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Title of Presentation







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Stress Urinary Incontinence: Clinical Overview



URINARY INCONTINENCE


Urinary Incontinence (UI) Stats⁴

-  Women 4-5 times more likely to have bladder issues.
-  1 in 4 women over the age of 18 will experience episodes of UI.
-  Up to 70% of women will have leakage during or after pregnancy.
-  Bedwetting or nocturnal enuresis is greater in boys than girls.
-  50% men that undergo prostate removal surgery will experience problems with UI.
-  Men are less likely to seek help or talk about incontinence.

People approximately affected with Urinary Incontinence (UI)⁵

 = 1 million

25 million in the US



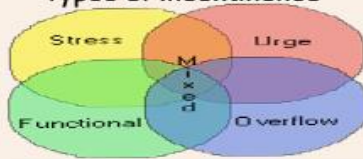
 = 25 million

200 million worldwide



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Types of Incontinence



- C**
a
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s
- Pregnancy & Childbirth
 - Prostate issues
 - Benign Prostate Hyperplasia (BHP)
 - Diabetes
 - Hormone changes in women like Menopause
 - Obesity
 - Neurological Causes
 - Nerve damage due to diabetes, Parkinson's disease, multiple sclerosis, stroke
 - Hig blood pressure
 - Pelvic organ prolapse

Ways to manage incontinence

-  Lose weight.
-  Eat a fibre rich diet.
-  Avoid bladder irritants such as caffeine, alcohol and artificial sweeteners.
-  Exercise regularly
-  Stay hydrated.
- ✓ Pelvic floor muscles, KEGELS.

Did you know?




The bladder is the shape and size of a grapefruit.¹

The Bladder



It can hold about 300-500 ml of fluid.

The prostate gland...²

-  will be the size of a walnut by age 20.
-  may be the size of an apricot by age 40.
-  may be the size of a lemon by age 60.

Guinness World Record

The largest bladder stone was removed from José de Castro da Silva (aged 62) from Brazil, August 25, 2003. It weighed 1.9 kg (4 lb 2.88 oz), 17.9 cm (7 in) long, 12.7 cm (5 in) thick and 9.55 (3.7 in) tall.³

3

Sources: 1. Cordias Continence Foundation, 2. Enlarged prostate symptoms.com, 3. Guinness World Records, 4-6. National Kidney and Urological Diseases Information Clearinghouse (NKUDIC)



Causes of Urge Incontinence

- 1) Infection of the bladder
- 2) Inflammation of the bladder.
- 3) Bladder stones
- 4) Prostate enlargement in men.
- 5) Obstruction in the bladder opening
- 6) Bladder cancer
- 7) Nervous system diseases (e.g. multiple sclerosis)
- 8) Nervous system injury (e.g. trauma to the spinal cord or stroke)
- 9) Many a times there is no identifiable cause for urge incontinence.

Introduction

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- Urinary incontinence is the involuntary leakage of urine. Control over the urinary sphincter is either lost or weakened.



Prevalence

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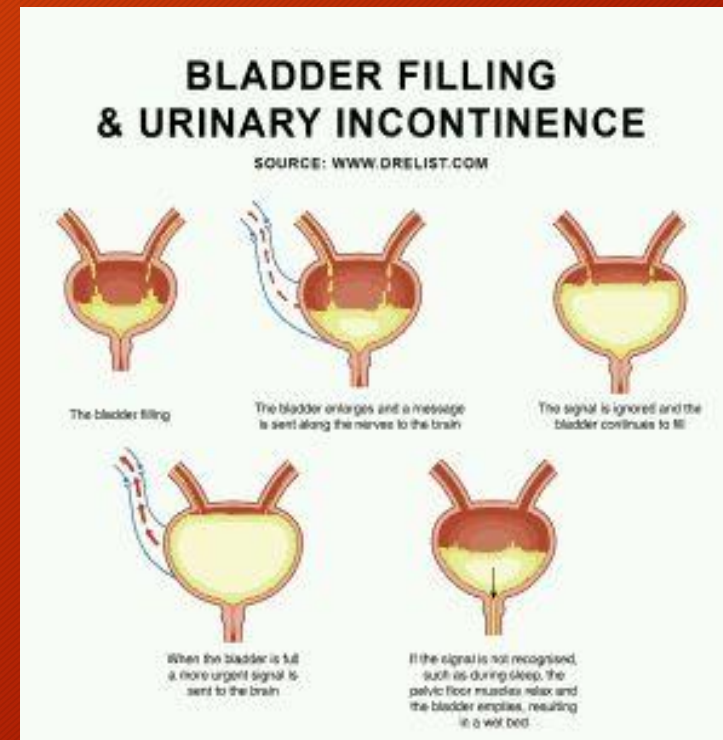
- Community: 17% older men, up to 30% older women
- Hospital: up to 50% older men and women
- LTCF(Long term care facilities): 50-70% older men and women



What will we learn during next 20 min.

6

1. What does happen to bladder?
2. How will the condition get evaluated?
3. How can a person with SUI improve his/her symptoms?
4. Therapy with medication
5. Homoeopathic Management
 - Homoeopathic medicine
 - Repertorisation of remedies used in UI



What is normal?

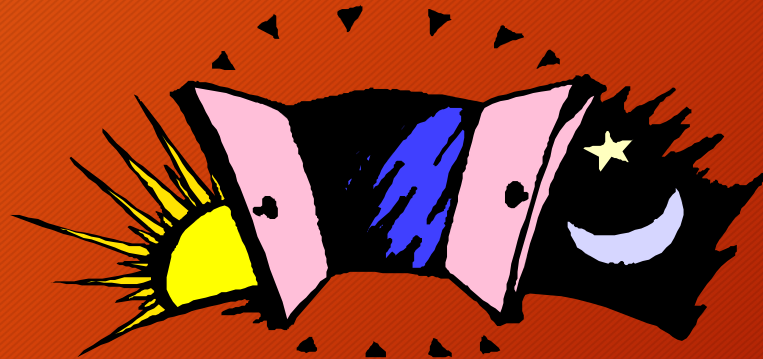
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Daytime:

- frequency of no more than once every 2 hours.

Night-time:

- 1-2 voiding are considered normal.

