Overactive Bladder

Overactive bladder symptoms in a man may indicate other problems. Urinary frequency, urgency and nocturia in a man are often related either to benign prostate hyperplasia (BPH) or to prostatitis. Posturate-related urinary troubles need to be treated carefully, and in general involve other types of medications. Prostatitis is generally treated with antibiotics and anti-inflammatory medications. Treatments for BPH vary from watchful waiting for mild symptoms to medications or surgery for more severe situations. Two classes of medication are commonly used: Alpha-blocker medications (Flomax, Uniwalker, and Doxazosin) relax the muscle tone of the prostate and relieve the blockage of BPH. 5-alpha-reductase inhibitors (Proscar, Finasteride, and Avodart) can physically shrink the prostate and thus help to reduce obstruction of urine flow. If medications are unsuccessful, more aggressive treatments can remove the blocking prostate tissue. Laser treatments, Microwave treatments, and even surgical trimming of the prostate may be helpful. Occasionally, a combination of overactive bladder medicines and prostate medicines will be needed. In some cases of huge prostate enlargement, use of an overactive bladder medicine may cause a man to be unable to urinate (urinary retention). Thus, it is very important for an urologist to evaluate the urinary symptoms in men and decide on appropriate medical (or surgical) treatment.

Other Conditions with Similar Symptoms

- Urinary Tract Infection
- Diabetes (polyuria)
- Pelvic Radiation
- Neurologic Disorders
- Parkinson’s Disease
- Multiple Sclerosis
- Disc Disease
- Colorectal Cancer
- Bladder Cancer
- Gynecologic Conditions
- Pregnancy
- Uterine Fibroids
- Ovarian Cysts
- Endometriosis

Common Steps in Evaluation

- History
- Physical Exam and Pelvic Exam
- Urinalysis
- Ultrasound for Post Void Residual
- Voids Diary
- Possible Procedures:
  - Cystoscopy
  - CT Scan of Abdomen and Pelvis
  - Urodynamics


does not affect sexual function.

Overactive Bladder

Overactive Bladder (OAB) is a condition that affects approximately 33 million Americans. It can disrupt activities of daily life. For many "Getting to the bathroom in time" and "knowing where the bathroom is" become major concerns. The estimated economic impact of OAB in the U.S. exceeded $12 billion dollars in 2000. Women tend to be affected more commonly than men, and it occurs more frequently as people age. The most common symptoms that suggest overactive bladder are:

- urinating frequently (more than 8 times in 24 hours)
- sudden strong urges to urinate (urgency)
- having to wake from sleep to urinate more than twice each night (nocturia)
- leaking urine before you get to the bathroom (urge incontinence)
- unconscious leakage of urine

Many other symptoms may accompany these, some of which deserve particular attention. If there is burning on urination, the possibility of urinary infection must be investigated with a urinalysis. Once an infection has been treated, any remaining symptoms should be re-evaluated. Many times, a urinary tract infection may have been causing all of the symptoms, mimicking an overactive bladder. Blood in the urine (hematuria), whether visible or microscopically detected, needs to be further evaluated. The most common cause of blood in the urine is a urinary tract infection (UTI). Several weeks after treatment of the UTI the urine should be rechecked to see if any blood remains. If blood is still present, further evaluation will be recommended to exclude bladder cancer, kidney cancer, urinary stones, and urinary blockages as possible sources.

Though the underlying cause of OAB is unknown, the nervous system is thought to play an important role in the incontinency and overactivity of the bladder. Processes such as diabetes, Parkinson’s disease and multiple sclerosis, which affect the nervous system, can initially present with urinary complaints. Low back pain in association with OAB raises the possibility of a "slipped disc" with nerve root irritation. Bladder pain accompanying OAB may be the first sign of interstitial cystitis, which follows a different treatment approach. A thorough medical history and exam can usually diagnose these problems.

Once the doctor has eliminated other causes of frequency and urgency, treatment of OAB can proceed. Management of Overactive Bladder usually involves medicines called anti-muscarinics (common brand name medications include Detrol, Ditropan,Vesicare, Sanctura and Enable). These drugs are very safe, effective, and quick in onset. They improve quality of life by dramatically cutting down on the frequency of urination, both daytime and nighttime, and the severity of urgency. Overall, the side-effects of the anti-muscarinic medications are minimal and may include dry mouth, constipation and rarely mental confusion. Some medical conditions may vary.

Do you have an Overactive Bladder?

These questions can help you decide if you need further evaluation for an overactive bladder:

Do you go to the bathroom so often at night that it interrupts your sleep (2 or more times)?

Do you go to the bathroom so often that it interferes with your daily activities (more than 8 times in 24 hours)?

Do you always have to know where the bathroom is because of frequent, strong, sudden urges to urinate?

