



# Common Causes of Incontinence

## Urinary Incontinence (UI)

### Physical Disorders

#### Urologic and Gynecologic Disorders

- Weakness and laxity of pelvic floor musculature leading to hyper mobility of the bladder base.
- Urethral sphincter weakness (surgery or trauma related)
- Cystitis
- Urethritis
- Tumors
- Stones
- Diverticula

#### Neurologic Disorders

- Stroke
- Dementia
- Parkinsonism
- Spinal cord injury or disease

#### Diabetes Mellitus

- Acontractile bladder

### Functional Impairments

- Lack of mental awareness.
- Physical inability to properly toilet themselves.
- Failure of understaffed nursing homes to provide residents with frequent assistance in toileting (prompted voiding).
- Tendency by staff to rely heavily on special undergarments and absorbent pads.

## Fecal Incontinence (FI)

### Physical Disorders

#### Gastrointestinal Disorders

- Impaired anorectal sensation.
- Lower sphincter squeeze pressures.
- Reduced integrity of sphincter and/or pelvic floor muscles.
- Diverticula.

#### Neurologic Disorders

- Stroke
- Dementia
- Parkinsonism
- Spinal cord injury or disease

#### Constipation Associated FI Development

- Constipating medications.
- Poor dietary fiber intake.
- Poor fluid intake and dehydration.

### Functional Impairments

- Lack of mental awareness.
- Physical inability to properly toilet themselves.
- Failure of understaffed nursing homes to provide residents with frequent assistance in toileting (prompted voiding).
- Tendency by staff to rely heavily on special undergarments and absorbent pads.

#### Reference:

Leung FW, Schnelle JF. [Urinary and fecal incontinence in nursing home residents](#). *Gastroenterol Clin North Am*. 2008;37(3):697-x. doi:10.1016/j.gtc.2008.06.005