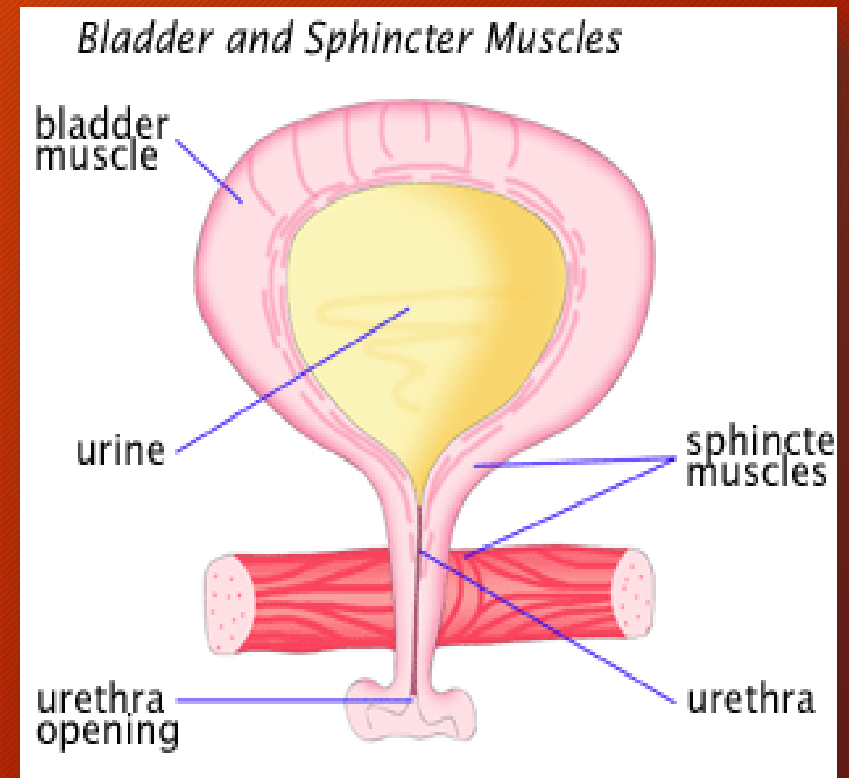


Bladder Anatomy

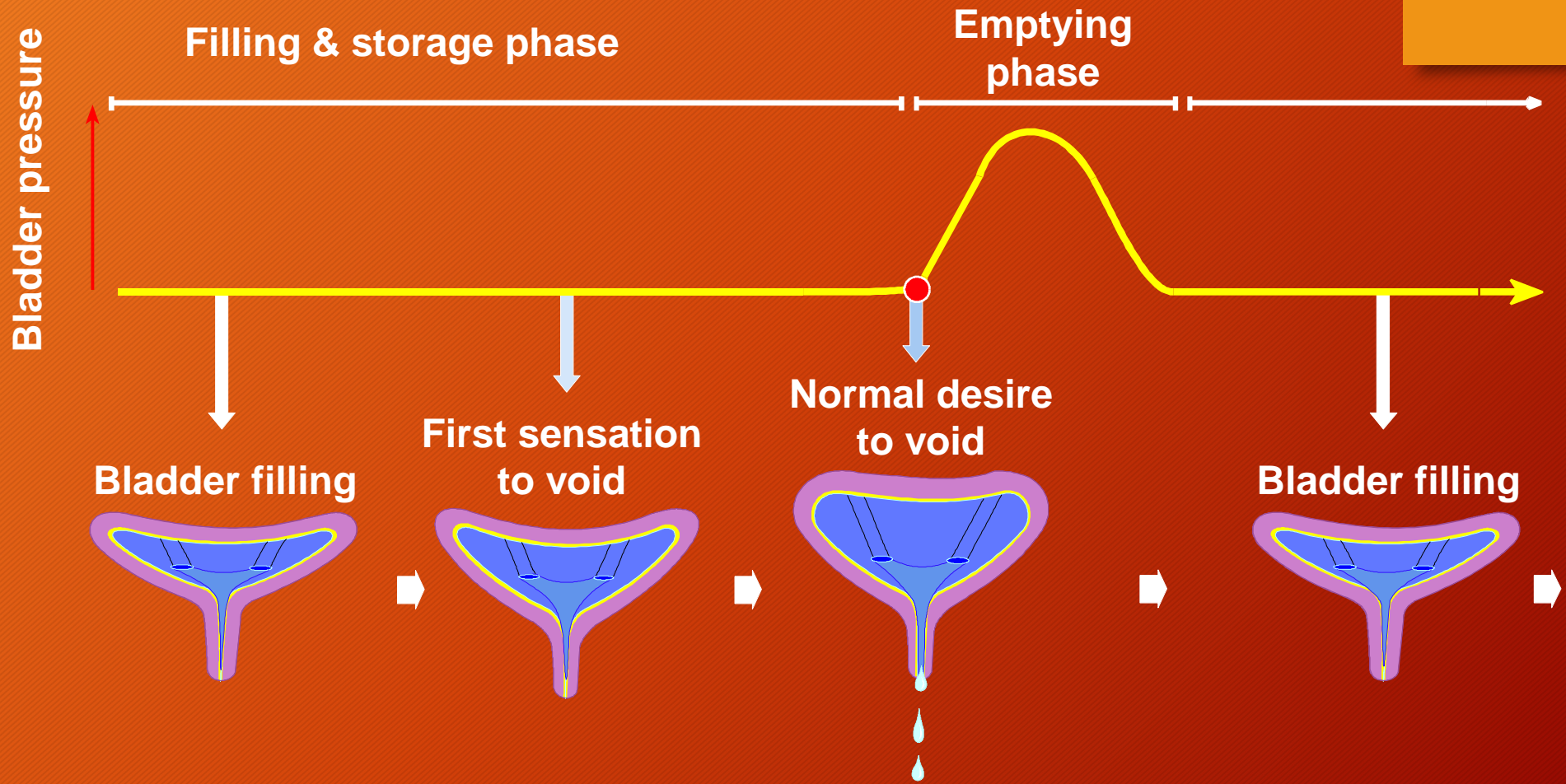
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Hollow, distensible, muscular organ.

