

Urge incontinence and female sexual dysfunction: a life span perspective

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Comorbidity between urological disorders, overactive bladder and urge incontinence first, and female sexual dysfunctions (FSD) is still underdiagnosed in clinical practice, in spite of data indicating an extremely high association between the two conditions. Latent class analysis of sexual dysfunctions by risk factors in women indicate that lower urinary tract symptoms have a RR= 4.02 (2.75-5.89) of being associated with arousal disorders and a RR=7.61 (4.06-14.26) of being associated with sexual pain disorders. Clinical history focusing on prepubertal signs and symptoms of overactive bladder (enuresis, nocturia, daily symptoms) indicate that 2.3% of women currently suffering of urge incontinence do report these early symptoms when actively asked for. Pathophysiological factors underlying co-morbidity between urge incontinence and FSD may begin in early infancy or adolescence. Estrogens may attenuate bladder' vulnerability at puberty. Their loss at menopause may re-trigger bladder overactivity, which remains borderline across the fertile age. Higher clinical and research attention is needed to further substantiate this preliminary finding and improve life-span designed preventive and therapeutic measures.

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