



QR code — Ivy Collaborative

IVY COLLABORATIVE HEALTHCARE

We help people Feel Good, Look Good & Function Well

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www.IvyCollaborative.com



IDENTIFYING & MANAGING STRESS INCONTINENCE

Self-Help, Traditional Approaches & Ivy Collaborative Support

1. What Stress Incontinence Can Feel Like

A cough, sneeze, laugh, jump, or heavy lift—and a leak. Stress incontinence is urine loss from sudden pressure on the bladder when the pelvic floor and urethral sphincter cannot hold the seal. It is different from urge incontinence (a sudden “have to go now” feeling). Many people start skipping workouts, wearing liners “just in case,” or feeling self-conscious in class, on a trail, or during intimacy. Childbirth, chronic cough, extra weight, pelvic surgery, and menopausal hormone change commonly weaken the support system. This is a mechanical, medical problem—not a hygiene failure—and it is treatable.

2. Self-Help Strategies

- Practice pelvic-floor (“Kegel”) lifts with correct form—squeeze up, don’t bear down
- Brace the pelvic floor before a cough, sneeze, or lift (“the knack”)
- Treat constipation and chronic cough; both load the pelvic floor
- Aim for a healthy weight to reduce downward pressure
- Limit bladder irritants if they worsen leaks (caffeine, carbonation, alcohol)
- Keep a simple leak log: activity, amount, pads used
- Know the myth: more Kegels help only if technique and muscle capacity are adequate
- See a clinician if leaks limit exercise, work, travel, or intimacy
- Get prompt care for burning, blood in urine, or fever—those are not stress incontinence

3. Traditional Medicine Options

- Primary-care or urogynecology/urology visit to confirm stress vs urge vs mixed leaks
- Rule out infection, medications, and other bladder conditions
- Supervised pelvic-floor physical therapy—often more effective than unsupervised Kegels
- Lifestyle measures: weight, cough, constipation, smoking cessation
- Discuss vaginal estrogen after menopause when appropriate
- Pessary fitting for selected patients who want a removable support device
- Surgery (e.g., mid-urethral sling) for selected candidates after shared decision-making
- Understand limits: home Kegels and pads manage many cases—and leave others still leaking or facing operative recovery
- Ask about non-surgical, FDA-cleared pelvic-floor strengthening

4. How Ivy Collaborative Can Help

- Emsella (BTL) — FDA-cleared HIFEM chair for urinary incontinence in women and men
- About 11,200 supramaximal pelvic-floor contractions in a 28-minute, fully clothed session—far beyond a typical Kegel set
- Typical course: 6 visits over about 3 weeks (often twice weekly); no downtime*
- Targets the weak support that lets pressure push urine out during cough, laugh, or exercise
- Clinical studies report fewer leaks, less pad use, and high patient satisfaction*
- Complements—not replaces—pelvic PT, hormone care, and specialist follow-up

5. Helpful Links

Self-Help	Traditional Medicine	Ivy Collaborative
niddk.nih.gov / bladder urologyhealth.org / SUI <i>Kegels • The knack • Weight • Cough</i>	mayoclinic.org (SUI) auanet.org / patients <i>Evaluation • Pelvic PT • Surgery options</i>	ivycollaborative.com — Emsella <i>Emsella • Schedule your consultation</i> <i>Physician-directed care with Dr. Jocelyn Bayliss, MD</i> <i>dual board-certified psychiatrist</i>

6. Contact Ivy Collaborative Healthcare

2100 Central Ave, Ste 6, Augusta, GA 30904 | 706.364.3461

Complimentary consultations available • Non-invasive pelvic-floor strengthening for stress leaks

You do not have to sit out the laugh, the workout, or the hike—support is available.



*Emsella (BTL) is FDA-cleared for urinary incontinence. Published HIFEM / Emsella studies report reductions in leakage episodes and pad use and high patient satisfaction; individual results vary. A typical course is six 28-minute sessions and may be individualized; maintenance every 6–12 months is often discussed. Not a substitute for evaluation of infection, blood in urine, or neurologic disease, and not a guarantee of avoiding surgery. Pacemakers, defibrillators, metal in the pelvis/hips, pregnancy, and certain implanted electronic devices are common contraindications—eligibility is determined after physician screening. Serving Augusta, Evans, Grovetown, Martinez, North Augusta, Harlem, and Richmond, Columbia, and Burke Counties.