The overactive bladder (OAB)
Information for patients

This leaflet is written to give you information about how you can manage your bladder condition. It explains what an overactive bladder is, treatments and ways of improving your bladder condition.

What is OAB?
OAB is one of the most common types of urinary incontinence and can make you rush to the toilet eight or more times a day and several times at night. The urge to go to the toilet is very difficult to suppress and can lead to a loss of urine. This occurs when the bladder muscles, also known as detrusor muscles, contract or squeeze suddenly and frequently at inappropriate times, usually when the bladder is not very full.

Symptoms of an overactive bladder
- Increased frequency of visiting the toilet more than seven times a day;
- Urgency when the bladder feels full, it has to be emptied quickly; you are not able to hold off going to the toilet;
- Only small amounts of urine are passed even though the bladder feels full; Leakage of urine occurs if the toilet cannot be reached in time. Symptoms may be triggered by putting your key in the front door, running water, cold weather and anxiety
- Nocturia means waking to go to the toilet more than once at night.

What causes OAB?
It is not fully understood what causes over activity in the bladder muscle but there are contributing factors that may cause the bladder to be overactive.

Some contributing factors are:

- Urinary tract infection;
- Excess consumption of tea, coffee, fizzy drinks and alcohol;
- Abnormalities in the bladder;
- Neurological conditions such as Parkinson’s disease, MS and stroke.

Treatment
- Bladder retraining;
- Pelvic floor exercises;
- Fluid management;
- Medication.

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, but it does take determination and willpower.

Bladder retraining - The aim is to slowly stretch the bladder so it can hold larger amounts of urine. In time the bladder muscle should become less overactive and more time can elapse between feeling the desire to pass urine.
Think positively that you are going to be in charge of your bladder rather than your bladder controlling your life;
Try not to go to the toilet unless your bladder feels full, stop going ‘just in case’;
When you feel the urge to go to the toilet wait one minute, then five and then ten before you go, gradually building up the time;
If holding becomes difficult, try to do some pelvic floor exercises;
When you feel relaxed, breath easily and walk to the toilet slowly;
Gradually build up the waiting to 10 minutes then slowly to 20 - 30 minutes;
Be patient. It is better to progress slowly than to rush and be disappointed. You will have good and bad days but don’t give up.

Pelvic floor exercises - The object of pelvic floor exercises is to retrain and strengthen the pelvic floor muscles and to regain control of the bladder and reduce leakage. Pelvic floor exercises are very effective as part of the management of an overactive bladder. The continence nurse will explain how to do the exercises correctly and give you the pelvic floor leaflet.

Fluid Management - People with urinary incontinence often reduce the amount they drink because they feel it will reduce the number of visits to the toilet, in fact often it is the types of fluids you are drinking that irritate the bladder. Poor fluid intake can cause constipation, dehydration and increase the risk of a urinary tract infection which can aggravate your symptoms
- Try to avoid drinks which contain caffeine such as tea/coffee/hot chocolate/green tea/fizzy drinks and alcohol;
- Drink fluid such as water, juice and decaffeinated drinks.

Medication - Several drugs have been approved for the treatment of OAB. These are called Anticholinergics or Antimuscarinics and can reduce the symptoms of an overactive bladder. The medication can take several weeks for you to notice any improvement. This type of medication may cause side effects which include dry mouth/constipation/blurred vision and difficulty in emptying the bladder. Together with the medication it is very important that you continue with your bladder retraining programme. Please be patient, give yourself time - improvement is a gradual process.

For more information or advice, please contact:

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