

BLADDER HEALTH

# Loss of Bladder Control

BLADDER PROLAPSE

AUA  
FOUNDATION  
OFFICIAL FOUNDATION OF THE  
AMERICAN UROLOGICAL ASSOCIATION

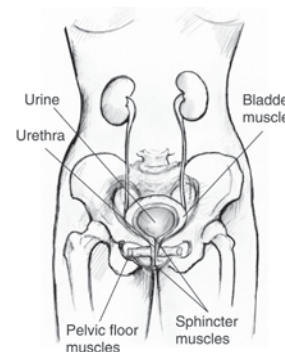




Don't Let Bladder Prolapse Keep You from Enjoying Life.

## What Is the Bladder?

The bladder is a hollow, balloon-like organ made mostly of muscle. It stores urine before it leaves the body through the urethra.



*Parts of the female bladder control system.*

## What Is Bladder Prolapse?

Bladder prolapse affects only women. Under normal conditions, the bladder is held in position by a “hammock” of supporting pelvic floor muscles and ligaments. If these muscles and tissues stretch or become weak the bladder can sag into the **vagina**\*. This is known as **bladder prolapse** or a **cystocele**.

In some women, the sagging bladder will appear at the vagina's opening and can even drop through it. Bladder prolapse can be very bothersome. It can cause problems when emptying the bladder and urinary tract infections or incontinence, which is the unwanted loss of urine. The good news is, bladder prolapse can usually be corrected.

## What Causes Bladder Prolapse?

Bladder prolapse can develop for many reasons. The most important factor is stress on this supportive “hammock” of muscles during childbirth. If you had many pregnancies or have delivered vaginally you are at higher risk for bladder prolapse. Heavy lifting or chronic coughing can lead to prolapse in some women. Even **constipation** or frequently straining to pass stool, obesity or being overweight, menopause (when estrogen levels start to drop) and pelvic surgery may contribute to bladder prolapse.

\*Bold words are defined in the Glossary.

## What Are the Symptoms for Bladder Prolapse?

Bladder prolapse means you may have frequent urination or the urge to urinate, or you may leak urine with activity, known as stress urinary incontinence. You may not feel bladder relief immediately after urinating. You may have frequent urinary tract infections. Some women have discomfort or pain in the vagina, **pelvis**, lower abdomen, **groin** or lower back. If you are one of them, you may have a heaviness or pressure in the vaginal area; painful intercourse; or tissue that can be seen coming out of the vagina that may be tender or bleeding. If you have a mild case, it may not cause any symptoms.

## How Is Bladder Prolapse Diagnosed?

Prolapse can usually be detected with a pelvic examination. However, a test called a voiding **cystourethrogram** may be required. This test involves a series of X-ray pictures that are taken during urination. These pictures will

show the shape of the bladder and will help identify obstructions blocking the normal flow of urine. Other X-rays and tests may also be required to find or rule out problems in other parts of the urinary system.

## How Is Bladder Prolapse Treated?

For mild prolapse cases, you can learn “Kegel” exercises to make the pelvic floor muscles stronger and possibly help treat prolapse. Other treatments for more advanced cases can include **estrogen replacement therapy**. A **pessary** which is a vaginal support device, can provide better support for your internal organs, including the bladder. You may need surgery if you have a bothersome case that cannot be managed with a pessary or exercise. If your prolapse is left untreated, over time the condition may get worse. In rare cases, severe prolapse can cause urinary retention, which is the inability to urinate. This may lead to kidney damage or infections. Speak to your health care provider if you are concerned about bladder prolapse.

## Glossary

**BLADDER PROLAPSE:** When the bladder slips out of its correct position.

**CONSTIPATION:** A condition in which a person has difficulty eliminating solid waste from the body and the feces are hard and dry.

**CYSTOCELE:** Fallen bladder. When the bladder falls or sags from its normal position down to the pelvic floor. It can cause either urinary leakage or urinary retention.

**CYSTOURETHROGRAM:** Also called a voiding cystogram. A specific X-ray that examines the urinary tract. A catheter (hollow tube) is placed in the urethra (tube that drains urine from the bladder to the outside of the body) and the bladder is filled with a liquid dye. X-ray images are taken as the bladder fills and empties. The X-rays will show if there is any reverse flow of urine into the ureters and kidneys.

**ESTROGEN REPLACEMENT THERAPY:** Also known as ERT. Use of the female hormone estrogen to replace that which the body no longer produces naturally after medical or surgical menopause.

**GROIN:** The area where the upper thigh meets the lower abdomen.

**PELVIS:** The bowl-shaped bone that supports the spine and holds up the digestive, urinary, and reproductive organs. The legs connect to the body at the pelvis.

**PESSARY:** A specially designed object worn in the vagina to hold the bladder in its correct position and prevent leakage of urine. Pessaries come in many shapes and sizes.

**VAGINA:** The tube in a woman’s body that runs beside the urethra and connects the uterus (womb) to the outside of the body. Sometimes called the birth canal. Sexual intercourse, the outflow of blood during menstruation and the birth of a baby all take place through the vagina.



# Where Can You Go for More Information about Bladder Prolapse?

For more information about bladder prolapse and other urologic conditions, please visit the AUA Foundation's website, [www.UrologyHealth.org](http://www.UrologyHealth.org) or call the Urology Health Line at 1-800-828-7866 for assistance in English and Spanish.

## ABOUT THE AUA FOUNDATION:

The AUA Foundation is the world's leading non-profit urologic health organization and the Official Foundation of the American Urological Association. Our mission is to promote health, provide hope and promise a future free from urologic diseases, including cancer.

**UROLOGY HEALTH SERIES:** Information based on current medical and scientific knowledge. This information is not a tool for self-diagnosis or a substitute for professional medical advice. It is not to be used or relied on for that purpose. Please see your urologist or other healthcare provider regarding any health concerns and always consult a healthcare professional before you start or stop any treatments, including medications.

Additional resources may be available.

**SPECIAL THANKS** to the Society for Urodynamics and Female Urology (SUFU) for their collaboration on content development for this brochure.



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