

The overactive bladder

Information for patients

Introduction

Many people experience urinary problems. Some common complaints include an urge to go to the toilet quickly; frequency of going to the toilet and sometimes leakage of urine before you get there.

This leaflet provides information for those people who experience any or all of the above symptoms. If you have any further questions please contact the numbers on the back of this leaflet.

Understanding bladder control

The bladder is a muscular, stretchy bag which acts as a reservoir to store urine. When it is convenient the muscle contracts and urine is passed out. Bladder emptying is controlled by messages from the brain passing down the spinal cord and along the nerves. This gives us time to find a toilet, remove our clothing and sit down. Only then should the bladder contract and empty itself.

The bladder can hold between 300 and 600mls of urine, it is normal to pass urine up to seven times during the day and once at night.

The overactive bladder

- Overactive bladder is a common condition which occurs when the bladder contracts suddenly, without you having control, and when the bladder is not full.
- There is a strong desire or urgency to get to the toilet and the bladder may empty without control from the brain.
- In some people, bladder control is never fully achieved. They may have had problems as children with bed-wetting or being unable to 'hold on' when needing the toilet.
- In others the control is lost as they get older or have a history of urine infections or it may occur at times of emotional stress.
- We are not sure why loss of bladder control occurs. Usually there is no disease in the bladder itself, or in the brain or nerves.

Symptoms of an overactive bladder

- **Increased frequency** of visiting the toilet more than seven times during the day.

- **Urgency** when the bladder feels full, it has to be emptied quickly. You are not able to put off going to the toilet.
- Only **small amounts of urine are passed** even though the bladder feels full.
- **Leakage of urine** occurs if a toilet cannot be reached quickly.
- Symptoms may be triggered by putting your key in the front door, running water, cold weather, anxiety, drinking alcohol or sexual activity.
- **Nocturia** means waking to go to the toilet more than once at night.

Having an overactive bladder may change your lifestyle so that you can cope with the symptoms. For example you may choose to only wear dark clothing to disguise leakage; or you may carry a spare set of clothing. You may avoid social activities, going to the theatre or doing some of the pleasurable things of life for fear of embarrassment. These coping strategies really don't address the problem.

Treatment

The overall aim is to reduce the frequency that you visit the toilet. Research proves that bladder retraining is an effective treatment, this is the main way in which you can help yourself. It has no side effects but does take determination and will power.

Bladder diary

It is very helpful if you keep a bladder diary. In the diary make a note of the times you pass urine, and the amount (volume) you pass each time. Also make a note of any times that you leak urine. When at home keep a measuring jug by the toilet so that you can measure the amount of urine you pass each time you go to the toilet.

When you first start the diary, go to the toilet as usual for two to three days. This is to get a baseline idea of how often you go to the toilet and how much urine you normally pass. If you have an overactive bladder you may be going to the toilet every hour, and only passing less than 100-200 ml each time. This will be recorded in the diary. If you compare a further bladder diary against your 'baseline' it will help you judge how you are progressing with your treatment.

Bladder retraining

The aim is to slowly stretch the bladder so that it can hold larger volumes of urine. In time, the bladder muscle should become less overactive and more time can elapse between feeling the desire to pass urine, and having to get to a toilet. Leaks of urine are then less likely.

- Think positively that you are going to be in charge of your bladder rather than your bladder controlling your life.
- Try to not go to the toilet unless your bladder feels full. Stop visits where you are going 'just in case'.
- Identify approximately how long you can hold your urine for. When you feel the need to pass urine, make yourself wait a bit longer, for example an extra two minutes.

- Take your mind off your bladder by thinking about something repetitive to help the time pass. This could be reciting multiplication tables, count backward from 100, thinking of a shopping list or humming.
- You can delay going to the toilet by sitting on the arm of a chair or on a rolled hand towel (sausage shaped), if you are standing rise onto your toes for a few minutes until the desire to pass urine fades.
- It can also help to do some gentle pelvic floor exercises; either holding for a count of twenty seconds or five quick squeezes (see Pelvic Floor Exercises Leaflet).
- When you are feeling relaxed, breathe easily and walk to the toilet slowly. Remain relaxed as you remove the necessary clothing and sit on the toilet
- Always sit when you pass urine as the pelvic floor will relax and your bladder will fully empty. If you hover over the toilet the pelvic floor remains active and it will be difficult to empty your bladder.
- When you are able to comfortably hold on, start to make yourself wait for a extra two minutes each time before you go to the toilet.
- Gradually build up the waiting to 10 minutes then slowly to 20- 30 minutes.
- You will not need to practice this holding on during the night as the improvements that you make during the day will benefit you at night.
- Be patient. It is better to progress slowly and steadily rather than to rush things and be disappointed. Expect to have good days and bad days but don't give up. Remind yourself how far you have come since starting the training.
- Whilst doing bladder training, it is helpful to fill in a further bladder diary before your next appointment. This will record your progress over the months of the training period.

Reducing 'triggers'

- Some people find that caffeine makes symptoms worse. Caffeine is found in tea, coffee, and some fizzy drinks such as cola, chocolate and food containing chocolate. Try changing to decaffeinated drinks for a month to find out if this affects your symptoms. Alcohol will also aggravate symptoms.
- Constipation may make the symptoms worse so ensure you eat a balanced diet.
- If you have any anxieties or stresses in your life, find ways to improve things. Try taking time out to relax and ask others to help such as your family and friends or your GP.

Fluids

- It may seem sensible to cut back on the amount you drink so the bladder does not fill so quickly. However, this can make symptoms worse as the urine becomes more concentrated which may irritate the bladder muscle.
- Aim to drink normal quantities of fluids each day. This is usually about one and a half litres to two litres of fluid per day which is about six to eight cups of fluid but may be more in hot climates and when exercising.

Access to the toilet

- Ensure you can get to the toilet easily. If you find it difficult to get up the stairs a downstairs commode may help you. Advice on obtaining equipment to help you is available from your GP.
- Many people with an overactive bladder assume that nothing can be done, so they learn to cope with their problem. You may be in the habit of only shopping at certain shops because you know where the toilets are.
- The RADAR national key scheme offers access to locked public toilets. Information is available from www.radar.org.uk. Address: RADAR: Disability North. Castle Farm Road. South Gosforth. Newcastle upon Tyne. Telephone: 0191 2840480

Medication

Tablets can be prescribed for the symptoms of overactive bladder. They affect the messages passing along the nerves to the bladder, to stop it emptying at the wrong time. The side effects commonly include dry mouth, but try not to make the mistake of drinking more as this will make you go to the toilet more often. Try sucking sweets, ice cubes or chewing gum to bring some moisture to your mouth.

Contacts

If you experience any problems contact either:

- Consultant Nurse in Urogynaecology
0191-2829919
0191-2825670 (Voicemail and telephone facility)
- Nurse Consultant Continence Care
0191-2231323 (Voicemail and telephone facility)
- Physiotherapy
0191 – 2825484 (9.00am – 4.00pm Monday – Friday)

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