**MEDICATIONS AFFECTING THE GI AND GU SYSTEMS**

|  |  |
| --- | --- |
| **Prescription and Over-the-Counter Meds** | **Meds Impacting Incontinence** |
| **ASA** – risk of GI bleed  **Antacids** – use indicates GI discomfort; antacids can interfere with absorption of other meds  **Laxatives** – use signals problems with constipation; excessive use contributes to dehydration, damage to muscle function of bowel, kidney stones/kidney damage  **Anticholinergics** – decreased secretions, slowed motility; sometimes used for overactive bladder  **Antiparkinsonism agents** – dry mouth, nausea/upset stomach, vomiting, ABD pain, cramps, constipation  **Hormone replacement therapy** – can contribute to IBS, urinary incontinence  **Opioids** – constipation; urinary retention & overflow incontinence | **Diuretics** – increases urgency/frequency; can cause inflammation of bladder  **Anti-hypertensives** – relaxation of urethral muscles  **Antianxiety drugs/sedatives**- can slow motility and worsen urge incontinence; weaken external sphincter  **Antipsychotics** – slow motility; contributes to urge incontinence  **Antidepressants; Antihistamines, Calcium Channel Blockers, & Opioids** – interfere with bladder contraction; worsen constipation; can cause urinary retention and overflow incontinence  **Alpha agonists** – tightens urinary sphincter; and cause urinary retention and uncontrollable leakage d/t overflow  **Alpha blockers** – relaxes urinary sphincter and urethra; can contribute to stress incontinence |
| **OTHER SUBSTANCES AFFECTING URINARY INCONTINENCE** | |
| Alcohol  Caffeine  Decaffeinated coffee/tea  Artificial sweeteners | |