Helping Her Manage: Urinary Problems
You can help your loved one prevent and manage urinary symptoms.

Women with gynecologic cancer often describe urinary symptoms as being a very common problem. Urinary symptoms can have a major impact on your loved one’s quality of life. They can be a source of discomfort, psychological distress, and embarrassment.

There are some symptoms that should be reported immediately (listed in the box to the right). These symptoms may be caused by an infection of the urinary tract, bladder, and/or kidneys.

However, for urinary symptoms that are not the result of an infection or serious medical emergency, there are several methods that can be used to effectively manage them. These include bladder training, exercises, and medication.

This guide will address five urinary issues that can affect women with gynecologic cancer. We will help you learn the symptoms and prevention and management strategies for each:

- Urinary incontinence (UI)
- Urinary tract infection (UTI)
- Overactive bladder (OAB)
- Hemorrhagic cystitis (HC)
- Urinary obstruction or diversion requiring a nephrostomy tube

Don’t assume that urinary symptoms need to be accepted as a normal part of getting older. This is not the case. Talk to your loved one’s cancer care provider about her symptoms and help to develop the best and most complete symptom care plan for her.
How Do Those With Gynecologic Cancer Describe Urinary Problems?

Below are a list of common symptoms that your loved one may describe when dealing with urinary symptoms. It is important to discuss any symptoms related to urinary problems with her cancer care provider. Any of the symptoms listed on page x:2 should be reported right away.

What about you?

Check off any items that your loved one is experiencing. Write in anything else related to urinary problems that she may be going through.

- Feeling the need to urinate frequently
- Feeling like my bladder is always full
- Difficulty controlling my bladder
- Sometimes urinating a little during coughing, sneezing, laughing, or exercise
- I don’t like to leave the house for fear of having an accident
- Hard to know if I have a bladder infection because of my overactive bladder
- “It’s a leaking problem”
- Sometimes the need to go is so urgent, I can’t make it to the bathroom in time
- I have to get up two or three times a night
- When I have a UTI, I have burning with urination and pain in my lower back
What Causes Urinary Problems?

As a caregiver, you may be better able to help manage urinary problems if you know how the urinary tract functions. The urinary tract is made up of the kidneys, ureters, bladder and urethra.

- Urine is made in the kidneys.
- It drains out of the kidneys, into the ureters (these are the thin tubes that connect the kidneys and the bladder).
- The urine drains through the ureters into the bladder.
- Urine stays in the bladder until it leaves by going through the urethra when that person urinates.

For women with gynecologic cancer, urinary conditions and symptoms can be caused by a variety of factors including:

**Conditions that weaken the pelvic floor muscles** (muscles surrounding the urethra, vagina, and anus). These muscles are important for controlling urination. Common causes of muscle weakening include:

- Trauma to these muscles during pregnancy and childbirth can lead to incontinence later in life
- Chronic constipation
- Changes in hormone levels after natural or surgical menopause

**Presence of a tumor putting pressure on the bladder.** This can make the bladder feel full even when it’s not.

**Short and long-term complications from surgery, chemotherapy, or pelvic radiation therapy.** Surgery and radiation therapy can injure pelvic floor muscles or nerve tissue. Some types of chemotherapy and radiation treatments in the region of the bladder can cause cystitis.

**Infections.** Women may be at higher risk for urinary tract infections after treatment for gynecologic cancers. Surgically-induced menopause and radiation therapy can both result in changes to the lining of the urinary tract that make it easier for bacteria to enter and cause an infection.

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**Five common urinary conditions to know about are:**

- **Urinary incontinence (UI):** Page 19:6
- **Urinary tract infection (UTI):** Page 19:7
- **Overactive bladder (OAB):** Page 19:7
- **Hemorrhagic cystitis (HC):** Page 19:9
- **Urinary obstruction or diversion requiring a nephrostomy tube:** Page 19:10

Always report any and all symptoms to your loved one’s cancer care provider, so they can determine the problem and best course of treatment.
YOUR THOUGHTS

In what ways have urinary problems affected your loved one?

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

How do these problems affect you and your family on a daily basis?

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

What are some of the biggest barriers to managing these problems?

