**Genitourinary Distress: Common Side Effect**

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For genitourinary distress, standards of care are based on established evidence-based practice.

**Definition**
- Genitourinary distress is accidental urine leakage that can dampen underwear or saturate clothes. It is a sense of urgency, frequent urination, and/or pain or discomfort when urinating.

**Incidence**
- Genitourinary distress is found in 35%–75% of patients with prostate cancer.
- It is also associated with hormonal changes because of endocrine therapy or menopause, radiation therapy to the pelvis, and pelvic surgery, which weakens muscles.

**Assessment**
- Evaluate for stress, overflow, or urge incontinence.
- Perform a patient history and physical examination.

**Prevention**
- Recommend weight loss if overweight or obese.
- Advise to avoid alcohol and caffeine as well as spicy foods and foods high in acid.
- Recommend exercises to strengthen bladder muscles (e.g., Kegel exercises).
- Suggest good toilet habits, such as scheduled toilet trips, learning to lengthen the time between urges to use the toilet, and managing fluid intake (e.g., limiting fluids to 2 L per day, reducing the intake of fluids before bedtime).

**Interventions and Management**
- Encourage pelvic floor muscle strengthening, ideally with a physical therapist.
- Encourage bladder training.
- Suggest medications as treatment.
- Recommend surgery as indicated.
- Suggest the use of incontinence products.

**Agents and Interventions to Avoid**
- Recommend limiting daily intake of carbonated drinks, alcohol, tea, and coffee to avoid bladder irritation.

**Evidence-Based Resources for Providers**

**Evidence-Based Resources for Patients and Family**

**REFERENCES**

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