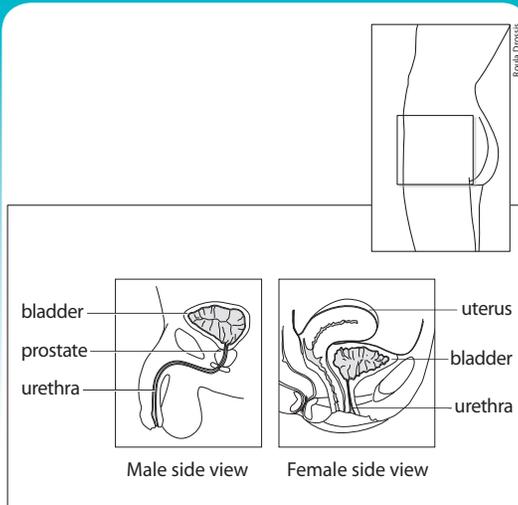




The bladder normally stores urine without discomfort or pressure until emptying is appropriate. This is controlled by nerves with input from the brain and spinal cord. Most adults void 6-10 times a day and often up to twice a night. Toilet trained children void 4-8 times a day. This will depend on the amount you drink.

### Normal bladder anatomy



An **overactive bladder** is one that does not store urine as well as it should. As its name implies, the overactive bladder works too often, causing frequent urination in the daytime, increased night-time voiding (**nocturia**), an uncontrollable urge to void (**urgency**) and sometimes leakage associated with a strong urge to void (**urge incontinence**). Symptoms may vary from day to day and in different situations.

Urinary leakage from an overactive bladder differs from stress urinary incontinence, which is the involuntary leakage of urine during activities such as coughing, sneezing or exercise. Some may have a mixture of several types of incontinence (**mixed incontinence**).

In most cases, the cause of overactive bladder symptoms is unknown. In some patients this problem can be associated with certain conditions including urinary tract infections, prostate enlargement and others. Diseases of the brain and spinal cord can cause overactive bladder symptoms. Your urologist will clarify your symptoms by asking questions and performing some investigations. Different bladder problems require different treatments.

### Investigation of overactive bladder

The investigation of overactive bladder symptoms begins with a thorough questioning regarding your voiding pattern, including the timing, frequency and discomfort associated with your voiding or urinary leakage. A **voiding diary**, recording times and amounts, may be helpful.

A urine sample may be obtained to exclude a urinary tract infection and other bladder diseases. Other more sophisticated tests may be required and will be described by your doctor. This may include a visual inspection of the bladder (cystoscopy). Urodynamic assessment, where pressures in the bladder are measured during filling and emptying, may be recommended to better understand your bladder function.

### Non-medical treatment of overactive bladder

Patients who have an overactive bladder should limit consumption of caffeinated beverages, such as coffee, tea or soft drinks. Alcohol can also worsen your bladder symptoms. Maintaining regular bowel movements is often beneficial.

It is important to void regularly, about every 3 to 4 hours. Some bladder symptoms such as urgency can be improved with **bladder training**. One can learn to suppress the urge to void and progressively increase the time between voids. Contraction of the pelvic floor muscles, as if trying to avoid passing wind from the bowel, may help suppress these urges.

### Medication

There are a number of medications available to help control the symptoms of an overactive bladder. Generally, these medications work by blocking the nerve impulse on the bladder muscle, decreasing bladder activity and increasing storage volume. This often helps to decrease frequency and urgency to void.

There are now many different medications available to treat overactive bladder and these can be taken as a pill or as a skin patch. These medications can have side effects, the most frequent of which is a dry mouth. Other side effects may include facial flushing, headache, dry eyes, constipation and abdominal pain.

Often these medications will be needed for extended periods of time.