- **Reservoir of urine**
 - Capacity ~600 mL
 - Desire ~200 mL
 - Normal void ~300 mL
- **Organ of excretion**
 - Behind symphysis pubis
 - Female – against anterior wall of uterus
 - Trigone
 - Sphincter

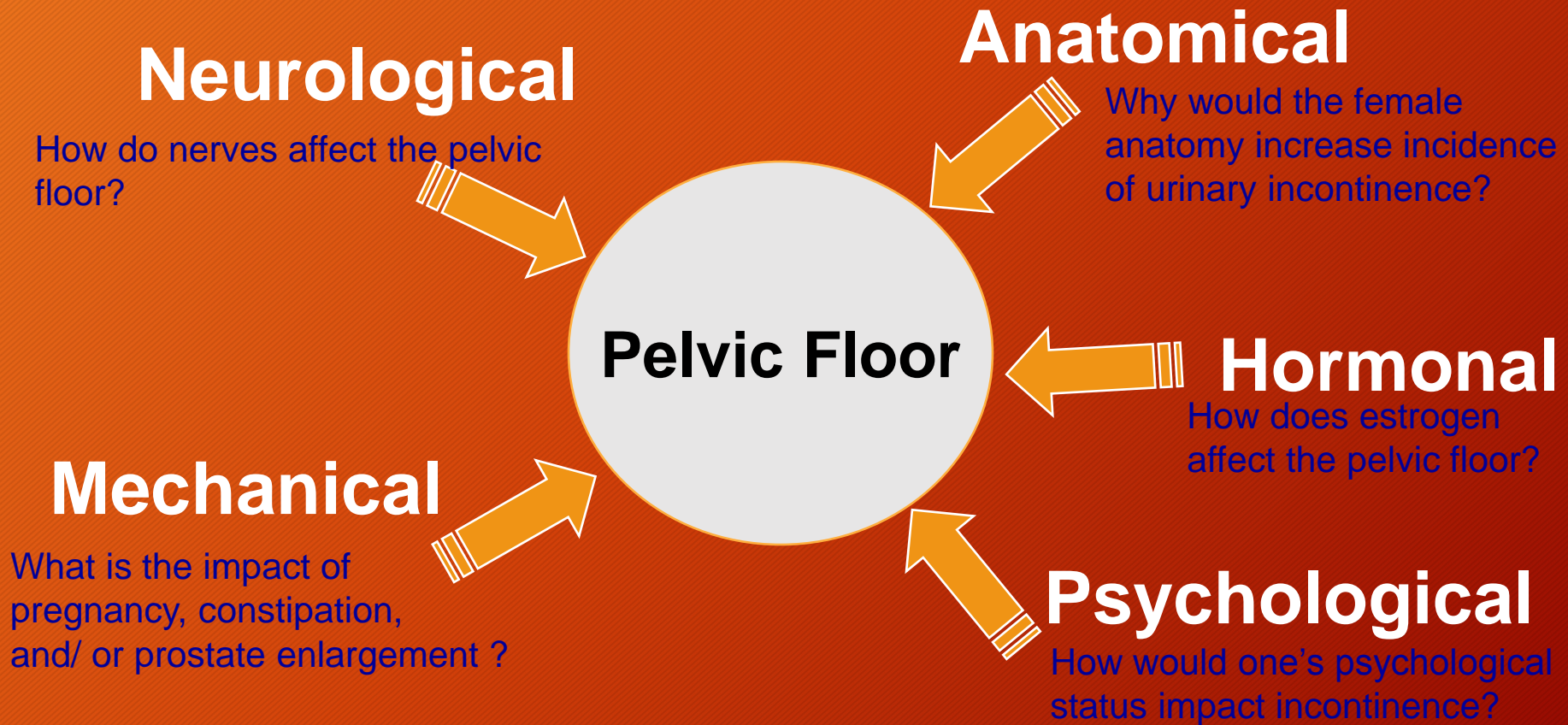


Normal Voiding Cycle



Forces that affect the pelvic floor

10



UI is not reported because of....

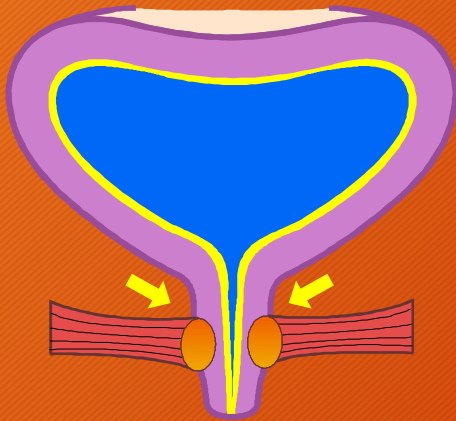
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- ? Embarrassment.
- ? Lack of information.
- ? A belief it is part of aging.
- ? Health care providers don't ask.
- ? A belief there is no effective treatment.
- ? Fear of the therapies used to manage the problem.

