

RISK FACTORS FOR OVERACTIVE BLADDER AND URINARY INCONTINENCE

	Men	Women
Age	The prevalence of symptoms increases significantly. In one study, incidence rose from 3.4% of men between the ages of 40 and 44, to 41.9% of men 75 years and older.	Prevalence also increases with age. In the same study, incidence increased from 8.7% of women between the ages of 40 and 44, to 31.3% of those 75 years and older.
Chronic medical conditions	Multiple sclerosis, spinal cord injury, diabetes, Parkinson's disease, stroke, dementia, and impaired mobility may cause bladder symptoms.	Same for women.
Medications	Diuretics, antidepressants, alpha-agonists, beta-antagonists, sedatives, anticholinergics, and 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	No studies have been done in men comparing race and incidence of OAB.	White women appear to be at higher risk for incontinence. Compared with black women, they may have a shorter urethra, weaker pelvic floor muscles, and a lower bladder neck.

NOTES

Newman, Health Professions Press, 2002; Brown 2000; Milsom 2001.