“Costs of UI total $27.9 billion per year, which includes $14 billion in non-medical costs (pads, laundry, and care taking) and $13 million in medical costs. Of these medical costs, only 8% is spent on evaluation, while 92% is related to UI sequelae such as falls, UTI, skin breakdown, prolonged acute care stays, and increased SNF admissions.”


“A meta-analysis of nine studies investigating falls and urinary incontinence in community dwelling of older people showed the odds of falling were increased in the presence of urgency incontinence and mixed incontinence.”


“Urinary incontinence and both urge and stress incontinence were positively related to falls. The larger the volume of urine lost, the greater the risk of falls. Falls were associated with the presence of urinary symptoms, physical limitations and having a poorer quality of life in respondents with urinary incontinence.”