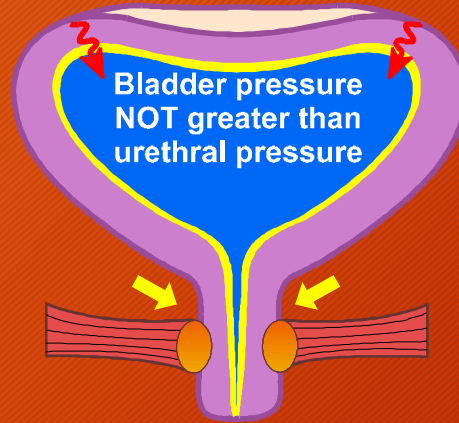


Uncontrolled Contraction of the Bladder Muscle

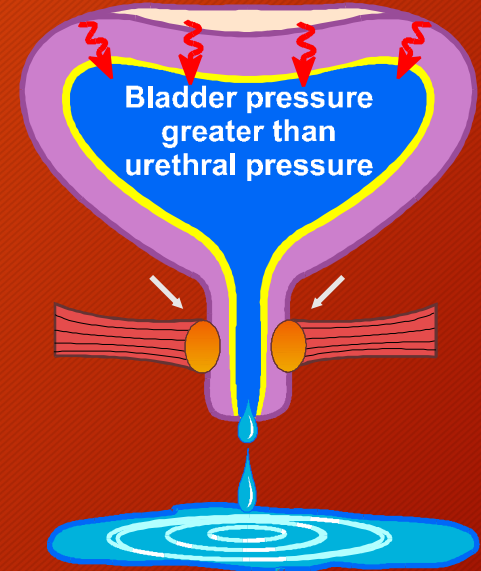
Normal bladder



Patients with urge or frequency



Patients with urge incontinence



→ Urethral resistance

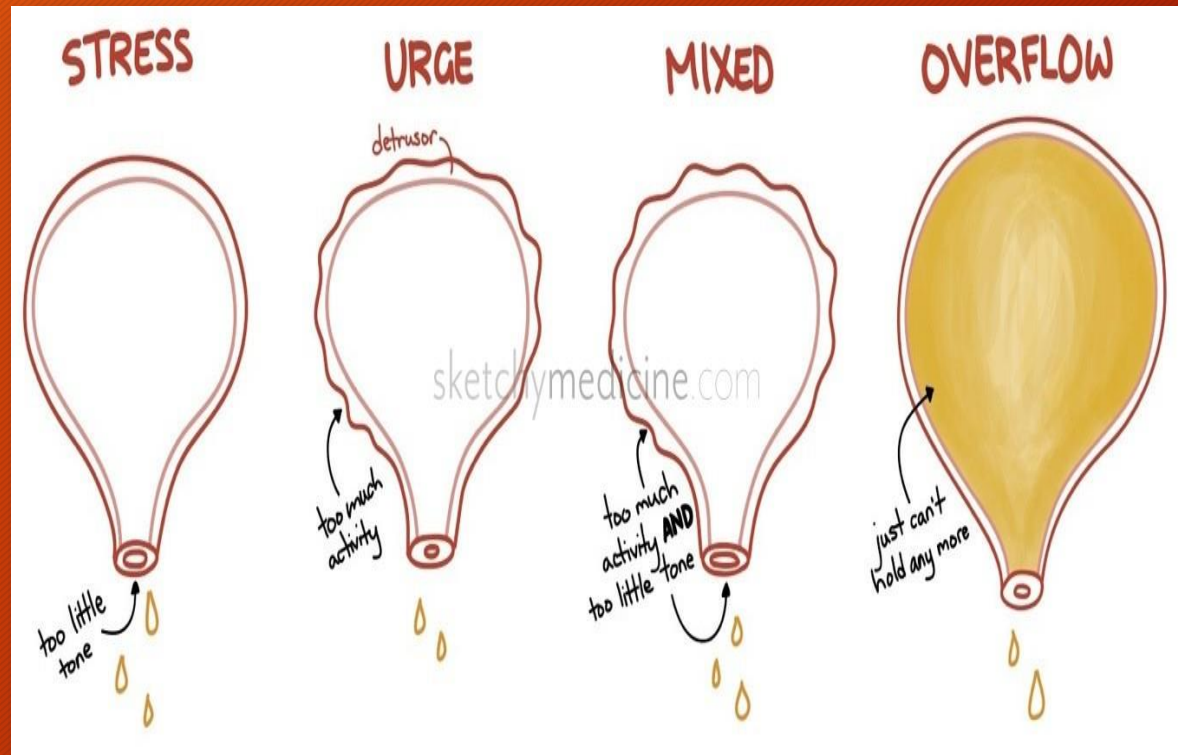


Uncontrolled bladder muscle contractions

Types of Urinary Incontinence

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- Stress
- Functional
- Environmental
- Urge
- Overflow
- Iatrogenic (caused by hospitalization, medications, etc.)
- Mixed



Stress Incontinence

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- **loss of urine that occurs during activities that increase intra-abdominal pressure:**
 - coughing
 - sneezing
 - laughing
 - physical activity (lifting heavy objects)
- **caused by pelvic muscular weakness as a result of**
 - pregnancy
 - obesity
 - surgery
 - medications
 - aging (lower estrogen levels)



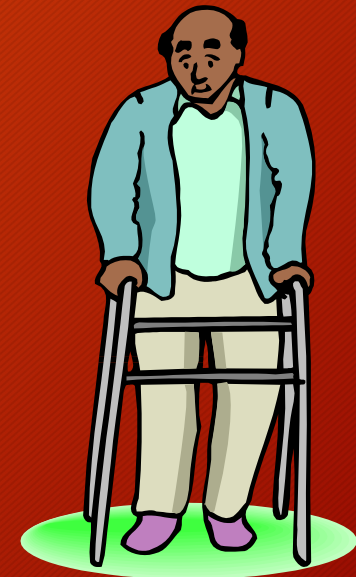
Functional Incontinence

15

➤ *Physical or Psychological impairment that results in incontinence when the urinary tract is healthy.*

➤ **causes:**

- Decreased mobility.
- Pain.
- Clothing.
- Psychological factors.



Urge Incontinence

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- ***A loss of urine with an abrupt and strong desire to void.***
 - “I’m unable to make it to the bathroom on time.”
- ***Caused by an overactive detrusor muscle, resulting in excessive involuntary bladder contractions that may be initiated by:***
 - cancer (bladder / prostate)
 - infection
 - spinal or nerve damage
- ***Often found in individuals with***
 - diabetes, stroke, dementia, Parkinson’s disease, or
 - multiple sclerosis



Overflow Incontinence

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- **Loss of urine related to the over distention of the bladder**
 - frequent or constant dribbling
 - may include urge or stress UI
- **Causes**
 - loss of bladder muscle tone and/or outlet obstruction
 - MS, DM, outflow obstruction (BPH), spinal or nerve damage
- **Least common, hard to diagnose**
- **Treatment**
 - review medications
 - drainage: intermittent, continuous



How to evaluate?

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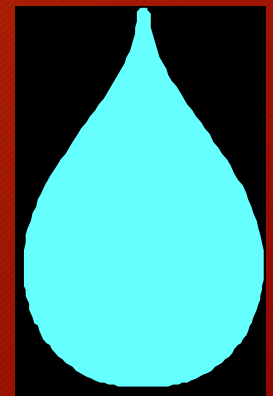
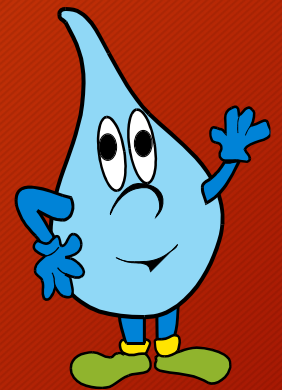


“Hello, incontinence helpline – Can you hold?”

1. Incontinence Screening “DRIP”

19

- D** - Delirium, depression.
- R** - Retention, restricted mobility and/or environment.
- I** - Infection, inflammation, impaction.
- P** - Pharmaceuticals, polyuria, pain.



