

Patient information factsheet

Bladder retraining for an overactive bladder

An overactive bladder can affect women of all ages. It has a wide range of common symptoms that can vary in severity and nature. The symptoms include frequency (abnormally frequent urination); urgency (which is a sudden, strong, often overwhelming need to urinate); a need to get up and empty the bladder during the night (nocturia) and urinary incontinence (unintentional passing of urine).

The aim of bladder retraining is to gradually improve and overcome these symptoms by making simple changes to your bladder habits. This factsheet explains some of the positive steps you can take but if you have any further questions or concerns your healthcare professional will be happy to discuss them with you.

How your bladder works

The bladder's job is to store urine produced by the kidneys. The bladder fills up gradually until the desire to pass urine increases. Then, at a suitable and convenient time, you empty your bladder.

The bladder pipe (urethra) is normally kept closed by a circular muscle (sphincter) assisted by the pelvic floor muscles. As the bladder empties, the bladder muscle (detrusor) squeezes urine out. The pelvic floor muscles relax and the sphincter opens to allow the urine to come out.

Nerve messages are sent between the brain, bladder and pelvic floor muscles and influence the sensation and control of your bladder.

The bladder should hold approximately 400-600ml (one pint) of urine but most people will get the desire to empty their bladder when it contains around 300ml. The number of visits to the toilet each day should be between four and eight and up to once at night, however this will depend on the amount that you drink.

What to drink to avoid bladder irritation

The recommended daily intake of liquid for your urinary system to work efficiently is one-and-a-half to two litres (three to four pints). Drinking more than this amount will lead to increased frequency. Restricting your fluid intake by drinking less will concentrate the urine and make your bladder more irritable.

- **Water** is the best fluid for your bladder and you should aim for it to make up at least one third of your total daily fluid intake. Fizzy or sparkling water contains dissolved carbon dioxide which results in an acidic solution and may increase urinary urgency.
- **Fruit juices** such as grapefruit, lemon, pineapple and orange juice are acidic and can irritate your bladder, therefore it's advisable to limit your intake of these to one glass a day. Try changing to a juice with less acid such as apple or pear and dilute with water.
- **Cranberry juice** is also less acidic than many juices and has been shown to aid in the prevention of urine infections and cystitis. Cranberry capsules are available if you do not like the taste of the juice. You should not drink cranberry juice if you are currently taking warfarin or other medicines to thin the blood as it can increase their effect.
- **Diluted squash** or barley water can be taken, however try to avoid blackcurrant and squash containing sugar substitutes such as aspartame and saccharin. These can irritate the bladder.

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- **Herbal and fruit teas** come in many different varieties and are mostly caffeine-free, however ginseng can be a bladder stimulant and may therefore increase frequency and urgency.

Some drinks may irritate your bladder and it's therefore best to avoid them:

- **Alcohol** is a bladder stimulant and also a diuretic, which means it causes an increase in urine production and encourages your body to flush out water through the kidneys.
- **Caffeine** is a bladder stimulant. It is found in tea, green tea, coffee, hot chocolate, chocolate and many fizzy drinks. It is often added to painkillers. Look out for the words 'extra' or 'plus' which denote added caffeine.

It's important to reduce your caffeine intake slowly to avoid possible withdrawal symptoms such as headache, lethargy and irritability. Try replacing your tea and coffee over several days with decaffeinated versions.

Good bladder habits

- Each time you visit the toilet, take time to make sure that you have emptied your bladder fully. Changing your position or standing then sitting again can help to empty the bladder completely.
- Only visit the toilet when you really need to go. Going to the toilet 'just in case' prevents the bladder from ever getting very full, losing its ability to stretch. Over time this can cause your bladder to shrink, making it unable to hold adequate volumes and in turn making you need to go more frequently.
- Your bladder should not need to be emptied more than every two to three hours during the day. If you empty your bladder more frequently, try 'holding on' for just five minutes longer and then gradually increase this time. Distracting yourself by doing one more task before emptying your bladder can also help. You can also try deep breathing exercises or counting backwards from ten.
- Performing five quick squeezes of your pelvic floor muscles sends a message to your bladder to stop it contracting. (You will be taught how to perform pelvic floor exercises and be given a separate factsheet). Some positions such as sitting on a hard chair or a tightly rolled towel can also help. It puts pressure on the pelvic floor muscles so that you can hold on for longer.

Is there anything else I can do to help?

- Try to prevent constipation by keeping your bowels open regularly. Choose a diet high in foods containing fibre, such as wholemeal bread, cereals, fruit and vegetables.
- Maintain a healthy weight. If you are overweight, losing weight may ease your symptoms by reducing the pressure on the bladder. Try to ensure you take part in regular physical activity and exercise.
- Stop smoking. Smoking can cause chronic coughing which can damage the muscles of the pelvic floor. Nicotine in cigarettes is also known to be a bladder irritant.

When will I notice an improvement?

Hopefully you will notice an improvement in your bladder symptoms within a few weeks but please don't feel discouraged if you don't see a noticeable improvement straight away. If you have severe bladder urgency it might take several weeks.

What other help is available?

A range of medications and other therapies are available to help in the treatment of overactive bladder. These may be offered to you if appropriate, if your symptoms persist.

If you have any questions about your treatment please don't hesitate to contact the urodynamics and physiotherapy department on **023 8120 8967**. We're open Monday to Friday 8.30am to 4.30pm. An answer phone is available outside of these hours.

Useful links

Bladder and Bowel Foundation

Offers advice and assistance over the phone from specially trained nurses.

Telephone **0845 345 0165** (Monday to Friday, 9.30am to 1pm)

www.bladderandbowelfoundation.org

National Association for Continence

www.nafc.org

The Cystitis and Overactive Bladder Foundation

www.cobfoundation.org

NHS Choices

www.nhs.uk/Livewell/incontinence/Pages/Breakingthetaboo.aspx

If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone **023 8120 4688 for help.**