

RISK FACTORS FOR OVERACTIVE BLADDER AND URINARY INCONTINENCE

	Men	Women
Age	Prevalence of OAB with urge incontinence increased with age from 0.3% to 8.9% in men, with a marked increase after 64yrs of age. In men 65yrs of age and older, the prevalence increased to 8.2% (65–74yrs) and 10.2% (≥ 75 yrs) [NOBLE study].	Prevalence of OAB with urge incontinence increased with age from 2% (18–24yrs) to 19.1% (65–74yrs) in women, with a marked increase after 44yrs of age [NOBLE study].
Chronic medical conditions	MS, spinal cord injury, diabetes, Parkinson's disease, stroke, dementia, impaired mobility, UTIs, smoking and obesity may cause bladder symptoms.	Same for women.
Medications	Diuretics, antidepressants, alpha-agonists, beta-antagonists, sedatives, anti-cholinergics, ACE inhibitors, alpha antagonists, calcium channel blockers, NSAIDs and other analgesics can all cause urinary tract symptoms.	Same for women.
Menopause and estrogen depletion	N/A	Menopause has been associated with a decrease in urethral mucosa vascularity and thickness, as a result of diminished estrogen production.
Pelvic surgery	Incontinence has been seen in men following surgical treatment for prostate cancer.	Hysterectomy may increase a woman's risk of incontinence.
Pregnancy and childbirth	N/A	Pregnancy and vaginal childbirth increase the risk of incontinence. Post-childbirth incontinence has been associated with the use of forceps, vacuum extraction, episiotomy, and pudendal anesthesia.
Prostate-related conditions	BPH, and prostatic obstruction secondary to BPH. Prostate cancer may also cause symptoms.	N/A
Race	The prevalence of OAB is 33.3% in African American (AA) men, 28% in Hispanic, 27% in Asian, and 26.3% in white men (EpiLUTS study). Similar trends were seen from the OAB-POLL study, with the highest prevalence in AA men (20.2%) compared to Hispanic (18.1%) or white (14.6%) men.	The prevalence of OAB is 45.9% in AA women, 43.4% in white, 42% in Hispanic, and 26.6% in Asian women (EpiLUTS study). Data from the OAB-POLL study showed a prevalence of 32.6% in AA women compared to 29.4% in white and 29% in Hispanic women. NHANES data on UI supports that AA women report the highest prevalence of urge-UI (11%) over white (7.5%) and Mexican-American (7.5%) women.

NOTES

Key: AA = African-American; EpiLUTS = Epidemiology of Lower Urinary Tract Symptoms; MS = multiple sclerosis; NOBLE = National Overactive Bladder Evaluation; OAB = overactive bladder; UI = urinary incontinence; UTIs = urinary tract infections

REFERENCES

- Milson I, Stewart W, Thuroff J. The Prevalence of Overactive Bladder. *American Journal of Managed Care*. 2000 Jul; 6 (11 suppl) S565-73.
- Newman DK. Managing and Treating Urinary Incontinence. Baltimore, MD: Health Professions Press; 2009.
- Reynolds WS, Fowke J, Dmochowski R. The Burden of Overactive Bladder on US Public Health; *Curr Bladder Dysfunct Rep*. 2016 Mar; 11(1): 8-13.
- Stewart WF, Van Rooyen JB, Cundiff GW, et al. Prevalence and Burden of Overactive Bladder in US. *World J Urol*. (2003) 20:327-336.