2. History

20

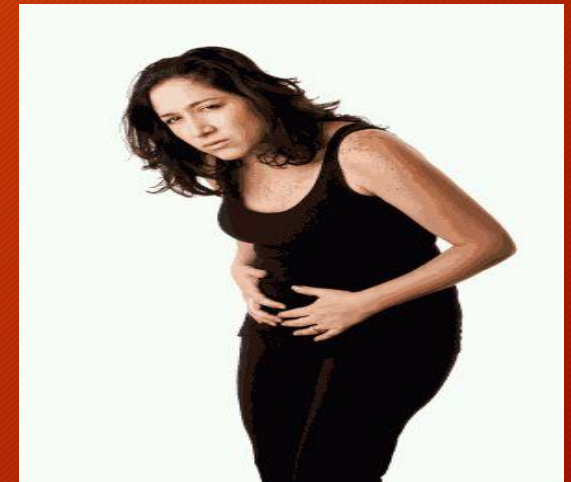
- Fluid intake pattern
- Number of continent and incontinence episodes
- Night time urgency
- Voiding Pattern
 - Quality of stream
 - Incomplete voiding



History

21

- **Alterations in bowel habits**
- **Changes in sexual function**
- **OB/GYN history**
- **Medications**
- **Neurologic history**
 - **Back pain, back surgery**
 - **Stroke**
 - **Numbness, weakness, balance problems**



3. Medications That May Influence Bladder Function

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- Anti-water meds (Diuretics)
- Antidepressants
- Blood pressure meds
- Hypnotics
- Pain meds
- Narcotics
- Sedatives
- OTC-Sleep aids and cold remedies
- Antipsychotics
- Herbal remedies



4. Physical examination

23

- General examination
- Focused neurological examination
- Genitalia and pelvic floor examination
- Rectal examination



5. *Laboratory tests*

24

➤ **Urine tests**

- To rule out blood in the urine, kidney problems, urinary tract infections

➤ **Blood work as appropriate**

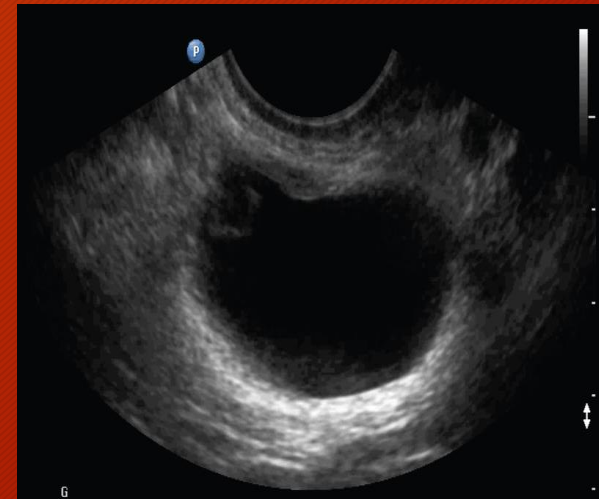
- Blood sugar
- PSA (prostate cancer)



6. Invasive Tests

25

- **Bladder scanning with a camera (Cystoscopy)**
 - To rule out any growth, inflammation, or stones inside.
 - The bladder.
- **Imaging Studies**
 - Ultrasound
 - X-ray studies with contrast fluid during
 - MRI



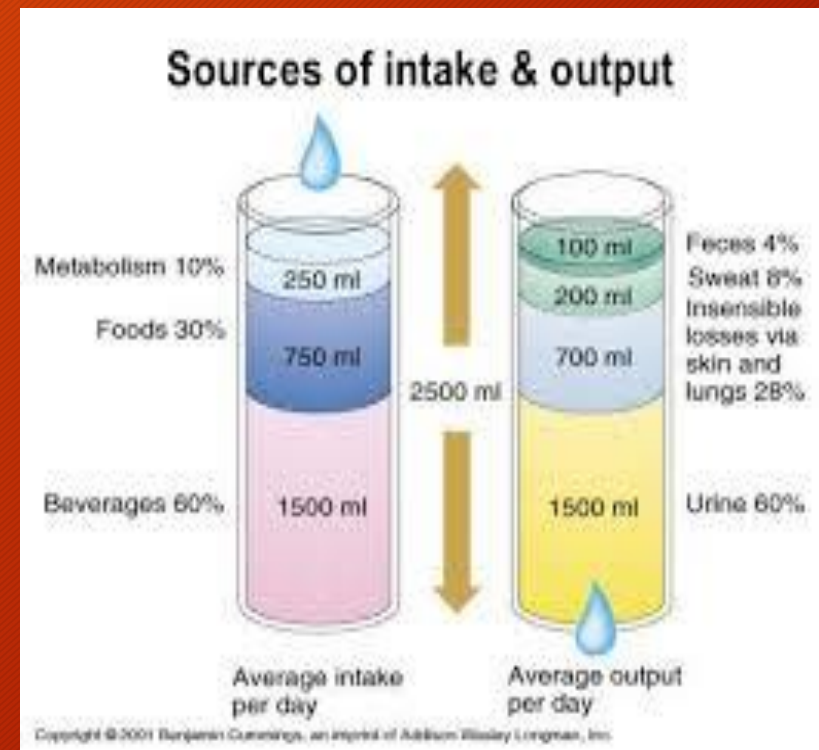
How can patient improve symptoms?

1. Summary

26

6 steps for continence:

1. Drink less than 5 glasses/day (40 oz).
2. Stop drinking after dinner.
3. Elevate legs.
4. Timed voiding.
5. Regular pelvic floor exercises.
6. Voiding diary.



2. Dietary changes

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- **Adequate fluid intake:**
 - to avoid too frequency
 - to avoid bladder irritation and urinary tract infections
- Reduce evening fluids to manage nighttime urination
- **Avoid Bladder irritants: Caffeine, alcohol, nicotine**



2 Dietary changes

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- **Dietary adjustments**

- Fruits.
- Vegetables.
- High fiber intake.

- **Bowel regulation**

- Avoid constipation and straining.
- Routine defecation schedule.



3. Exercises - Kegal exercise

29

4 Must-Know Facts about Kegel Exercises

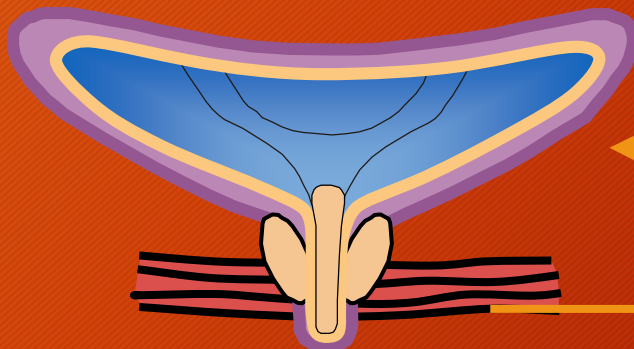
1 Commonly prescribed to improve many conditions.



