



Basic Information on Overactive Bladder Symptoms

The underlined terms are listed in the glossary.

What is the bladder?

The bladder is the organ which stores urine produced by the kidneys. It is a muscle in the shape of a bag which can hold around 500 millilitres of urine (**Fig. 1a and b**).

Most people start feeling their bladder is filling when it is half full. In order to empty the bladder, you have to be able to relax. Usually this means being in a socially convenient environment, such as a toilet or a private space. The brain will then send a signal to the bladder to start squeezing out the urine.

How often you urinate depends on many factors, but in particular on how much you drink. Most people urinate less than 8 times during the day and either not at all or once during the night.

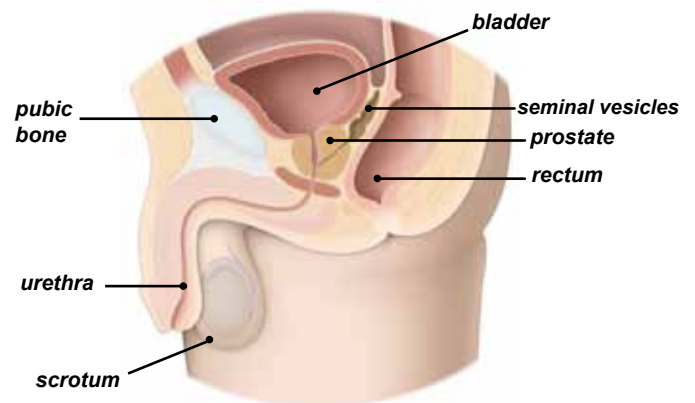


Fig. 1a: The male lower urinary tract.

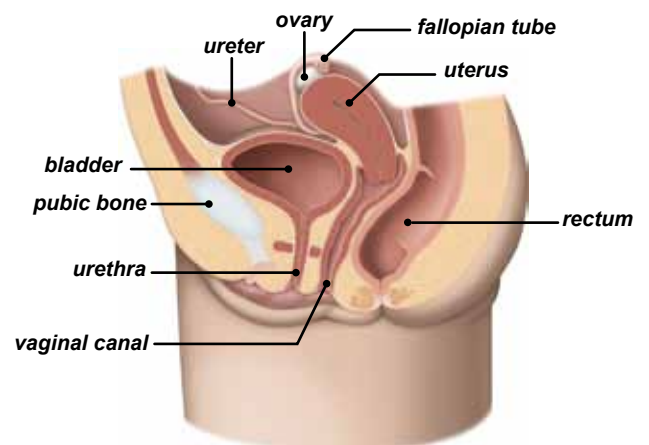


Fig. 1b: The female lower urinary tract.

What are overactive bladder symptoms?

Overactive bladder symptoms (OAB) are a collection of urinary storage symptoms. Storage symptoms include:

- The sudden need to urinate and having trouble postponing it
- Any involuntary loss of urine
- The need to urinate more often than usual
- The need to wake up at night to urinate

OAB symptoms are common and can affect both men and women. Between 10 and 20% of people suffer from it at some stage in their lives.

What causes overactive bladder symptoms

OAB symptoms can have various causes:

- Some people experience sudden and spontaneous contractions of the bladder muscle
- Some people are more sensitive to the feeling of their bladder filling
- In some cases the kidneys produce too much urine at night, which causes nocturia. This may be related to older age or medical conditions which result in more urine being produced at night
- Some people have a smaller bladder which is filled to capacity more quickly, but this is not very common



Go Online

This information leaflet contains basic information on overactive bladder symptoms. If you want to read more in-depth information, visit our website:

<http://patients.uroweb.org/>

Diagnosis of OAB

The doctor does a series of tests to understand what causes your symptoms. This is called a diagnosis. OAB symptoms can point to other conditions. Part of the diagnosis is ruling out other possible explanations for the symptoms, such as urinary infection or diabetes.

First, the doctor or nurse will take your medical history and do a physical examination. If needed, other tests will be performed.

This section offers general information about the diagnosis of OAB and situations can vary from country to country.

Terms your doctor may use

- Urinary urgency is a sudden need to urinate which is difficult to postpone. This may be because of fear of urine leakage. It is the most important symptom of OAB.
- Urgency incontinence is leakage of urine which may happen if you cannot reach a toilet in time.
- Urinary frequency is the need to urinate more often than usual, generally more than 8 times a day.
- Nocturia is waking up one or more times per night because of the need to urinate.
- LUTS (lower urinary tract symptoms) is a term used for the collection of symptoms which can point to a number of diseases affecting the urinary tract.

Self-management of OAB

The symptoms of overactive bladder are often bothersome but not life-threatening. OAB symptoms can last for a long time and there is no simple cure. There are various treatment options available. In most cases, self-management is offered as the first step of treatment. It is common to try different treatment options to figure out which one works best in your individual situation. You can discuss this with your doctor.

You can actively manage your symptoms. The following self-management measures may help you:

- Together with your doctor you can discuss adapting when, what, and how much you drink
- If urine leakage is a problem, your doctor may recommend wearing an absorbent pad to prevent wetting your clothes
- If recommended by your doctor, encourage yourself to “hold it” longer when you feel the urgency to urinate. This will train your bladder and gradually increase the time between toilet visits
- Pelvic muscles can weaken with age. Squeezing the pelvic floor muscles, known as Kegel exercise, can help to suppress the urgent desire to urinate, and regain muscle strength

Lifestyle advice

In addition, general lifestyle changes can help manage your symptoms and improve your quality of life.

