

Mixed Incontinence: How Best to Manage It?

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Abstract

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Although common in women, mixed urinary incontinence (MUI) is under-reported and under-treated. It is linked to concomitant disturbances, which may be due to childbirth, ageing, or other medical conditions, in the complex bladder-urethra coordinated system of urine storage and emptying. Primary care physicians can evaluate MUI through history and simple clinical assessment or they can avail of more complex device and tools, such as urodynamic assessment. There is a wide range of therapeutic options. The recent proliferation of new drug treatments and surgical devices for urinary incontinence offers innovative strategies for therapy but products risk being introduced without long-term safety and efficacy assessment. Direct-to-consumer advertising has increased public awareness of MUI.

Keywords: Urinary incontinence, Mixed urinary incontinence, Epidemiology, Prevalence, Quality of life, Pathophysiology, Urethrovesical axis, Intrinsic sphincter deficiency, Integral theory, Diagnosis, Urodynamic assessment, Therapy, Pelvic floor muscle exercises, Biofeedback, Duloxetine, Oestrogens, Antimuscarinics, Surgery, Pubovaginal sling, Colpo-suspension, TOT, TVT