

Say "So Long" to Urinary Incontinence

Minimally invasive injections – easily administered in the doctor's office in minutes – are effective treatment for stress urinary incontinence in women.

Sue Sterling considered her latest fashion accessory as she contemplated an outing on the breathtaking waterways of Alaska. Sue was wearing a product to protect her clothing against bladder leakage due to stress urinary incontinence.

**MICHAEL C. SOLOMON, MD,
P.A., FACS**

"We were going to go out on the water on a kayak, and I thought, *Oh my gosh, if I'm in the water and I have this pad on...*" recalls Sue. "It's just uncomfortable, and you don't know what's going to happen. I didn't care to have that going on."

Sue began having symptoms of stress urinary incontinence about a year ago. She was simply annoyed at first, but the symptoms progressively worsened over time.

"I guess these things can happen as you get older, and it wasn't a big thing, but then you have to start wearing a heavier and heavier pad," she relates. "You never feel comfortable."

As her leakage protection needs increased, so did Sue's apprehension about performing her usual activities. She thought twice before committing herself to any pursuit.

"You tend to not want to do as much, and I like to be very active. Like, if I walked a lot, it [the leaking] would be heavier, so I quit walking. You impose limitations on yourself because you don't want to be caught in an embarrassing situation."

Sue's incontinence eventually reached a severe point. So, when a sympathetic nurse's assistant at her doctor's office suggested she see local urologist Michael C. Solomon, MD, she agreed and made an appointment.

"I thought, if there's something that can be done, then I definitely would

like to see what it is," she says.

A common concern

Stress urinary incontinence is the most common type of urinary incontinence in women. It occurs when the muscles that support the bladder and urethra (the tube that carries urine from the bladder out of the body) weaken and allow urine to leak out of the bladder. It is more common in women because childbirth by vaginal delivery and estrogen deficiency after menopause are among its most common risk factors. However, it does occur in men, especially after prostate surgery.

With stress incontinence, urine leaks when pressure (stress) is applied to the bladder, which can happen when coughing, laughing, running, walking, lifting, or during other physical activities. The muscles of the pelvic floor, particularly the sphincter muscle at the neck of the bladder, normally keep the bladder tightly closed until the person reaches a bathroom. Stress incontinence occurs due to diminished function of these muscles under pressure.

"Typically, you have a forty-five or fifty-year-old woman who has had three kids, and now she's leaking a lot of urine and can't do her everyday activities without smelling of urine or having to change her underwear or wear pads," notes Dr. Solomon. "They've got to keep changing, so it's a nuisance."

"Stress incontinence is common in women as they get older, because aging in general is a risk factor."

About half of all American women experience occasional bouts of urinary incontinence, and approximately 60 percent of those can be attributed to stress incontinence. Women experience urinary incontinence twice as often as men.

Sue understands: "Believe me, it's a huge thing for a woman. I've talked to other women who say, *I had that, too, and it's embarrassing*. It's uncomfortable. Nobody wants to have that."

Just like Sue's friends, women with stress incontinence often feel embarrassed by their situation, and many don't seek a physician's help. They also tend to isolate themselves or limit their work and social activities.

Fortunately, treatments are available to either resolve or greatly improve the symptoms of this distressing condition.

Simple treatment

Urinary incontinence can often be treated with medications. However, if symptoms persist or are too bothersome despite medical therapy, there are other avenues to take.

Dr. Solomon discussed treatment options with Sue, which included an invasive surgery, called a bladder lift, in which the surgeon places a mesh "sling"



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to add more support at the neck of the bladder. He didn't recommend this surgery for Sue, much to her relief.

"It is an open procedure, and there are many complications associated with it," explains Dr. Solomon. "Her decision was to go with a minimally invasive procedure, and I suggested a technique that has produced excellent results."

Dr. Solomon treated Sue's stress incontinence with an innovative therapy involving a transurethral injection of a compound called *Macroplastique*. The injections can be done quickly and safely in the doctor's office without anesthesia, using only a numbing medication.

"This is a minimally invasive procedure that requires no cutting, no insertion of anything," describes the doctor. "It is simply an injection right into the bladder neck."

Uroplasty, makers of *Macroplastique*, describes the compound as a soft tissue urethral bulking agent, made of a water-soluble gel and a rubber-like silicone elastomer material, that is not absorbed by the body. The silicone elastomer material causes a bulking effect after it has been injected. The increased bulk surrounds the urethra, helping it to close more effectively, thus preventing urine from leaking. *Macroplastique* was developed to treat women with stress urinary incontinence primarily due to functional weakness of the sphincter muscle.

Dr. Solomon stresses the simplicity and safety of the transurethral injection. "It is a five- to ten-minute procedure done in the office through a small telescope. There is no general anesthesia; the patient is awake for the entire procedure. First, I numb the urethra using a numbing lidocaine jelly. Then I inject lidocaine directly into the urethra and bladder neck. At this time the urethra is numb. Then, using the telescope, I inject the *Macroplastique* along the mid urethra just past the bladder neck. A patient describes a pressure-type feeling

when the *Macroplastique* is injected, with minimal discomfort. When I'm done, I fill the patient's bladder and ask them to stand up and cough. Typically, they're dry at this point. Once the procedure is over, they can drive home."

Happy patient

Sue found the treatment easy to tolerate, as well as effective.

"Nobody likes to have any kind of injection, but this was minimally invasive, with only an uncomfortable feeling afterward," she explains. "Believe me, the results are worth the bit of discomfort."

Sue has returned to her activities since the treatment. She no longer worries about accidents or embarrassing moments.

"It is absolutely dry. It's like nothing ever happened, and so I never even bother with any kind of pad. In fact, I don't even think about it anymore. It's over."

"It's just a wonderful experience to have something like this taken away from you."

Dr. Solomon earns high marks from Sue as well.

"I think he's terrific. He has a great sense of humor. He made me feel very much at ease. I would definitely recommend him." **FHCN**—Patti DiPanfilo



Michael C. Solomon, MD, P.A., FACS, is a diplomat of the American Board of Urology and a fellow of the American College of Surgeons. He completed his undergraduate education at the State University of New York (SUNY) at Binghamton, receiving a

Bachelor of Science degree in biology. Dr. Solomon went on to earn his medical degree at New York Medical College and SUNY Health Science Center at Brooklyn. His postgraduate training includes a residency in the Department of Urology at SUNY Health Science Center at Brooklyn, where he served as chief resident. Dr. Solomon also was a research fellow in the Urology Service, Department of Urology at Memorial Sloan-Kettering Cancer Center in New York. Among his professional affiliations, Dr. Solomon is a member of the American Urology Association, the American College of Surgeons and the American Association of Clinical Urologists.

Want to know more?

Dr. Michael Solomon and his staff look forward to meeting the readers of *Florida Health Care News*. For more information about this article topic or any of their services, or to schedule an appointment, call the office at **(772) 242-9368**. The office is conveniently located at **555 NW Lake Whitney Place, Suite 103**, in Port St. Lucie. Visit them online at **www.michaelsolomonmd.com**.

Visit his website today at **www.michaelsolomonmd.com**, or for more information on how *Macroplastique* is utilized for stress incontinence, visit **www.uroplasty.com/healthcare/macroplastique**.