Appendix J: Medications That Can Cause Urinary Incontinence in Persons

To search the uses and side effects of specific medications, please visit the Government of Canada's Drug Product Database at: https://health-products.canada.ca/dpd-bdpp/index-eng.jsp

MEDICATIONS	EFFECTS ON CONTINENCE
Alpha adrenergic agonists	 Increase smooth muscle tone in urethra and prostatic capsule, and may precipitate obstruction, urinary retention and related symptoms.
Alpha adrenergic antagonists	 Decrease smooth muscle tone in the urethra and may precipitate stress urinary incontinence in women.
Angiotensin converting enzyme (ACE) inhibitors	 Cause chronic cough that can exacerbate stress urinary incontinence.
Anticholinergics	 May cause impaired emptying, urinary retention and constipation that can contribute to urinary incontinence.
	 May cause cognitive impairment and reduce effective toileting ability.
Antispasmodics	 May cause urinary retention.
Beta blockers	 May cause urinary retention.
Calcium channel blockers	 May cause impaired emptying, urinary retention and constipation that can contribute to urinary incontinence.
	 May cause dependent edema, which can contribute to nocturnal polyuria.
Cholinesterase inhibitors	 Increase bladder contractility and may precipitate urgency urinary incontinence.
Diuretics	Cause diuresis and precipitate urinary incontinence.
Lithium	■ Polyuria due to diabetes insipidus.
Opioid analgesics	 May cause urinary retention, constipation, confusion and immobility, all of which can contribute to urinary incontinence.

MEDICATIONS	EFFECTS ON CONTINENCE
Psychotropic drugs, sedatives, hypnotics, antipsychotics, histamine1 receptor antagonists	May cause confusion and impaired mobility and precipitate urinary incontinence.
Selective serotonin re-uptake inhibitors	 Increase cholinergic transmission and may lead to urinary incontinence.
Sodium-glucose cotransporter 2 (SGLT2) inhibitor	 Glycosuria and polyuria, and increased propensity for urinary tract infections.
Others (gabapentin, glitazones, non-steroidal anti-inflammatory agents)	 Can cause edema, which can lead to nocturnal polyuria and cause nocturia and night-time urinary incontinence.

Source: Adapted by the expert panel from: Abrams P, Cardozo L, Wagg A, et al., editors. Incontinence [Internet]. 6th ed. Bristol (UK): ICI Books; 2017. Chapter 11, Incontinence in frail older persons; p. 1323-4. Available from: https://www.ics.org/publications/ici-6/Incontinence-6th-Edition-2017-eBook-v2.pdf