1) _______________________________________________________________________

2) _______________________________________________________________________

3) _______________________________________________________________________

4) _______________________________________________________________________

5) _______________________________________________________________________

Now, let’s explore some strategies and ways to help you overcome these barriers.
Strategies for Preventing and Managing Urinary Problems

The management of urinary problems is based on the type of problem and the underlying cause. Here, you can find strategies to help you both prevent problems and manage them if they develop. Pick those you think may work for you and your loved one. Be sure to discuss your loved one’s urinary symptoms with her cancer care provider.

Urinary Incontinence (UI)

The uncontrolled leaking of urine can be caused by any condition that puts repeated stress on the pelvic floor muscles. It can be very distressing to have urine leak during normal daily activities such as coughing, sneezing, laughing, or exercise. There are many factors that can contribute to UI. The most common cause of incontinence is weakening of the pelvic floor muscles. Another risk factor for this urinary problem is obesity.

Urinary incontinence is widely prevalent in gynecologic cancer patients and should be discussed with her cancer care provider at her next appointment.

As a caregiver, there are several very effective things that you can do to help your loved one prevent or reduce the frequency of urinary incontinence. These include encouraging her to:

- Avoid constipation and straining during bowel movements.
- Learn and perform Kegel exercises regularly. Research has clearly shown that Kegel exercises are the best treatment for stress incontinence when done correctly and consistently.
- Lose weight if overweight.

**Medicine.** Talk with her cancer care provider to find out if using a medicine would be a good approach for her.

- The medicine duloxetine (Cymbalta<sup>®</sup>) is the first drug to be specifically recommended for incontinence.
- The medicine imipramine (Tofranil<sup>®</sup>) has also been used for stress incontinence.

Learn More

It’s recommended to try a minimum of 6 weeks of bladder retraining with Kegel exercises before adding medication to bladder training. See page 19:8 for more info on how to do Kegel exercises.
Urinary Tract Infection (UTI)

A viral or bacterial infection in the bladder can be caused by germs getting into her system through the urethra (tube that carries urine from the bladder to the outside of her body). Typical symptoms include pain with urination, frequency, urgency, and cloudy urine. These symptoms may also be accompanied by a fever and back pain. If your loved one is having these symptoms, report this to her cancer care provider immediately so that diagnosis and treatment with antibiotics can be started.

Here are some very simple strategies that can help her reduce the chances of getting a urinary tract infection. Each of these strategies reduces the ability of bacteria or viruses to enter or spread into her urinary tract. These include:

- Empty the bladder regularly every 3 to 4 hours.
- Wipe from front to back after urination and bowel movements.
- Don’t take bubble baths. Bubbles decrease the surface tension of the water allowing bacteria to more easily enter the urinary tract.
- Wear underwear that are cotton or with a cotton gusset liner. This helps to wick moisture away from the urethra.
- Urinate after sexual intercourse.
- Drink unsweetened or low-sugar cranberry juice. Studies suggest that this can help prevent UTI’s. There is no consistent evidence about the recommended amount per day.

Overactive Bladder (OAB)

OAB leads to a frequent and urgent need to urinate. It also can cause your loved one to awaken from sleep at night to urinate. While the exact cause of OAB is not known, research shows it may be related to increased action of the muscles that push down and allow urine to pass out of the bladder. This produces a sensation of bladder fullness and the need to urinate. It can occur with or without urinary incontinence.
Ways you and your loved one can help to reduce problems with OAB include:

**Monitor foods and drinks.** Reduce the amount and types of foods and beverages that can irritate the bladder, especially:
- Carbonated beverages
- Artificial sweeteners
- Caffeine (drinking fewer than 2 cups/day or coffee or tea should not increase OAB)
- Spicy or acidic food

**Quit smoking.** Cigarette smoke can also irritate the bladder muscle.

**Lose weight if overweight.** Women who lose weight by reducing caloric intake and getting regular physical activity have fewer OAB symptoms.

**Regulate fluid intake.** Find a balance between drinking too much and too little fluid. Carefully monitored fluid restriction can improve OAB. Please talk with your loved one’s cancer care provider before restricting fluid intake.

