- A List of Ten Frequently Asked Questions
- One in three women who ever had a baby wet themselves
- Faecal Incontinence
- Surgery for Stress Incontinence in Women

