

## GLOSSARY OF TERMS

### *General Terms*

**Bladder:** a muscular organ that stores urine

**Catheter:** a small tube or straw used to empty the bladder

**Defecating:** passage of stool from the body, also known as “having a bowel movement”

**Pelvic Floor Muscles:** a group of muscles in the pelvis that support the vagina, uterus, bladder and rectum. Also known as the “levator muscles” or “kegel muscles”

**Prolapse:** when referring to the pelvic organs, the bulging or dropping of those organs into or outside the vagina

**Ureters:** a pair of tubes that deliver urine to the bladder from each kidney

**Urethra:** a short tube that delivers urine from the bladder out of the body

**Voiding:** passage of urine from the body. Also known as “urinating”

### *Diagnostic Tests*

**Cystoscopy** (“siss-toss-coh-pee”): using a lighted telescope to view the inside of the bladder

**Electrodiagnostic Testing (EMG):** a test that evaluates nerve and muscle function

**Intravenous Pyelogram (IVP):** an X-ray procedure that examines the kidneys, ureters, bladder and urethra

**Laproscopy:** a procedure that uses a small, lighted telescope to look inside the abdomen

**Manometry** (“man-ah-met-tree”): to measure the pressure inside a hollow organ, such as the anus, the vagina, or the bladder

**Post-void Residual:** the amount of urine left over in your bladder after a voiding attempt

**Urinalysis:** a test that evaluates chemicals and cells in the urine (ie suggests infection)

**Urine Culture:** a test that determines whether a urinary tract infection or “UTI” is present and, if so, what type of antibiotics might kill the offending bacteria

**Urodynamics** (“you-row-die-nam-icks”): a test that uses a small catheter hooked up to a computer to study the function of the bladder and urethra during leaking, filling, and emptying of the bladder

**Uroflowmetry** (“you-row-flow-met-tree”): a test that measures the flow and speed of your urine, when you use a special toilet in the office

### *Pelvic Floor Disorders*

**Constipation:** a common disorder, variably defined as a) infrequent bowel movements <3 per week, b) need to excessively strain to have a bowel movement, or c) hard stools. Sometimes associated with the need to “splint” or press against the vagina to start or help the passage of a bowel movement

**Cystocele** (“siss-toe-seal”): prolapse or bulging of the bladder into the vagina

**Dysuria** (“diss-your-ee-ah”): painful urination

**Enterocele:** prolapse or bulging of the small intestines into a space between the bladder and rectum and into the vagina

**Fecal Incontinence:** accidental loss of solid stool, liquid stool or gas from the anus

**Frequency:** the need to void more often than normal (more than every 2 hours or more than 7 times per day)

**Mixed Incontinence:** leakage of urine that happens as a “mix” of both stress incontinence and urge incontinence

**Nocturia:** to be awakened with the need to void two or more times a night

**Rectocele:** prolapse or bulging of the rectum into the vagina

**Stress Incontinence:** leakage of urine that happens as a result of activities that put “stress” on the bladder, usually in a sharp, sudden fashion, such as coughing, sneezing, laughing, lifting

**Urge Incontinence:** an involuntary loss of urine due to a bladder contraction squeezing out stored urine, usually preceded by a strong urge to void. Also known as “overactive bladder”

**Urinary Incontinence:** leakage of urine

**Uterine Prolapse:** prolapse or descent of the uterus into the vagina

### *Surgical Treatments for Stress Incontinence*

**Burch Repair:** a procedure done through an abdominal incision or through a laparoscope to re-support the bladder neck to the back of the pubic bone

**Neuromodulation** (“noo-row-mod-you-late-shun”) electronic stimulation of the nerves around the tailbone to treat overactive bladder, urinary retention, and urinary frequency. Also known as “Interstim”

**Periurethral Injections** (“perry-your-eeth-rall”): office injection of a material (ie collagen) next to the opening of the bladder in an effort to prevent stress incontinence. Also known as “bulking” injections

**Suburethral Sling:** placing a strap of material under the urethra to support it and prevent stress incontinence. The sling material can be natural (from your body, a donor, or an animal) or synthetic

**Suprapubic Catheter:** a catheter placed into the bladder through the low abdomen/pubis hair area, commonly used to drain the bladder after surgery

**Tension-free Vaginal Tape (TVT):** a special type of pre-cut suburethral sling that requires less invasive (small) incisions

### *Surgical Procedures to Correct Prolapse*

**Anterior Colporrhaphy** (“culp-oh-raff-ee”): a vaginal procedure to reduce a bulge due to a cystocele. Repair of the front wall of the vagina.

