

# Weight loss surgery may help ease urinary incontinence

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Nearly two-thirds of women had significant improvement of their symptoms, researchers report.

(HealthDay)—Weight-loss surgery appears to have an additional side benefit—it may improve urinary incontinence symptoms in women, according to a new study.

The study found that nearly half of women in a [weight-loss surgery](#) program reported having incontinence prior to the procedure. After surgery, most of those women said their urinary symptoms either improved or disappeared, said study researcher Dr. Leslee Subak, professor of obstetrics, gynecology and reproductive sciences at the University of California San Francisco School of Medicine.

The women "lost almost 30 percent of their body weight, and about two-thirds who had incontinence at the start were cured at one year with that amount of weight loss. Among those who continued to have incontinence, their incontinence frequency improved a lot," Subak said.

Subak's team is due to present the findings this week at the American Urogynecologic Society and the International Urogynecological Association 2014 scientific meeting in Washington, D.C. Studies presented at medical meetings are

typically viewed as preliminary until published in a peer-reviewed journal.

The women included in the study were severely obese, with a median BMI of 46. A woman who is 5 feet 4 inches tall who weighs 268 pounds has a BMI of 46.

Health experts refer to obesity and incontinence as the "twin epidemics." That's because 25 to 50 percent of women have [urinary incontinence](#), according to Subak. Of those, 70 percent are obese, she said.

There are several types of weight loss surgery—also known as [bariatric surgery](#). Most of the women in the study had procedures known as Roux-en-Y gastric bypass or gastric banding.

The improvement in incontinence symptoms continued during the study follow-up, Subak said.

"Both the weight loss and the improvement in incontinence lasted through three years. At year three, [about] 60 percent had remission," she said. Remissions were defined as less than weekly episodes of incontinence. "A quarter were completely dry," she noted.

The amount of weight loss was the strongest predictor of whether incontinence would improve or go away, Subak found. Losing more made urinary symptom improvement more likely.

Subak called the results very encouraging.

In a previous study, Subak found that a six-month focused program of weight loss and diet information helped reduce incontinence in obese women better than four weekly education sessions about weight loss and physical activity.

Dr. Amy Rosenman, a specialist in urogynecology and pelvic surgery in Santa Monica, Calif., and

health sciences clinical professor at the University of California Los Angeles David Geffen School of Medicine, said the study findings ring true in practice.

"I have patients who have lost weight and it ended their [stress incontinence](#)," she said. Those who lost by nonsurgical means also noticed improvement, she said.

The new findings reflect what has been found previously by other researchers, too, said Rosenman, who is president-elect of the American Urogynecologic Society. "There are many other studies that show [weight loss](#) improves leakage, probably due to less pressure, less weight pressing on the bladder from above and beside. So it stands to reason that bariatric surgery would also benefit [the incontinence]," she said.

Like all surgeries, bariatric surgeries are not without risk. The procedures are accompanied by possibility of infection, blood clots and heart attacks, among others, according to the U.S. National Institutes of Health.

Costs for the surgery range greatly, from about \$12,000 to \$26,000, but are sometimes covered under insurance policies.

Some of Subak's co-authors report advising or consulting for companies such as Crospon, Covidien and Ethicon, which manufacture or are involved in bariatric [surgery](#) products.

**More information:** To learn more about weight loss surgery, visit [National Institutes of Health](#).

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