LUT Function/Dysfunction

Christopher K. Payne, MD
Vista Urology & Pelvic Pain Partners
Emeritus Professor Urology, Stanford University
Board Chair, Worldwide Fistula Fund

Outline

- 1. Normal LUT Function
- 2. Classification LUT Dysfunction
- 3. Approach to the Patient

Lower Urinary Tract Anatomy

- Bladder
- Outlet
 - --Bladder neck/internal sphincter
 - -- Urethra
 - -- External sphincter
 - -- Prostate in males

PELVIC FLOOR (levator ani muscle) Symphysis Bladder Urethra External urethral sphincter Adapted from Raz et al. 1998.

Normal Lower Urinary Tract Functions

- Urine storage
- Bladder emptying

Urine Storage

- Bladder holds urine at low pressure and with appropriate sensation
- Outlet closed at rest and against stress
- No involuntary contractions

Bladder Emptying

- Coordinated bladder contraction of adequate magnitude
- Simultaneous relaxation of the outlet
- No fixed obstruction

Classification of Lower Urinary Tract Dysfunction

- Failure to empty/store
- Because of the bladder/outlet

Classification of Lower Urinary Tract Dysfunction

	Failure to empty	Failure to store
Because of the bladder		
Because of the outlet		

Retention

	Failure to empty	Failure to store
Because of the bladder	DM, sacral injury	OAB/UUI
Because of the outlet	BPH, post sling	SUI

Incontinence

	Failure to empty	Failure to store
Because of the bladder	DM, sacral injury	OAB/UUI
Because of the outlet	BPH, post sling	SUI

Classification of Lower Urinary Tract Dysfunction

	Failure to empty	Failure to store
Because of the bladder	DM, sacral injury	OAB/UUI
Because of the outlet	BPH, post- sling	SUI

Basic Patient Approach

- Working diagnosis
- Define treatment options
- Define patient priorities/goals
- Treatment or additional testing as indicated

Basic Patient Approach

- Working diagnosis—female SUI
- Define treatment options—observation,
 PFMT, device, meds, injections, surgery
- Define patient priorities/goals—ballroom dancing with confidence
- Treatment or additional testing as indicated—none vs. stress test vs. urodynamics

But, it's complicated



Classification of Lower Urinary Tract Dysfunction

	Failure to empty	Failure to store
Because of the bladder	DM, secral injury	ONS/UUI
Because of the outlet	BPH, post-	SUZ

Moderately Complex

- Mixed urinary incontinence
- 40yo female with worsening urgency incontinence and cystocele after sling
- 80yo woman with urgency incontinence and straining to void

An order of magnitude

- 63yo female with mixed urinary incontinence, both seem significant
- Type II diabetes for 20 years, mild peripheral neuropathy
- Two prior operations for SUI and POP
- Exam: Cystocele +1cm, supported bladder neck, drops SUI and PVR 180cc



Where to start?

- Greatest impact on QoL
- Easiest to treat
- Curable problem
- Correctable problem that causes more than one symptom
- Treatment that can improve more than one symptom

Curriculum

Friday

- Female urinary incontinence & OAB
- FPMRS potpourriGood urodynamic practice

Saturday

- Neurogenic Lower Urinary Tract
- Practical Anatomy
- Pelvic Organ Prolapse
- Urethral disorders
- Cases and questions



Alan Wein, MD



- Co-host ICS 2018
- Founders Professor Urology U. Penn
- Chairman forever
- Residency Program Director
- Campbells Urology
- International Consultation on Continence
- Teacher and researcher extraordinaire

Diane Newman, RN, PhD



- Co-host ICS 2018
- Professor Nursing U. Penn
- Co-Director of the Penn Center for Continence and Pelvic Health
- Prolific researcher and author Panel member of first AHCPR Urinary Incontinence Treatment Guidelines

Sherif Mourad, MD



- Professor of Urology Ain Shams University, Cairo
- General Secretary of ICS
- Founder PACS
- Author, Editor
- Teacher
- Surgeon

Holly Richter, MD



- J. Marion Sims Professor of OB/GYN University of Alabama at Birmingham
- UAB was first NAFC Center of Excellence
- Leader in PFDN and UITNActive in care of childbirth injuries overseas.

Mike Kennelly, MD



Carolinas Medical Center and University of North Carolina School of Medicine Director of Urology for specialized Rehab Center Co-Director of Women's Pelvic Health Center Clinical Research Leadership Paraplegia Society, SUFU, AUA, American Spinal Injury Soc

Jeannette Potts, MD



- Trained and Board Certified in Family Medicine
- Urology Fellowship Cleveland Clinic, CCF Faculty x 15 years
- Seminal Contributions in Urogenital infections, Pelvic Pain, Prostate Cancer screening.
- Worldwide lecturer
- Patient advocate

Vani Dandolu, MD, MPH, MBA



- Scientific Program chair ICS 2020 Chair of OB-GYN at University of Nevada 2011-2017 & Residency program director 2007-20<u>17</u>
- Now Medical director OBGYN for OptumCare Women's Health National Awards teaching excellence
- National Awards teaching excellenc Research interests:
- Trends in POP and UI surgeries
- Cost analysis of GYN treatment
- Surgical skills training