**Colpocleisis** (“culp-oh-cly-ee-siss”): a vaginal procedure that removes the vaginal skin and sews the vagina shut to prevent prolapse from coming back. If the uterus is left, then small channels will be left open to allow drainage of mucous or show abnormal bleeding. Once done, you will not be able to have sex again.

**Hysterectomy** (“his-tur-eck-toe-me): removal of the uterus through a vaginal, abdominal, or laparoscopic approach. Commonly associated with removal of one or both of the fallopian tubes and ovaries or “bilateral (both sides) salpingo-oophorectomy (BSO)”. When the uterus and cervix are removed, the hysterectomy is called “Total”. When the uterus is removed and the cervix is left, this is called a “supracervical hysterectomy”

**Illicoccygeus Fascia Colposuspension** (“ill-ee-oh-cox-idge-ee-us”): a vaginal procedure that suspends the top of the vagina to a strong covering on the pelvic floor muscle

**Paravaginal Repair:** a vaginal or abdominal procedure to reduce a bulge due to a cystocele. Repair of the front wall of the vagina.

**Posterior Colporrhaphy:** a vaginal procedure to reduce a bulge due to a rectocele. Repair of the back wall of the vagina

**Sacrocolpopexy** (“Say-crow-cull-poe-peck-see”): a procedure that can be done abdominally or vaginally to support the vagina to a ligament on the front side of the tailbone

**Sacrospinous Ligament Fixation** (“say-crow-spy-nuss”): a vaginal procedure that suspends the top of the vagina to a strong ligament in your pelvis

**Sphincteroplasty** (“ss-ff-ink-ter-oh-plast-ee”): a procedure to fix the muscles that surround the anus. When one muscles’ edge is wrapped around the other, it is called “Overlapping”

**Total Vaginal Mesh Procedure:** one of several types of vaginal procedures that places mesh along the front and back side of the vagina. Also known as “Elevate”, “ProLift”, or “Avaulta”

**Uterosacral Ligament Suspension** (“you-tur-oh-say-crawl”): a procedure to suspend the top of the vagina to the ligaments that usually hold it in place.

### ***Non-Surgical Treatment Options for Prolapse or Incontinence***

**Biofeedback:** a variety of techniques to let you know how well you perform at a given task

**Bladder Diet:** a list of dietary irritants to the bladder. Not meant to be a laundry list of what NOT to eat, these items have been shown to irritate some patients’ bladders. A trial-and-error process can help you eliminate potential irritants from your diet

**Bladder Training:** a treatment for urge incontinence, it is a design to teach a patient to urinate by a timetable, rather than wait for an urge to void. As the patient becomes more successful, the time between voids can be increased

**Fiber:** the part of your diet that the body cannot digest. It works in your large bowel and acts like small microscopic sponges to absorb excess fluid in your stool, or pull fluid into the colon to soften hard stool

**Medications:** there are a number of drugs that can be used to treat incontinence, or other pelvic floor disorders. Some commonly used medications for urge incontinence are Ditropan, Detrol, Sanctura, Vesicare and Enablex. Some commonly used medications for mixed incontinence are Imipramine and Estrogen

**Pelvic Floor Muscle Exercises:** a structured exercise program that involves contracting the pelvic floor muscles several times, every day. Also known as “Kegel” exercises

**Physical Therapy:** a group of treatments performed by a physical therapist, to help strengthen weak pelvic floor muscles, improve control of urine and stool, or improve pelvic prolapse. Other targeted exercise programs can be used to decrease vaginal pain and pain with intercourse, or learn to identify the pelvic floor muscles.

**Pessary** (“pess-ah-ree”) a device worn in the vagina like a diaphragm that is used to treat prolapse and/or support the urethra to treat stress incontinence or improve bladder emptying