2 **How to** Lift pelvic floor and contract muscles.

3 They can be done at any location: at home, office, or in the car.

4 They have been proven effective in reducing urinary incontinence.



Bladder Relaxation

Contraction

4. Home Remedies for UI

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Home Remedies for Urinary Incontinence

Urinary incontinence can be described as the inability to control urination, thus leading to urine leakage or involuntary loss of urine.



According to the **National Association for Continence (NAFC)**



Urinary incontinence affects about 25 million Americans.

Pelvic Floor (Kegel) Exercises

Pelvic floor exercises are beneficial for reducing stress and urge incontinence in both men and women.



Apple Cider Vinegar

1. Mix 1 to 2 tsp raw, unfiltered apple cider vinegar in a glass of water.
2. Add a little raw honey.
3. Drink it 2 or 3 times daily until you are satisfied with the results.



Meditation

Meditation and guided imagery can also help.



Yoga



To help control incontinence, try yoga poses such as Root Lock (Mula bandha), Chair Pose (Utkatasana), Triangle Pose (Trikonasana), & Squat Pose (Malasana).



Magnesium

Take 350 mg of magnesium hydroxide supplement twice daily for several weeks, after consulting your doctor.

Acupuncture

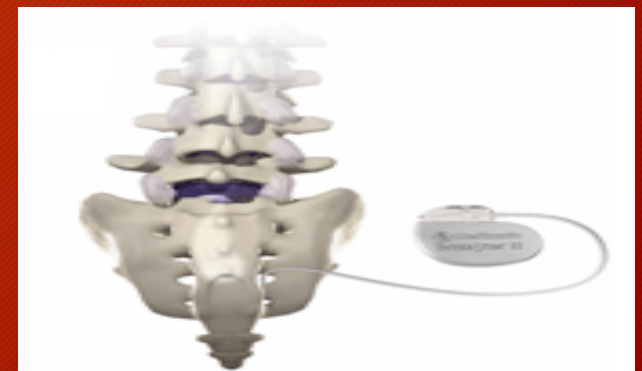


Top 10 Home Remedies

Treatment Options for UI

31

- Behavioral techniques
 - biofeedback
 - scheduled toileting
 - exercise
- Medication
- Surgery
- Continence promoting devices:
 - Pessary



Homoeopathic Management of UTI

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- ❖ Homoeopathy individualize a natural remedy for the person based on the totality of their symptoms, not just their bladder symptoms.
- ❖ This individualized remedy would strengthen the person's overall immune and defense system.
- ❖ not only eliminate the symptom but cures the underlying disease.



Homoeopathic remedies for U9

33

- **Arnica** (Leopard's bane):
 - invaluable for involuntary urination after surgery.
- **Belladonna** (deadly nightshade):
 - Effective for people who tend to dribble urine when cold or chilled.
 - Experience burning pains along the length of the urethra during urination.
 - Tend to have wild dreams, often dreams of urinating.

Homeopathic remedies for U9

34

- **Causticum:**

- Involuntary urination is worse in the winter and better in the summer.
- Various fears and apprehensions accompany the urination, especially fears that something bad will happen to them.
- People also tend to wet their pants when they cough or sneeze or even laugh.

- **Equisetum (Scouring rush):**

- People who wet their pants or their bed for no known reason other than out of habit.
- Considered when the person has no other obvious symptoms.
- Also be given when the person experiences wild dreams or nightmares when bedwetting.

Homoeopathic remedies for U9

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- **Ferrum phos** (iron phosphate)
 - daytime wetting in the pants, strongest urges to urinate while standing.
 - Urgings to urinate are lessened while lying down.
- **Kreosotum (Beechwood):**
 - sudden urge to urinate that they do not have enough time to get out of bed to go to the bathroom.
 - wet bed during the first part of the night.
 - dreams of urinating.

Homoeopathic remedies for U9

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- **Lycopodium (Club moss):**
 - valuable for people who are so anxious that they constantly worry about what others think of them tend to need this remedy.
 - They are more apt to wet the bed if they sleep in a warm or stuffy room.
 - They prefer to sleep with an open window.

Repertorisation of remedies used in U9

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According to ;

- 1) Kent
- 2) BBCR



BLADDER-URINARY ORGANS, URINATION,

- involuntary: (129) acet-ac. **Acon.** AIL. alumn. Alum. am-c. anac. anan. ant-c. **APIS ARG-N.** Am. **ARS.** ARS-I. atro. aur-m. Bar-act. Bar-c. bar-m. **BELL.** Bry. Bufo cact. calc. Calc-p. Camph. cann-i. Canth. carb-an. carb-s. Carb-v. **CAUST.** Cedr. cham. Chin. chinin-ar. chlol. Cic. Cimx. Cina Colch. Con. crot-h. cupr. Dig. dros. **DULC.** Echi. Equis-h. Eup-pur. ferr. ferr-ar. ferr-i. Ferr-p. Fl-ac. Gels. graph. Guare. Hell. Hep. Hydr. Hydr-ac. Hyos. Ign. Iod. kali-ar. kali-br. Kali-p. Kreos. lac-d. Lach. Laur. led. **LYC.** mag-c. mag-m. Merc. merc-c. mill. Mosch. Mur-ac. Nat-act. Nat-c. **NAT-M.** nat-p. Nit-ac. **NUX-M.** Nux-v. ol-j. OInd. Op. ox-ac. Petr. Ph-ac. **PHOS.** phys. pic-ac. Plan. plb. Podo. **PSOR.** **PULS.** rat. **RHUS-T.** rumx. Ruta sang. Sanic. Sec. Sel. seneg. **SEP.** sil. Spig. Spong. Squil. **STAPH.** Stram. Sulph. tab. tarent. Ter. Thuj. ust. Verat. Verb. vesp. vib. zinc.
- . daytime: (6) Arg-n. Bell. Ferr. Ferr-p. **FL-AC.** thuj.
- and night: (12) Arg-n. **ARS.** bell. **CAUST.** Gels. Hyos. Iod. Nux-v. petr. Rhus-a. ruta Verb.
- sleep,during: (1) Bell.
- walking,while: (2) ferr. thuj.
- . morning: (5) am-c. cina phos. phys. til.
- toward: (2) am-c. chlol
- . forenoon: (1) phys.
- night (incontinence in bed): (96) acon. Aeth. Am-c. anac. anan. **APIS Apoc.** Arg-met. **ARG-N.** **ARN.** **ARS.** Aur. aur-m. aur-s. bar-c. bar-m. **BELL.** **BENZ-AC.** bry. cact. Calc. canth. Carb-n-s. Carb-v. **CAUST.** Cham. chin. Chlol. cimx. Cina coca con. Crot-c. cub. cupr. dulc. **EQUIS-H.** Eup-pur. **FERR.** Ferr-ar. ferr-i. ferr-p. Fl-ac. **GRAPH.** Hep. hyos. ign. kali-c. Kali-p. **KREOS.** **LAC-C.** lac-d. lyc. mag-c. Mag-m. **MAG-P.** mag-s. Med. Merc. mur-ac. Nat-act. Nat-c. **NAT-M.** Nat-p. **NIT-AC.** nux-v. Op. ox-ac. Petr. ph-ac. Phos. Plan. Podo. Psor. **PULS.** **RHUS-T.** Ruta Sanic. Sars. Seneg. **SEP.** **SIL.** spig. squil. staph. Stram. **SULPH.** tab. ter. Thuj. Tub. Uran-met. verat. Verb. Viol-t. zinc.
- morning,toward: (4) am-c. cact. chlol. zinc.
- midnight to morning: (1) plan.
- after,5 a.m.: (1) cact.
- difficult to waken the child: (2) Bell. **KREOS.**
- dreaming of urinating,while: (7) Kreos. lac-c. lyc. merc-i-f. Seneg. Sep. sulph.
- first sleep: (6) benz-ac. **CAUST.** cina Kreos. Ph-ac. **SEP.**
- spasmodic enuresis: (17) **ARG-MET.** bell. canth. caps. castm. cina coloc. Gels. hyos. ign. lach. lyc. Nux-v. op. puls. rhus-t. verat.
- tangible cause except habit,when there is no: (1) **EQUIS-H.**
- weakly children,in: (1) Chin.
- . blowing the nose,when: (4) **CAUST.** nat-m. puls. zinc.

