Agents that work with and activate the adrenergic receptors include alpha- and beta-adrenergic agonists. Agents that increase neurotransmission in endogenous chemicals such as epinephrine and norepinephrine include amphetamines, cocaine, methylenedioxymethamphetamine (MDMA), tyramine, nicotine, caffeine, and methylphenidate. Agents that exhibit aspects of both of these modes include ephedrine and pseudoephedrine.

[0030] Adequate treatments for incontinence associated with sexual activity are currently lacking, therefore long-lasting, minimally invasive methods of treatment are desirable.

SUMMARY

[0030a] In one aspect, there is provided the use of a botulinum toxin type A in the manufacture of a medicament for treating or preventing incontinence occurring during orgasm following a surgical procedure, wherein the medicament is to be administered to the bladder of a patient.

[0030b] In another aspect, there is provided the use of a botulinum toxin type A and an anticholinergic drug in the manufacture of a medicament for treating incontinence occurring during orgasm, wherein the botulinum toxin is to be administered to the bladder of a patient, and wherein the anticholinergic drug is to be administered to the patient.

[0031] Embodiments of the invention include methods of treating incontinence, including urinary incontinence, associated with sexual activity using a botulinum toxin. In embodiments the incontinence treatment can comprise treatment of females with climacturia who also have detrusor overactivity, such as, for example, OAB, or NDO, or the like. In embodiments, the OAB or NDO can be state-dependent, *i.e.* onlypresent at, for example, penetration, or orgasm, or the like. In embodiments the incontinence treatment can comprise treatment of females with climacturia who also have stress incontinence. In certain embodiments the incontinence treatment can comprise treatment of females with climacturia who do not also have demonstrated bladder or outlet disorders. In certain embodiments the incontinence treatment can comprise treatment of males who do not also have demonstrated bladder or outlet disorders. In embodiments the incontinence can occur before, during, or after orgasm. In embodiments the incontinence can occur before, during, or after penetration. In embodiments, the botulinum toxin is administered to, for example, the bladder, or the like. In embodiments the toxin is administered, for example, via injection, or transdermally, or via instillation, or the like.

[0032] Embodiments include a method of treating post-surgical incontinence associated with sexual activity comprising administering a therapeutically effective amount of a botulinum toxin to a patient in need thereof, thereby treating the incontinence associated with sexual activity. In embodiments the incontinence associated with sexual activity occurs following a surgical procedure, such as, for example, for a prostate disorder. In embodiments the surgical procedure is selected from the group consisting of radical prostatectomy, laparoscopic radical prostatectomy, transurethral resection of the prostate, transurethral microwave therapy, transurethral needle ablation, and cryosurgery. In embodiments, the botulinum toxin is administered to, for example, the prostate, the bladder, or a combination thereof, or the like. In embodiments the toxin is