

# ACT Adjustable Balloons (for Women)

WARWIKI

Patient Information · Two adjustable balloons that support the urethra for stress leakage

**ACT (Adjustable Continence Therapy)** is a small, **adjustable** implant for women with **stress urinary incontinence** — leaking with coughing, laughing, lifting, or exercise. Two tiny silicone balloons are placed on either side of the urethra, near the bladder neck, to gently support it and improve control. Like its male counterpart (ProACT), the balloons can be **fine-tuned in the office** after surgery.

## How It Works

Stress leakage happens when the support and closing pressure under the urethra is weak. The two balloons add gentle, adjustable support beside the urethra so it stays closed during effort — **without** squeezing it shut completely. Each balloon connects to a small **port** under the skin of the labia, which your surgeon uses to adjust the fill.

## Is It Right for Me?

- An option for **stress urinary incontinence**, often considered when a previous incontinence surgery hasn't worked or the closing muscle is weak (ISD)
- Good if you want a minimally invasive, **adjustable, reversible** option
- **Availability varies by country** — it is used at specialized centers and is not offered everywhere; ask your surgeon whether it's available where you are
- Less suited to leakage driven mainly by **prolapse** or an **overactive bladder**

## LEARN THE TERMS

### Stress incontinence

Leaking with coughing, laughing, lifting, or exercise.

### Bladder neck

Where the bladder meets the urethra (the drainage tube).

### Balloon

A small silicone balloon that adds gentle, adjustable support.

### Port

A tiny valve under the labial skin used to adjust the balloon.

### Titration

Fine-tuning the balloon fluid over several office visits.

### ISD

Intrinsic sphincter deficiency — a weak urethral closing muscle.

**WILL IT HURT?** The balloons are placed during a **short operation** under anesthesia (general or spinal, or local with sedation), usually as a **day procedure** through small punctures near the vaginal opening — no large cut. You may feel soreness and swelling for a few days. The later office adjustments are quick and use only a small needle at the port.

## How It's Done

- 1 Under anesthesia, using **X-ray or ultrasound** for guidance, the surgeon places one balloon on **each side** of the urethra near the bladder neck through small punctures beside the vaginal opening.
- 2 The connecting tubes are run to **two ports** under the skin of the labia.
- 3 The balloons start nearly empty and are left to heal.

## Adjusting the Device

- A few weeks later, your team adds a little fluid through the labial port **in the office** — a quick needle stick, no surgery.
- Repeated over several visits until you have good control **without trouble emptying**.
- Adjustable up or down anytime; the whole device can be **removed** if needed.

## After

- Mild soreness, swelling, or bruising for a few days; avoid heavy lifting and strenuous activity briefly.
- Leakage improves **gradually** as the balloons are tuned — not always right away.
- Tell any future surgeon or imaging team you have the implant.

### Call your team if you have:

- **Trouble urinating** or can't pass urine (a balloon may be too full, or swelling)
- Fever, increasing pain, redness, or drainage at a site (possible infection)
- New vaginal discomfort or discharge, or blood in the urine (possible erosion)

## THREE THINGS TO REMEMBER

1. ACT uses two adjustable balloons to support the urethra and reduce stress leakage — minimally invasive and reversible.
2. It's placed through small punctures, then fine-tuned in the office over several visits via a labial port.
3. Often used for recurrent leakage or a weak sphincter; availability varies by country — call right away if you can't urinate or have signs of infection.