

Living With Overactive Bladder

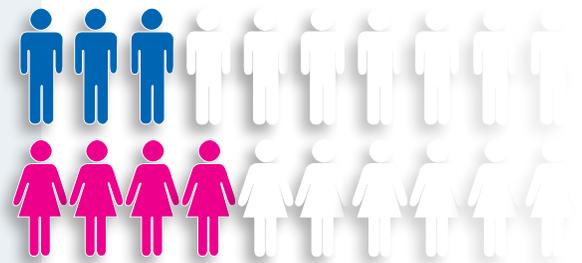


What is overactive bladder?

Overactive bladder (OAB) is not a disease—it is the name for a group of symptoms related to the bladder. However, OAB is a serious condition that can cause problems with a person's work, social life, ability to exercise, and sleep habits.

How common is OAB?

About 33 million Americans are thought to have OAB, but there could be more than that. Some people may have it but not tell their doctor because they are embarrassed to talk about it. Some may not know that their symptoms are signs of a problem, so they might not even know they have OAB. As many as 4 out of 10 women and 3 out of 10 men have OAB.



What are the symptoms of OAB?

The most common OAB symptoms are:

- A sudden, strong urge to urinate that can't be ignored or controlled (also known as that "gotta go" feeling)
- Incontinence (leaking urine when you feel the urge to urinate)
- Increased frequency (going to the bathroom many times during the day and night—normal frequency is about 6 to 7 times in a 24-hour period)

What causes OAB?

The cause of OAB is not fully known. We do know that in OAB the bladder responds to signs to contract early. Also, certain things like infections, foods, drinks, and obesity are connected to this early bladder response.



Who is at risk of having OAB?

Both men and women can develop OAB. Women who have gone through menopause and men who have prostate-related problems have a high risk of OAB. Older people also have a high risk, but not all people get OAB as they age. OAB is NOT a normal part of aging.

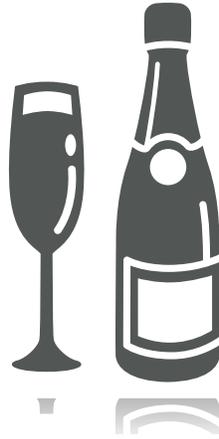


How can I manage my OAB?

The more you know about OAB, the more you can control the problem. Don't be embarrassed to talk about it with your doctor or another member of your care team. Many treatments are available for OAB.

Making lifestyle changes is often the first step in managing OAB. You may be able to make your symptoms better by following these tips:

- **Watch what you eat and drink**—Certain foods and drinks, like coffee, tea, artificial sweeteners, alcohol, fizzy drinks, and very spicy foods, can make OAB symptoms worse. Try taking these out of your diet, then adding them back one at a time; if you find out that a food or drink makes your OAB symptoms worse, you can avoid that item in the future.



- **Lose weight**—Losing excess body weight can relieve some of the pressure on the bladder and reduce the urge to urinate.
- **Keep a “bladder diary”**—Write down how often you go to the bathroom and when you leak urine. This will help you learn more about your day-to-day symptoms.
- **Learn how to relax your bladder muscles**—Your doctor or nurse can teach you simple exercises, like how to quickly squeeze and relax the muscles in your pelvis. These “quick flicks” can help ease the urge to urinate.
- **Practice “double voiding”**—After you urinate, wait a few seconds, and then try to go again to empty your bladder completely.



Are any medications available to treat OAB?

Yes! There are many medicines that can help calm the muscles and nerves in the bladder. The most common ones are anticholinergics, which have been used for more than 30 years to manage OAB; beta-3 adrenergic agonists are a newer class of drugs. Some drugs are taken by mouth (tablets, capsules, or syrup), and others are delivered through the skin in a gel or patch. Talk with your healthcare team about what would work best for you.

Commonly Prescribed Drugs for OAB

TYPE OF MEDICATION	EXAMPLES	PURPOSE
Anticholinergics	Enablex® (darifenacin) Toviaz® (fesoterodine) Ditropan® (oxybutynin) VESicare® (solifenacin) Detrol® (tolterodine) Sanctura® (trospium)	Block the nerve signals related to the bladder muscles; may decrease the urge to urinate
Beta-3 adrenergic agonists	Myrbetriq® (mirabegron)	Help relax the bladder muscles and help the bladder fill and store urine

These drugs are very safe, but certain side effects can occur. The most common include dry mouth and eyes, constipation, and blurred vision. You can help relieve dryness by using eye drops, chewing gum, sucking on hard candy, or taking small sips of water throughout the day. Be sure to tell your doctor if you have any side effects. A change in dose or a different medicine might solve the problem.

If you do not see results with medicines or are unable to take them, shots of botulinum toxin (better known

as Botox®) might help. Small doses are injected into the bladder muscles to help them contract less often. Some patients need to repeat this treatment after 6 or 9 months.

If treatments and lifestyle changes do not work or are not possible, more advanced options are available. These include “neuromodulation,” which changes the signals between the nerves and bladder muscles, and surgery to correct certain types of bladder problems.

Example of a Bladder Diary

Your Daily Bladder Diary

This diary will help you and your healthcare team figure out the causes of your bladder control trouble. The "sample" line shows you how to use the diary.

Your name: _____

Date: _____

Time	Drinks		Trips to the Bathroom			Accidental Leaks			Did you feel a strong urge to go? (circle one)		What were you doing at the time? Sneezing, exercising, having sex, lifting, etc.	
	What kind?	How much?	How many times?	How much urine? (circle one)			How much? (circle one)					
Sample	Coffee	2 cups	✓	<input type="radio"/> sm	<input type="radio"/> med	<input type="radio"/> lg	<input type="radio"/> sm	<input type="radio"/> med	<input type="radio"/> lg	Yes	No	Running
6-7 AM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
7-8 AM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
8-9 AM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
9-10 AM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
10-11 AM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
11-12 noon				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
12-1 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
1-2 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
2-3 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
3-4 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
4-5 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
5-6 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	
6-7 PM				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes	No	

Use this sheet as a master for making copies that you can use as a bladder diary for as many days as you need.

National Institute of Diabetes and Digestive and Kidney Diseases. <http://www.niddk.nih.gov/health-information/health-topics/urologic-disease/urinary-incontinence-women/Pages/insertB.aspx>.

How can I learn more about OAB?

Understanding OAB and available treatments is the best way to take control of it. The following Web sites are good sources to find more information:

Urology Care Foundation
www.urologyhealth.org

American Urological Association
www.auanet.org

National Kidney and Urologic Diseases Clearinghouse
www.kidney.niddk.nih.gov

Questions to ask your care team



- How soon will I feel better with treatment?
- What are possible side effects?
- What if this treatment does not help?
- Will I need treatment for life?
- Do I need to see a specialist?