- Drink at least 1-1.5 litre every day and discuss with your doctor if you can drink more

- Drink more if you live in a hot climate or do a lot of physical exercise
- Drink less before and during long trips
- Drink less in the evening to avoid getting up at night to urinate
- Reduce alcohol and caffeine because they increase urine production and irritate the bladder
- Certain foods can irritate the bladder and worsen OAB symptoms. It may be helpful to reduce artificial sweeteners, spicy foods, citrus fruits and juices, caffeine and soft drinks in your diet
- Maintain a healthy weight (your Body Mass Index should be between 18-25 kg/m²). Reducing your weight may lead to improvement in urine leakage symptoms



Useful link

Read more about continence products, such as different types of pads, at the Continence Product Advisor website:

<http://www.continenceproductadvisor.org/>

Bladder diary

Your doctor may ask you to keep a bladder diary. Here you can note down how much you drink, how often you urinate, and how much urine you produce. The bladder diary is important because it helps your doctor to understand your symptoms better.

Download a bladder diary at our website: <http://patients.uroweb.org>

Drug treatment for OAB

In about one third of people, self-management of OAB does not work. If self-management measures did not improve your symptoms, your doctor may suggest drug treatment. This section describes different groups of drugs. Together with your doctor you can decide which approach is best for you.

Factors which influence this decision include:

- Your symptoms
- Your medical history
- Any other medication you are taking
- Drugs available in your country
- Your personal preferences and values

This section offers general information about drug treatment for OAB symptoms and situations can vary from country to country.

There are several groups of drugs to treat OAB symptoms:

- Muscarinic receptor antagonists
- Beta-3 agonists
- Desmopressin

Second-line treatment for OAB

Sometimes the drugs your doctor prescribed do not improve your symptoms. In these cases, other treatment options are available. Together with your doctor you can decide which approach is best for you.

This section offers general information about second-line treatment for OAB symptoms and situations can vary from country to country.

Common treatment options for OAB symptoms are:

- Botulinum toxin bladder injection
- Nerve stimulation, also known as neuromodulation
- Surgery to increase bladder volume

Living with OAB

Although OAB symptoms are not life-threatening, they usually have a negative impact on your quality of life. Different people cope differently with their symptoms and the possible side effects of treatment. Your personal preferences and values and the impact of OAB symptoms on your life should not be underestimated.

Quality of life involves both physical and psychological health. It is important not only to feel healthy but also to feel free from the psychological pressure of living with OAB symptoms.

Symptoms such as urgency or the need to urinate frequently are likely to have a negative effect on your quality of life. Someone with OAB symptoms often needs to locate toilets before leaving the house and may avoid certain activities altogether. Also, losing sleep because of waking up at night to urinate may lower your energy levels, which makes it more difficult to maintain your daily activities. Episodes of urgency which result in leakage of urine are embarrassing and may lower your self-esteem.

These problems can also impact your loved ones. For example, your partner might be awoken by night-time toilet visits. Because of your OAB symptoms you may avoid social activities. This can also affect your partner's social life and lead to a feeling of isolation which prevents you and your loved ones from fully enjoying life.

There are many ways to keep the symptoms under control. They should not stop you from being happy in your relationships and participating in the social, cultural, and economic life of your community. Seek help if your symptoms bother you: consult your family doctor, general practitioner, or a urologist.

Seeking help

OAB symptoms become more common with increasing age. However, they should not be seen as a normal part of ageing or an untreatable problem. If you have bothersome symptoms it is important that you go to your doctor and are not embarrassed to discuss your situation.

Questions to ask your doctor

Although EAU Patient Information is relevant to most people with OAB symptoms, you may have questions which are specific to your individual situation. Your doctor is the person to answer these questions. It can be helpful to prepare a list of questions before you go see your doctor. Examples of questions you may want to ask are:

- Why have I developed this problem?
- What will happen in the next months and years if I choose not to have any treatment?
- What will happen in the next months and years if I do choose to have treatment?
- Which treatment option do you recommend for me?
- What can I expect from that treatment?
- What are the possible side effects or risks of this treatment?
- How long do I need to be treated for?

Glossary

Bladder	Organ that collects urine from the kidneys (<i>see also</i> Kidneys).
Kidneys	Two bean-shaped organs in the back of the abdomen that filter the blood and produce urine.
LUTS	Lower urinary tract symptoms. A term used for the collection of symptoms which can point to a number of diseases affecting the urinary tract.
Nocturia	Waking up one or more times during the night because of the need to urinate.
Urinary frequency	The need to urinate more often than usual, generally more than 8 times a day.
Urinary incontinence	Involuntary loss of urine.
Urinary urgency	The sudden need to urinate which is difficult to postpone. Also known as urgency.

This information was updated in January 2014.

This leaflet is part of EAU Patient Information on OAB. It contains general information about overactive bladder symptoms. If you have any specific questions about your individual medical situation you should consult your doctor or other professional healthcare provider.

This information was produced by the European Association of Urology (EAU). The content of this leaflet is in line with the EAU Guidelines.

You can find this and other information on urological diseases at our website: <http://patients.uroweb.org>

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