**Try “bladder training.”** Help resist the urge to urinate and gradually increase the time between urinating with these tips:
- Keep a symptom diary and use it to identify how often she urinates.
- Gradually increase the time between urination by 15 to 30 minutes as tolerated.
- Use distraction techniques, which may help resist the “urge” to urinate.
- Practice Kegel exercises in addition to these other strategies if she has urinary incontinence with OAB.

**Medicine.** If non-medicine approaches are ineffective, talk with your loved one’s cancer care provider about medicines that can be used to treat overactive bladder. These include:
- **Anticholinergic medicines** (such as tolterodine and oxybutynin) reduce bladder spasms. Oxybutynin transdermal patches (Oxytrol®) are available over the counter, but be sure to check with her cancer care provider before starting any medication for OAB.
- **Antimuscarinic medicines** (such as darifenacin, solifenacin, and trospsium chloride) relax the bladder muscle to reduce the symptoms of OAB.

Your loved one’s cancer care provider will make sure she does not have a UTI before starting on medicine for OAB. Her provider will also review all of her current medicines to be sure that none are causing symptoms of OAB.

**Helpful Tip:**

**Kegel Exercises**
Here is a brief description to get started:
- Begin by emptying the bladder.
- Tighten the pelvic floor muscles and hold for a count of 10.
- Relax the muscle completely for a count of 10. Repeat 10 times.
- Do the set of 10 exercises at least 3 times a day (morning, afternoon, and night).

A more detailed description of how to do Kegel exercises can be found on the Mayo Clinic’s website: www.mayoclinic.org
Hemorrhagic Cystitis (HC)

Hemorrhagic cystitis can be described as widespread inflammation of the bladder caused by either an infection or other source that results in a sudden onset of bleeding from the lining of the bladder. Causes include:

- **Bacterial infection.** This is the most common cause and usually responds promptly to treatment.
- **Chemotherapy medications,** such as cyclophosphamide (Cytoxan®) and ifosfamide (Mitoxana® and Ifex®). These can cause bladder inflammation and sudden onset of bleeding.
- **Pelvic radiation therapy.** HC can develop during treatment and persist for months to years after treatment.

**How to prevent HC.** Prevention is the best treatment for HC, especially for HC resulting from chemotherapy medications. Here are important steps you and your loved one’s cancer care provider can take to prevent HC from chemotherapy:

- Make sure your loved one drinks plenty of fluids to ensure that the chemotherapy is flushed through the bladder as quickly as possible.
- Encourage her to urinate at the first sensation of having a full bladder.
- Her cancer care provider will provide IV fluids if she is getting a type of chemotherapy that can cause HC. This will also help to protect the bladder by flushing fluids through the urinary tract more quickly.
- Cancer care providers will also prescribe and administer the medication mesna (Mesnex®) with chemotherapy that can cause HC. Mesna is more successful at preventing active bleeding than treating bleeding that has started in the bladder. Ask your loved one’s cancer care provider about mesna.

**How to treat HC.** Discuss treatment options with her cancer care provider as soon as possible. These may include:

- Pain medicines, since HC can be very painful
- Antibiotics if a bacterial infection is causing the cystitis
- Treatment to remove blood clots if blood clots in the bladder interfere with urination
- Changes to chemotherapy treatment or the types of medications used
Urinary Obstruction or Diversion Requiring a Nephrostomy Tube

A nephrostomy is an artificial opening that is made between the kidney and the skin that allows urine to be rerouted or diverted from one part of the urinary system to another location. A nephrostomy tube is a catheter which is inserted through the skin into a kidney or both kidneys. This can provide temporary or permanent drainage for the urine. It allows the urine to drain into a bag outside the body.

Your loved one may need a nephrostomy tube if she has a urinary obstruction or needs a urinary diversion. Let’s explore these problems in more detail and discuss how you can help care for a nephrostomy tube.

**Urinary obstruction (blockage).** This is the most common reason for the placement of a nephrostomy tube. A blockage can be caused by a kidney stone, infection, surgical scar tissue, or from a gynecologic cancer tumor. It is possible that your loved one may need one nephrostomy tube or two tubes, one from each kidney. If she has only one tube, she will still need to urinate as her other kidney continues to make urine that drains into her bladder.

If the reason for needing the tube remains, the nephrostomy tube can be left in place permanently. In this case, the tube will need to be changed by the doctor every 3 to 4 months.

