

Lumitaanka Xakamaynta Kaadida ee Haweenka

Urinary Incontinence in Women

Urinary incontinence is a common problem for many women. The muscles and nerves that help to hold or release urine can get weak or have problems. It can be caused by childbirth, menopause, aging, nerve disease, stroke, surgery, injury, infection and medicines. It can also be a side effect of other health conditions, such as diabetes or cancer. Testing and treatment can help to improve your quality of life.

Signs of Incontinence

- Urine leaks after a cough, laugh, sneeze or physical activity
- The sound of water running or touching water causes an urge to urinate
- Sudden urge to go to the bathroom before leaking urine
- Not able to empty bladder when going to the bathroom
- Needing to empty bladder 8 or more time a day or more than 2 times at night

Tell your doctor if you have had:

- Kidney or bladder stones or calcium deposits. These can block the flow of urine from the bladder to urethra.
- Polyps or small growths in the vaginal area. They can press on the urethra and lead to incontinence.

Luminta xakamaynta kaadida ee kaadi-mareenka waa dhibaato caan ku ah haween badan. Muruqyada iyo neerfayaasha gacan ka geysanaya inay celiyaan ama sii daayaan kaadida waxay noqon karaan kuwo daciif ah ama waxay yeelan karaan dhibaatooyin. Waxaa sababi kara dhalmada, hakadka caadada, gabowga, cudurka neerfayaasha, istaroogga, qalliinka, dhaawaca, caabuqa iyo daawooyinka. Waxay sidoo kale noqon kartaa waxyeelooyinka gaarka ah ee xaaladaha kale caafimaad, sida sonkorow ama kansar. Baaritaano iyo daaweyn ayaa gacan ka geysan kara kobcinta tayada noloshada.

Calaamadaha Cudurka Luminta Xakamaynta kaadida

- Kaadida oo kaa fakata kadib qufaca, qosolka, hindhisada ama dhaqaajinta jirka
- Sanqadha biyo socda ama taabashada biyo ayaa waxay kugu dhalineysaa rabitaan ah inaad kaadiso
- Rabitaan degdeg ah oo ah inaad musqusha aado kahor intaadan kaadinin
- Inaadan aboodin inaad faarujiso kaadiheysta markii aad musqusha aadayso
- Inaad u baahato inaad kaadiheysta faarujiso 8 jeer ama in ka badan maalintii ama in ka badan 2 jeer habeenkii

U sheeg dhakhtarkaaga haddii aad qabto:

- Dhagxaha ama kalshiyam oo ku jira kilyaha ama kaadi haysta. Kuwaani waxay xanibi karaan socodka kaadida ee timaada kaadiheysta ilaa kaadi mareenka.
- Buro ama burooyin yaryar oo ku yaal agagaarka xubinta taranka dumarka. Waxay u gudbi karaan kaadi-mareenka oo ay u horseedi karaan in xakamaynta kaadida ay lunto.

Types of Incontinence

- **Temporary:** Urine leaks are caused by a sudden change in health or medicine. It can be a medicine side effect, infection in the urinary tract or bladder, or other health reason that will go away with time or short-term treatment.
- **Stress:** Urine leaks repeatedly after a cough, laugh, sneeze or other physical activity. The muscles that control urine leak with stress or pressure. It may get worse the week before a menstrual period.
- **Urge:** The muscles and nerves around the bladder contract and release urine when it is not supposed to. Urine leaks happen when there is a sudden feeling or need to urinate. This can happen during sleep, after drinking water, or when you touch water or hear it running.
- **Mixed:** A person has both stress and urge incontinence.
- **Overflow:** The bladder gets too full and urine leaks. There may be a problem with the muscle around the bladder blocking the emptying of the bladder when going to the bathroom. Overflow is often caused by urine leaks from too much pressure on the bladder.
- **Overactive bladder:** The need to empty the bladder often, even when there may be very little urine stored.

