

Postpartum urinary incontinence linked to mental health

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A UT Southwestern Medical Center study of hundreds of underserved women has shown that depression and anxiety, in addition to physical factors such as a higher body mass index and previous births, are

associated with lingering postpartum urinary incontinence. The findings, published in *Urogynecology*, shine a spotlight on these conditions that can carry stigmas but are largely treatable, researchers say.

"Our study draws a bridge between two vital components of health care that are often overlooked and neglected: postpartum care and mental health," said Sonia Bhandari Randhawa, M.D., a second-year Urogynecology fellow at UT Southwestern. Dr. Bhandari Randhawa co-
led the study with David Rahn, M.D., Professor of Obstetrics and Gynecology at UTSW.

Dr. Bhandari Randhawa explained that in October 2020, clinicians from UT Southwestern and Parkland Health launched Extending Maternal Care After Pregnancy (eMCAP), a community-based program that provides care to underserved women in Dallas County for a year after they give [birth](#). Women enrolled in the program undergo a baseline assessment after delivery, then have check-ins at frequent intervals for the next 12 months. The patients undergo physical exams and answer questions on various physical and [mental health conditions](#) for treatment or referral purposes.

Curious about potential overlaps between postpartum [urinary incontinence](#) and mental health in this group, Drs. Bhandari Randhawa and Rahn and their colleagues assessed answers provided by 419 eMCAP patients 12 months after they gave birth as part of validated surveys designed to assess urinary dysfunction, anxiety, and depression. They looked for connections among these conditions and with other factors, such as demographic and [economic data](#), maternal age, number of previous births, body mass index, fetal birth weight, and mode of delivery.

The data showed that urinary [incontinence](#) was common. About 1 in 3 participants had stress urinary incontinence, a condition marked by

leakage from sudden movements such as coughing, sneezing, or jumping. About 1 in 6 had urgency urinary incontinence, or leakage after a sudden and intense need to urinate, even if the bladder wasn't full. And 1 in 9 had overall bothersome urinary symptoms.

Neither stress urinary incontinence nor urgency urinary incontinence in these participants was linked to some traditional factors, such as large babies or complicated births. However, stress urinary incontinence was significantly associated with both a higher body mass index at birth and elevated scores on the depression questionnaire. Urgency urinary incontinence was significantly associated with both a higher number of previous births and elevated scores on the anxiety questionnaire. Generally bothersome urinary symptoms were associated with both a higher number of previous births and elevated anxiety scores, the study showed.

The connection between urinary incontinence and mental health is a "chicken and egg problem" not addressed in the study, Dr. Rahn said. However, previous studies have shown a link between the stigma of urinary incontinence and worse mental health.

"If you have bad enough incontinence, you might feel isolated and embarrassed and have difficulty connecting socially. It's not hard to imagine how urinary incontinence might lead to mental health struggles," he said.

Dr. Bhandari Randhawa added that the study could encourage [medical care providers](#) to inquire about urinary incontinence and mental health at postpartum appointments.

"It's so important for providers to ask questions about urinary incontinence, depression, and anxiety, even if they don't have time to discuss these topics in depth," she said. "Having the right referral for

these treatable conditions can make a huge difference in patients' lives."

More information: Sonia Bhandari Randhawa et al, Factors Associated With Persistent Bothersome Urinary Symptoms and Leakage After Pregnancy, *Urogynecology* (2024). [DOI: 10.1097/SPV.0000000000001528](https://doi.org/10.1097/SPV.0000000000001528)

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