- . boys,in: (1) Rhus-t.
- . chill,
- before: (1) Gels.
- during: (5) caust. dulc. puls. rhus-t. sulph.
- . cold,becoming: (4) bell. **CAUST.** Dulc. Rhus-t.
- . convulsions,during: (11) art-v. **BUFO** Caust. cocc. cupr. **HYOS.** nux-v. Oena Pl.) str.) Zinc.
- . cough,during: (43) Alum. anan. Ant-c. **APIS** Bell. Bry. Caps. carb-an. **CAUST.** Cench. Colch. dulc. ferr. Ferr-p. hyos. ign. Kreos. lach. laur. Lyc. mag-c. murx. **NAT-M.** nit-ac. Nux-v. Ph-ac. **PHOS.** psor. **PULS.** rhod. rhus-t. Rumx. seneg. Sep. Spong. **SQUIL.** staph. sulph. tarent. Thuj. Verat. vib. Zinc.
- . delayed,if: (7) Lach. phos. plan. Sep. squil. sulph. thuj.
- . desire is resisted,if: (8) calc. merc. nat-m. Puls. sep. squil. Sulph. Thuj.
- . effort,during,no urine flows: (1) Gels.
- . excitement,from: (1) Gels.
- . exertion,during: (6) Bry. caust. Nux-v. ph-ac. rhus-t. tarent.
- . flatus,expelling,when: (2) Puls. sulph.
- . labor,after: (2) Am. **ARS.**
- . laughing: (6) **CAUST.** Nat-m. Nux-v. Puls. **SEP.** tarent.
- . lying,while: (1) kreos.
- . mania,during: (1) Cupr.
- . menses,during: (5) cact. calc. Canth. hell. Hyos.
- . motion,
- during: (8) Bell. Bry. calc. Ph-ac. Phos. ruta staph. tarent.
- amel.: (1) Rhus-t.
- . noise,sudden: (3) caust. puls. sep.
- . old people,in: (13) All-c. aloe apis Ars. Aur-m. cann-s. Cic. gels. Iod. kali-p. phos. Sec. Thuj.
- men with enlarged prostate: (10) All-s. Aloe Cic. dig. Iod. kali-p. nux-v. Pareir. Sec. Thuj.
- . pregnancy,during: (11) **ARS.** bell. canth. caust. clem. kreos. Nat-m. podo. **PULS.** Sep. Syph.
- . putting hands in cold water: (1) Kreos.
- . retain,great pain on attempting to: (1) uran-met.
- . riding,while: (1) thuj.
- . rising from a seat,when: (2) Mag-c. spig.
- . running,while: (3) Am. Bry. Lac-d.
- . sitting,while: (6) Caust. Nat-m. **PULS.** Rhus-t. Sars. stram.
- retention while standing: (1) Caust.

