

Incontinence, urine, adult

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Rationale

Incontinence has increased in frequency as our population ages. Incontinence has a detrimental effect on quality of life and an impact on physical and psychological health.

Causal Conditions

(list not exhaustive)

- Transient
 - a. Polyuria
 - b. Impaired ability/willingness to reach toilet
 - c. Medications, alcohol
- Neurologic (e.g., cauda equina syndrome)
- Anatomic
 - a. Stress incontinence
 - b. Urgency incontinence (e.g., cystitis)
 - c. Overflow incontinence (e.g., prostate enlargement, multiple sclerosis)

Key Objectives

Given a patient with urinary incontinence, the candidate will diagnose the cause, severity, and complications, and will initiate an appropriate management plan, in particular addressing the two most common causes (stress and urgency).

Enabling Objectives

Given a patient with urinary incontinence, the candidate will

- list and interpret critical clinical findings, including
 - a. an appropriate history and physical examination including pelvic, rectal, and neurological examination;
- list and interpret critical laboratory investigations, including
 - a. urinalysis and culture;
- construct an effective initial management plan, including
 - a. a plan for cystitis and urethritis;
 - b. counselling of patients regarding therapeutic and surgical options (e.g., anticholinergic medication for urgency incontinence), and psychosocial impact;
 - c. making an appropriate referral (e.g., for an incontinence program), if need be.