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CURRENT PERSPECTIVE ON MULTIFACTOR PROBLEMS OF INCONTINENCE IN WOMEN (literature review)

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Abstract. Urinary incontinence is one of the most common urogynecological problems in women and has a significant impact on their physical, psychological and social well-being. Despite the significant achievements of modern medicine, the etiology and pathogenesis of this disease remains the subject of active study. This review summarizes the current literature on risk factors for urinary incontinence in women.

Keywords: incontinence, women, risk factors, pathogenesis, urogynecology, pelvic floor, obesity, age-related changes

Relevance. Urinary incontinence (LM) is one of the most common disorders of the lower urinary tract and is defined as any involuntary discharge of urine. Despite the absence of an immediate threat to life, this condition has a significant negative impact on the physical, psychological and social well-being of patients. Urinary incontinence contributes to a decrease in the quality of life, restriction of daily activity, deterioration of professional and social adaptation, and may also be accompanied by the development of anxiety and depressive disorders. In addition, in older age groups, the presence of incontinence is associated with an increased risk of falls, injuries and the formation of pressure ulcers [1, 2, 3, 9, 13].

Although urinary incontinence occurs in both men and women, the highest prevalence of the disease is noted among the female population. This is due to anatomical and physiological features of the genitourinary system, as well as exposure to specific risk factors associated with a woman's reproductive function, pregnancy, childbirth and age-related hormonal changes [1, 3, 5, 7, 14, 15].

According to epidemiological studies, signs of urinary incontinence are detected in 20-30% of young women, while in older age groups the prevalence of the disease can reach 40% or more. Incontinence has a negative impact on various aspects of a woman's life, including social activity, emotional state, ability to work, interpersonal relationships and sexual health. Among the factors most closely related to the development of this pathology are age, pregnancy, childbirth, overweight and obesity [7, 8, 9, 11, 16].

Despite a significant amount of scientific research, the etiology and pathogenesis of urinary incontinence in women remains the subject of active study. For a long time, the leading role in the development of the disease was assigned to an increase in intra-abdominal pressure, which affects the bladder and urethra. On this basis, the theory of pressure transmission was formulated, according to which a violation of the mechanisms of transmission of intra-abdominal pressure leads to a decrease in the ability to retain urine during physical stress, coughing or sneezing [3, 9, 10, 12, 14, 15].

Further development of urogynecology and an in-depth study of the mechanisms of urinary retention contributed to the formation of the concept of sphincter failure. According to this theory, a key link in pathogenesis is a decrease in the functional ability of the urethral sphincter to provide the necessary resistance to urine flow. As a result, even a slight increase in intra-abdominal pressure may be accompanied by involuntary urine production, especially during physical activity, lifting weights, coughing or other exertion [4, 5, 6, 8, 13, 14, 15, 16].

Integral theory. According to her, due to the existing pathologies of the connective tissue forming the ligamentous apparatus of the pelvis, there is a violation of the process of retention of

urine. It is this theory that has recently been considered the most evidence-based and accepted by doctors around the world.

Other factors that trigger incontinence include overweight and obesity. According to 2011-2014, among the US female population, 38.6% have obesity [9]. Louisiana statistics show that in 2016, 69% of residents were overweight or obese. Among Russians, these indicators are more comforting: according to a study conducted by Rosstat in 2018, 24.5% of women were diagnosed with one or another degree of obesity, and 34.7% were overweight. Only 38.1% of Russian women correspond to the characteristics of the norm [1, 2, 14, 15, 16]. An increase in body mass index by 5 increases the risk of stress urinary incontinence by 20-70% [2, 3, 5, 13, 16].

Conclusion. Urinary incontinence can be triggered by various factors, including diseases of the female genital organs, central and peripheral nervous systems, organs of the endocrine system, etc. To conduct a complete examination of the patient and identify the factors that led or possibly aggravated the patient's condition, as well as to determine the tactics and prescribe adequate treatment, specialist doctors are involved - obstetricians-gynecologists, neurologists and neurosurgeons, endocrinologists.

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