URINE

Micturition

- urging

- . in general: (97) **ACON.** agar. alum. am-c. ambr. ant-c. *Ant-t. Arg-met.* arg-n. Am. ars. asar. **BAR-C.** **BELL.** borx. *Bov.* **BRY.** calc. calc-p. **CANTH.** **CAPS.** carb-an. **CARB-V.** **CAUST.** cham. chin. chinin-s. chlor. *Cic.* cina **COCC.** **COLCH.** coloc. con. *Cop.* cycl. **DIG.** dros. **DULC.** **EUPH.** **GRAPH.** **GUAJ.** **HELL.** hep. *Hyos.* **IGN.** ip. kali-bi. **KALI-C.** kali-n. *Kreos.* *Lach.* *Led.* **LYC.** mag-c. *Mag-m.* *Mang.* meny. meph. **MERC.** **MERC-C.** **MUR-AC.** *Nat-c.* *Nat-m.* *Nit-ac.* **NUX-V.** par. petr. **PH-AC.** **PHOS.** plb. **PULS.** **RHUS-T.** **RUTA** **SABAD.** **SABIN.** *Samb.* sang. **SARS.** *Sec.* sel. **SEP.** *Sil.* **SPIG.** *Spong.* **SQUIL.** *Stann.* **STAPH.** stram. **SULPH.** tarax. *Thuj.* verat. verb. *Viol-t.* zinc.
- . morning, early: (1) ambr.
- . afternoon: (1) bell.
- . evening: (3) am-c. bell. sabad.
- . night: (56) **ALUM.** **AM-C.** am-m. anac. ant-t. arg-n. **ARN.** **ARS.** *Bar-c.* **BELL.** borx. bov. *Bry.* **CALC.** calc-p. carb-an. carb-v. **CAUST.** **CINA** coff. con. *Cupr.* daph. dig. *Dros.* **GRAPH.** *Hep.* iod. *Kreos.* lac-c. *Lach.* mag-c. mag-m. meph. *Merc.* nat-c. **NAT-M.** **NUX-V.** *Op.* petr. ph-ac. **PULS.** **RHUS-T.** *Ruta* sabin. samb. sang. sars. **SEP.** **SIL.** spig. **SQUIL.** *Stram.* sul-ac. **SULPH.** thuj.
- and day: (7) carb-v. kali-c. mag-m. *Merc.* nat-c. nat-m. sars.
- abdomen
 - burning in, with: (1) lach.
 - pain in, with: (2) lach. puls.
- anxiety, with: (6) **ACON.** *Agn.* carb-v. *Cham.* graph. sep.
- bladder
 - pain in, with: (7) fl-ac. hell. nux-v. puls. rhod. ruta sul-ac.
 - pressure on, with: (1) squil.
- coffee, agg.: (1) ign.
- deficient: (1) stann.
- face, with pale: (1) ph-ac.
- heat, with: (1) ph-ac.
- hypogastric pain, with: (1) rhod.
- ineffectual, fruitless: (86) **Acon.** agar. all-c. am-c. anac. ang. ant-c. ant-t. *Am.* ars. aur. aur-m. *Bell.* **BORX.** brom. bry. cact. calc. *Camph.* **CANTH.** caps. carb-ac. **CARB-V.** **CAUST.** *Cham.* *Chel.* chin. cic. clem. coc-c. coff. *Colch.* *Coloc.* cop. crot-h. *Cupr.* **DIG.** dros. **DULC.** euph. fl-ac. graph. **HELL.** hep. *Hyos.* *Iod.* *Kali-c.* kali-chl. lach. laur. *Led.* *Lyc.* *Mag-m.* *Meny.* **MERC.** mur-ac. *Nit-ac.* nux-m. **NUX-V.** op. pareir. **PETR.** *Ph-ac.* *Phos.* *Plb.* prun. **PULS.** **RHUS-T.** **RUTA** sabad. sabin. **SARS.** sec. **SEP.** *Sil.* *Spong.* **STAPH.** stram. **SULPH.** ter. thuj. uran-n. **VERAT.** verb. viol-t.

- in morning: (1) *Alum.*
- . irresistible, hurried: (29) **ALOE** ambr. ant-t. apis bar-c. **BELL.** borx. *Bry.* *Calc.* carb-an. **CHIN.** con. dig. **IGN.** *Kreos.* mag-c. **MERC.** *Nat-m.* **NIT-AC.** **PH-AC.** phos. prun. **PULS.** **RHUS-T.** **RUTA** spong. **SQUIL.** sulph. thuj.
- lifting, agg.: (1) bry.
- . lumbar pain, with: (1) lach.
- . lying on back, when: (1) puls.
- . painful: (10) **Acon.** am. *Canth.* cocc. plb. **PULS.** sabin. sec. spig.
- . painless: (2) cycl. **TARAX.**
- . perineum, with pain in: (1) ant-t.
- . profuse discharge, with: (30) **ALUM.** **ARG-MET.** **ARS.** **BAR-C.** **BELL.** **CARB-AN.** chin. chinin-s. chlor. cina colch. cycl. **HELL.** **KALI-N.** **KREOS.** lac-c. **LACH.** **MUR-AC.** **NAT-C.** **NAT-M.** **RHUS-T.** *Samb.* *Spig.* spong. squil. **STANN.** *Tarax.* *Thuj.* *Verb.* *Viol-t.*
- . scanty discharge, with: (48) acon. agar. am-c. anac. ang. ant-c. ant-t. aur. aur-m. *Bell.* brom. bry. **CARB-V.** *Caust.* chel. *Colch.* *Cupr.* **DIG.** dros. euph. fl-ac. *Hell.* *Hyos.* *Iod.* *Kali-c.* lach. *Led.* *Mag-m.* *Meny.* **MERC.** *Nit-ac.* **NUX-V.** *Petr.* *Ph-ac.* *Phos.* plb. **PULS.** **RHUS-T.** **RUTA** sabad. sabin. sars. sil. **SPONG.** **STAPH.** **SULPH.** **VERAT.**
- . standing, when: (2) phos. Sars.
- . sudden: (17) **ALOE** ambr. *Borx.* *Bry.* *Canth.* *Kreos.* *Merc.* nat-c. *Pareir.* petros. phos. *Rhus-t.* rumx. ruta sabin. *Squil.* sulph.
- . thirst, with: (4) ant-t. caust. ph-ac. verat.
- urination
 - burning: (12) bapt. **CANTH.** *Caps.* ign. *Nux-m.* psor. puls. rheum sabin. **STAPH.** *Verat.*
 - difficult: (13) ars. **BELL.** calc. **CANTH.** con. dig. euph. mag-m. **NUX-M.** plb. ran-b. sec.
 - dribbling, involuntary: (17) apis am. *Bar-c.* bell. *Canth.* dig. *Gels.* *Mag-m.* mag-p. *Op.* *Petr.* **PULS.** *Sel.* *Staph.* thuj. *Uran-n.* zinc.
 - senility, of: (6) arg-n. *Bar-c.* bry. *canth.* *Con.* *Rhus-a.*
 - drinking, after: (2) phos. seneg.
 - drop by drop (strangury): (63) **Acon.** agar. ant-c. apis **ARN.** ars. **BELL.** bov. calc. *Camph.* **CANTH.** *Caps.* carb-an. *Caust.* cham. *Chin.* **CLEM.** coff. *Colch.* *Coloc.* *Con.* cop. *Dig.* dros. **DULC.** *Euph.* *Graph.* guaj. *Hell.* kali-c. *Kreos.* *Led.* lyc. mag-m. *Merc.* **MERC-C.** nit-ac. *Nux-m.* **NUX-V.** op. pareir. **PETR.** *Ph-ac.* plb. *Prun.* **PULS.** rheum *Rhus-t.* *Ruta* *Sabin.* samb. *Sars.* sec. *Sil.* *Spig.* spong. **STAPH.** *Stram.* **SULPH.** *Ter.* *Thuj.* zinc.
 - remained behind, as if: (1) kali-bi.
 - frequent, too: (71) **Acon.** am-c. anac. *Ant-c.* **APIS** **ARG-MET.** am. ars. **AUR.** **BAR-C.** *Bell.*

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Your bladder matters!

THANK YOU