Noocyada Cudurka Luminta Xakamaynta Kaadida

- **Kumeelgaar:** Kaadida oo kaa fakata waxaa keena isbedel degdeg ah oo xagga caafimaadka ah ama daawada. Waxay noqon kartaa waxyeellooyinka gaarka ah ee dawooyinka, infekshan ku dhaca kaadi mareenka ama kaadiheysta, ama sabab caafimaad oo kale oo ku baabi'i doonta wakhti kadib ama daaweyn waqti-gaaban ah.
- **Cadaadis:** Kaadida oo kaaga fakata si soo noqnoqosho ah kadib qufaca, qosolka, hindhisada ama dhadhaqaaq kale oo jirka ah. Muruqyada xakameynaya kaadida ayaa ku dhaca walaac ama cadaadis. Waxay ka sii darin kartaa usbuuca kahoreeya caadada.
- **Rabitaanka:** Muruqyada iyo neerfayaasha ee ku xeeran kaadiheysta ayaa sii deynaya kaadida xilli aysan munaasib ahayn. Kaadida oo kaa fakata waxay dhacdaa marka uu jiro dareen deg-deg ah ama aad u baahan tahay inaad kaadiso. Tani waxay dhici kartaa xilliga hurdada, ka dib markaad cabto biyo, ama markaad taabato biyo ama aad maqasho biyo qulqulaya.
- **Isku-jir:** Qofka markuu qabo cadaadiska iyo rabitaanka kaadida degdegga ah labaduba.
- **Xad dhaaf:** Kaadiheysta ayaa aad u buuxsamaya kadibna kaadida ayaa qofka ka fakata. Waxaa dhibaato ka jiri kara dhinaca muruqyada ku hareereysan kaadiheysta oo ka horjoogsanaaya faarujinta kaadiheysta markii qofka uu musqusha aado. Qulqulka badanaa waxaa sababa kaadida oo soo daadata cadaadis badan oo kaadi heysta saaran awgeed.
- **Kaadiheysta xad dhaafka u firfircoon:** Baahida ah in la faarujiyo kaadiheysta had iyo jeer, xitaa haddii kaadi aad u yar ay ku jirto.

Testing

If you have signs of incontinence, call your doctor. You will have a physical exam and be asked questions about how often and when leaks occur. You may have one or more of these tests:

- Pelvic exam: Checks for problems with the urethra, rectum and vagina.
- Urine test: Urine is checked for infection and the amount of urine passed when emptying the bladder is measured.
- Bladder tests: Pressure tests check the muscles and nerves. A thin tube or catheter may be used to collect urine during a bladder test.
- Ultrasound: Pictures of the organs and muscles in the lower abdomen are taken using sound waves.
- Cystoscopy: A thin tube with a camera on the end may be used to look into the urethra and bladder.

Treatments

Based on the physical exam and testing, you may have one or more of these treatments:

- Kegel exercises, also known as pelvic floor exercises: They strengthen the muscles that control urine flow. To find these muscles, try to stop your urine midstream. Squeeze the muscles for just a second or two and then release. These are the muscles Kegels strengthen. Do these exercises after you have emptied your bladder.
1. Tighten the muscles. Hold the muscles for 5 or 10 seconds. If you can only keep the muscles tight for 1 or 2 seconds, work up to holding them longer over time.

Baaritaan

Haddii aad qabto calaamadaha cudurka Luminta Xakamaynta kaadida, wac dhakhtarkaaga. Waxaa lagaa qaadi doonaa baaris jireed waxaana lagu weydiin doonaa su'aalo ku saabsan inta jeer iyo goorta ay kaadida kaa fakato. Waxaa laga yaabaa inaad hesho hal ama in ka badan oo baaritanada ah.

- Baaritaan miskaha: Baaritaanada dhibaatooyinka kaadimareenka, malawadka iyo xubinta taranka dumarka.
- Baaritaanka kaadida: Kaadida waxaa laga baaraa infekshan oo cadadka kaadida ee soo baxda marka la faarujinayo kaadiheysta ayaa la cabbiraa.
- Baaritaanada kaadihaysta: Baaritaanada cadaadiska waxaa lagu hubiyaa muruqyada iyo neerfayaasha. Tuubbo dhuuban ama tuubada kateetarka ayaa loo isticmaali karaa in lagu ururiyo kaadida xilliga baaritaanka kaadiheysta.
- Raajato: Sawirada xubnaha iyo muruqyada caloosha hoose ayaa laga qaadaa iyadoo la adeegsanayo mowjado dhawaaq ah.
- Qalliinka Kaadihaysta: Tuubbo dhuuban oo kamarad ka leh dhamaadka ayaa loo isticmaali karaa in lagu eego kaadi mareenka iyo kaadi haysta.