Do you sometimes have trouble making it to the bathroom in time?

Do you wear pads to protect your clothes from getting wet?

Do you limit the amount of fluids that you drink?

If you answered "YES" to more than two of these questions, make sure to ask your doctor about evaluation and treatment for an overactive bladder. The sooner you begin, the sooner you can return to more normal living.
Plan to devote 4–6 months. A "bladder pacemaker" (called Interstim) can be surgically implanted to help alleviate bladder spasms. In severe cases, urologists may consider more serious options such as a progression of the same symptoms. The urgency and frequency of OAB can progress to Incontinence. If you rest better, you have more energy and are more alert.

Behavioral Modifications: Avoid CARBONATED SODAS. Avoid CITRUS JUICES and FRUITS. Avoid ALCOHOL. Avoid SPICY FOODS (Italian, Chinese, and Mexican type dishes). Stop Smoking (Smoking causes bladder muscle irritability). Lose Weight (Extra weight can place extra pressure on your bladder).

Bladder Retraining Technique

- When you feel the urge to urinate, STOP what you are doing, sit down or STAND STILL, and remain still. SQUEEZE your pelvic muscles quickly several times, but do not completely relax the muscles in between.
- Relax the rest of your body by taking several DEEP BREATHS.
- CONCENTRATE on suppressing the urge, and wait a few minutes to let the urge subside.
- Then WALK, DO NOT RUSH, to the bathroom.
- REPEAT this routine whenever abrupt urges begin.

Dietary and Lifestyle Modifications

- Avoid CAFFEINE (Coffee, Tea, Cola, Chocolate).
- Avoid CARBONATED SODAS.
- Avoid CITRUS JUICES and FRUITS.
- Avoid ALCOHOL.
- Avoid SPICY FOODS (Italian, Chinese, and Mexican type dishes).
- Stop Smoking (Smoking causes bladder muscle irritability).
- Lose Weight (Extra weight can place extra pressure on your bladder).

Kegel Exercise Routine

Nearly everyone has heard of Kegel exercises, usually related to an OB/GYN’s recommendation to women after childbirth. While Kegel exercises are generally used to help control stress urinary incontinence, the Kegel routine can be effective to exercise the pelvic floor muscles and improve bladder hyperactivity. However, one must do the exercise properly. Many cases fail simply because the patient is not trained properly or is not exercising the proper muscles. Kegel’s are NOT simply “tightening up the belly muscles” or “clenching the buttocks.” The best way to correctly perform Kegels is as follows. For the first week, learn to isolate the proper muscles for urinary sphincter control. Whenever you feel the urge to urinate, go to the restroom and let the urine flow Begin; then stop the stream midstream. Pay attention to the muscle you are contracting to stop the stream, as this is the sphincter muscle. Then in the weeks to come, you can exercise this muscle at times other than when you are urinating. To do a repetition of Kegels, one must tighten up the muscle and hold it for a count of 5, then relax it. A repetition of Kegels means you “Tighten-count to 5-Relax” five times in a row. This should be done multiple times each day as a daily exercise. Try to do it every time you come to a stoplight in your car or every time you see a commercial on the television. Linking your Kegel Routine to an activity of daily living will insure that you do it multiple times every day—FOREVER.

Special Considerations: MALE PATIENTS

Many men have symptoms of overactive bladder. The cause may be the bladder or the cause may be the prostate. The symptoms, in general, are identical. Your urologist can determine which is the appropriate focus of treatment.

URINARY INFECTION

UTI, urinary tract infection or bladder infection, can give the same symptoms as overactive bladder. In most cases of UTI, treating the infection will lead to correction of the symptoms. In such cases, longterm OAB medications will not be necessary. Controlling the infections will often control the aggravating bladder symptoms.

Overactive Bladder: Things You Might Not Know

-...Overactive Bladder can have dangerous consequences. If you are having to get up 3-4 times per night to urinate, the chances of tripping or stumbling in the dark increase. Elderly patients are even more prone to falling during the nighttime. Elderly female patients are also more prone to breaking a hip with a fall because of osteoporosis. Even in today’s world of modern medicine, a hip fracture in an 80 year old patient has a mortality rate of 25-50%.
- Controlling overactive bladder can help restore more normal sleep patterns. If you have to wake up 3-4 times each night to urinate, normal sleep patterns are disrupted and patients don’t really get rested. If you rest better, you have more energy and are more alert.
- Many of the overactive bladder medications cause a mild dry mouth. This is usually well tolerated, but if not, sucking on hard candy can help increase saliva production and minimize the side effect.
- Many patients decline to treat overactive bladder citing the high cost of the medications medication but still pay top dollar for huge quantities of adult diapers or "Depends." Patients should consider the overall cost of not treating the condition.