**Urinary diversion.** Using a nephrostomy tube to divert the flow of urine can allow healing from hemorrhagic cystitis or from a urinary fistula (an abnormal opening in the urinary tract or an abnormal connection between the urinary tract and another nearby organ such as the vagina).

**How to manage a nephrostomy.** Caring for your loved one’s nephrostomy tube can be overwhelming if you don’t have any experience with this kind of medical care. Before your loved one is discharged from the hospital, be sure to ask the nurse providing her care to review all instructions with you and demonstrate the proper care techniques. If you have any questions or concerns about how to manage the care of her nephrostomy while at home, contact her cancer care provider.
How to Talk With Others About Your Loved One’s Urinary Problems

Communication with your loved one’s cancer care provider is essential to prevent and manage your loved one’s urinary problems. Use a symptom diary to help report information about your loved one’s urinary issues. You can use the Symptom Diary included in this series (page X:X). Reporting these changes can give her cancer care provider key information about her health and possible solutions.

Questions about urinary problems you and your loved one might want to ask her cancer care provider include:

- Should my loved one change her activities?
- What medications and supplements may help manage her urinary problems?

Problems with urinary issues may be uncomfortable to discuss with others. Your loved one may avoid talking to you and family members about such private, personal needs. Encourage your loved one to share feelings about her urinary problems with you, and with others when appropriate. Let family and friends know how they can help. Some suggestions include asking them to:

- Encourage your loved one to practice good urinary health using the strategies in this guide.
- Offer ideas and feedback about things that might help your loved one manage her urinary problems.
- Help with needs at home to allow your loved one time to focus on managing her urinary health.
- Go with your loved one to appointments as needed.

Talk to your friends and family about some of the changes and challenges your loved one is having when dealing with urinary issues. It may be helpful to give other family members a copy of this guide.

Use a symptom diary to track your loved one’s urinary symptoms. Your loved one’s cancer care provider will want to know:

What makes her symptoms better or worse?

When do the urinary problems occur?

What is the length of time that her urinary problems have been going on?

What is associated with her urinary problems?

What parts of her life does this symptom impact?

Other symptoms that go along with the urinary problems such as pain, burning, etc.
Below is a recap of the general strategies that can help you as a caregiver manage your loved one’s urinary problems. Check those that you would like to try with your loved one. You can use this page as a quick reference.

**Urinary Incontinence (UI)**
- Maintain a healthy weight and good bowel habits, as well as practice Kegel exercises. (Page 19:6)
- Talk with the cancer care provider about medicines that can help. (Page 19:6)

**Urinary Tract Infection (UTI)**
- Follow practices to prevent infections from occurring. (Page 19:7)
- Know the signs and symptoms, and seek immediate treatment if they develop. (Page 19:7)

**Overactive Bladder (OAB)**
- Monitor fluid intake and try other helpful practices, such as bladder training. (Page 19:8)
- Talk with the cancer care provider about medicines that can help. (Page 19:8)

**Hemorrhagic Cystitis (HC)**
- Follow practices to prevent infections from occurring. (Page 19:9)
- Stay well-hydrated during chemotherapy. (Page 19:9)
- Know the signs and symptoms, and seek immediate treatment if they develop. (Page 19:9)

**Nephrostomy Tube Care**
- Talk with the cancer care provider about how to manage and care for a nephrostomy tube, and refer to additional resources. (Page 19:10)

**Communication Strategies**
- Keep a symptom diary to report symptoms and changes to the cancer care provider. (Page 19:11)
- Offer suggestions for ways that friends and family members can help out. (Page 19:11)

**Resources & Links**
- Kegel pelvic floor exercises: www.mayoclinic.org
- Nephrostomy tube care: www.youtube.com/watch?v=CbNYnjaELpY
- Symptom Diary: [Page X:X]
What strategies make the most sense to you? How can you and your family use those strategies in your own life?

Create a Plan:
Think about specific goals you want to accomplish. Just tackle one or two goals at a time.

**My goal is to** _____ (what do you hope will happen) **by** _____ (timeframe) **so that** _____ (why it’s important).

What specific strategies will you use to reach your goal? Think about the very next steps you can take to get started.