Daaweynta

Iyada oo lagu salaynaayo baaritaanka jirka iyo baaritaanada kale, waxaa suuragal ah inaad qaadato mid ama in ka badan oo daaweyntan ah:

- Jimicsiyada Kegel, oo sidoo kale loo yaqaan jimicsiga miskaha: Waxay xoojiyaan muruqyada xakameynaya socodka kaadida. Si aad u hesho muruqyadan, iskuday inaad ku joojiso kaadidaada meel dhexe. Tuuji muruqyada illaa hal ama laba ilbiriqsi kadibna sii daa. Kuwaani waa muruqyada Kegels ay xoojiso. Samee jimicsiyadaan kadib markaad faarujiso kaadiheystaada.
1. Adkee murqaha. Haay murqaha 5 ama 10 ilbiriqsi. Haddii aad kaliya muruqyada adkayn karto 1 ama 2 ilbiriqsi, ka shaqee sidii aad muddo dheer u hayn lahayd.

2. Then relax the muscles.
3. Repeat 10 to 20 times, at least 3 times a day.

You will notice more strength over time. Tell your doctor if Kegels do not help your condition.

- Electrical stimulation: A small non-painful electric pulse is used to help calm the nerves and muscles of the bladder.
 - Biofeedback: You learn to control the muscles of your bladder based on measurements from devices.
 - Medicines: Different drugs may be used. Talk to your doctor and pharmacist about any risks and benefits of the medicines.
 - Behavior modification: Some behaviors can make the urine leaks more of a problem. Reduce the frequency of leakage by losing weight if overweight, taking in less caffeine, and stopping smoking.
 - Bladder retraining program: You learn to control the flow of urine over several weeks or months. A journal is used to record urges and leaks.
 - Pessary: A ring is placed into the vagina to put pressure on the opening of the bladder. The pressure helps control urine leaks. It may be used instead of surgery.
2. Ka dibna deji murqaha.
 3. Ku celi 10 illaa 20 jeer, ugu yaraan 3 jeer maalintii.
- Waxaad dareemi doontaa xoog badan waqti kadib. U sheeg dhakhtarkaaga haddii Kegels aanu kaa caawinaynin xaaladdaada.
- Kicinta loo isticmaalo korantada: Garaacyo yar oo aan xanuun lahayn oo koronto ah ayaa loo isticmaalaa in lagu caawiyo dejinta neerfayaasha iyo murqaha kaadiheysta.
 - Tababarka Jirka: Waxaad baran doontaa sida loo xakameeyo muruqyada kaadiheystaada iyadoo lagu saleynayo cabbiraadaha aaladda.
 - Daawooyinka: Daawooyin kala duwan ayaa la isticmaali karaa. Kala hadal dhakhtarkaaga iyo farmashiistaha wixii ku saabsan halista iyo faa'iidooyinka daawooyinka.
 - Wax ka bedelidda dabeecadda: Dabeecadaha qaar ayaa kaadida oo kaa fakata mid ka sii darta. Yaree inta jeer ee kaadidu ay kaa fakato adiga oo iska yareeynaaya culeyska/miisaanka haddii miisaankaagu uu xad dhaaf yahay, iska yareey qaadashada kafeynka, oo jooji sigaar cabista.
 - Barnaamijka dib u tababarida kaadiheysta: Waxaad baran doontaa sida loo xakameeyo qulqulka kaadida dhowr toddobaad ama bilood gudahood. Buug taarikheed ayaa loo isticmaalaa in lagu diiwaangeliyo baahiyaha iyo kaadi kaa fakashada.
 - Xanibida tubada xubinta taranka dumarka: Giraan ayaa la gelinayaa xubinta taranka dumarka si cadaadis loogu saaro duleelka kaadiheysta. Cadaadiska ayaa gacan ka geysanaya xakameynta fakashada kaadida. Waxaa loo isticmaali karaa halkii qaliinka lagu sameyn lahaa.

- **Injections:** The tissues around the bladder opening are injected with a substance that surrounds the opening to the bladder. This may need to be done again because the body slowly absorbs the substance.
- **Surgery:** If other treatments have not worked, surgery may be an option. The type of surgery can vary from an outpatient procedure to major abdominal surgery.
- **Duritaanada:** Unugyada ku xeeran kaadiheysta ayaa lagu durayaa walax ku xareeysmi doona duleelka kaadiheysta. Tani waxaa loo baahan karaa in mar labaad la sameeyo sababtoo ah jirku si tartiib ah ayuu u nuugaa walaxda.
- **Qalliin:** Haddii daweynada kale aysan shaqeynin, qalliinku wuxuu noqon karaa ikhtiyaar. Nooca qalliinka ayaa kala duwanaan kara laga bilaabo qalliinada bukaan-socodka ilaa qalliimada weyn ee caloosha.

Talk to your doctor or nurse if you have any questions or concerns.

La hadal dhakhtarka kaaga ama kalkaaliyahaaga haddii aad qabto wax suaal ah ama welwel ah.