

Patient information factsheet

Medications to help the symptoms of an overactive bladder

Your consultant has recommended that you start on antimuscarinic medication to help with your overactive bladder symptoms.

These medicines, which are usually given as tablets, aim to make your symptoms more manageable. They work by reducing some of the impulses passing from the bladder to the brain, reducing urinary urgency, frequency and leakage. You may need to try more than one of these medications before finding the one that controls your symptoms and suits you best. This factsheet aims to answer your initial questions but if you have any further concerns, your healthcare professional will be happy to discuss them with you.

The most commonly used antimuscarinic tablets are:

- Solifenacin (Vesicare) 5-10mg daily
- Fesoterodine (Toviaz) 4-8mg daily
- Trospium Chloride XL (Regurin) 60mg daily

You need only take your antimuscarinic medication once a day as it's designed to last 24 hours.

Common side effects

All medications can have side effects however not everyone experiences them. Some women are so pleased with the improvement in their symptoms that they are able to cope with the side effects.

These can include:

- **Dry mouth:** this can be helped by sucking or chewing on a piece of fruit, chewing gum, a sweet or a slice of lemon to stimulate the salivary glands.
- **Constipation:** this can be improved by a high fibre diet or occasional use of laxatives. Your GP or pharmacist will be able to offer advice.
- **Indigestion:** especially if you are already prone to it.
- **Difficulty emptying your bladder:** if this happens you would need to stop the medication and contact your GP.
- **Tiredness/lethargy:** the medications can make you feel sleepy so it's recommended they are taken in the evening.
- **Blurred vision**
- **Fast heartbeat**

How to get your prescription

Your GP will be sent a letter with a list of recommended tablets for you to try. You will need to contact them to ask for a prescription. Your GP may leave this for you to collect at the surgery, or may require you to make an appointment with them.

Taking the medication

- Start with the first medication on the list at the lowest dose for at least four weeks. It can take up to four weeks for the medication to take effect and for you to notice any improvement in your symptoms.
- If this medication works well, without any side effects, then continue on this dose.
- If this medication doesn't work or if it only improves your symptoms a little, you might benefit from increasing the dose for a further four weeks.
- If there is still no improvement in your symptoms then you might need to stop the medication and try a different one on the list.
- If you experience side effects that you're unable to tolerate, you do not need to wait four weeks before changing your medication. Contact your GP who will be able to prescribe a different one.

Follow-up

An appointment for follow-up in the urogynaecology clinic will be made for you.

Antimuscarinic medications are not suitable for everyone. Some patients with glaucoma, difficulty in emptying the bladder, certain gastrointestinal or other medical conditions should avoid using them. If you think this might apply to you, please check with your GP.

Alternative medications

Mirabegron (Betmiga) 50mg daily This medicine works in a slightly different way by relaxing the bladder to increase the amount of urine your bladder can hold. This may be offered to you if the other medications are not suitable or are ineffective.

Common side effects of Mirabegron tablets

- feeling your heart beating fast or irregularly
- urinary tract infection (UTI)
- increased blood pressure
- if you have liver or kidney problems you might need a reduced dose - discuss this with your nurse or doctor

Oxybutynin (Kentera) patch

If you experience side effects which you are unable to tolerate, a skin patch might be prescribed as an alternative to tablets. The patch works by giving a continuous dose absorbed through the skin. This method reduces the level of active ingredient in the bloodstream.

Frequently asked questions

How long do I need to take the medication?

- Once you have found a medication that suits you and is effective you should stay on it long-term. Your GP will continue to prescribe it for you on a repeat prescription.
- You should see your GP annually or every six months if you are over 75 (as recommended by the guidance issued by the National Institute of Clinical Excellence – NICE).
- If problems occur then your GP can refer you back to the urogynaecology clinic.

What happens if I stop the medication?

- Often one or two tablets are forgotten or missed without causing a severe recurrence in overactive bladder symptoms.
- If tablets are completely stopped then the effects will gradually wear off and your overactive bladder symptoms will come back. If this happens your GP can start your tablets again.

Further information

Overactive bladder is a chronic condition and though medications do not provide a cure, the majority of women find that they can significantly improve their symptoms. We would hope to see at least a 70% improvement.

Please do not hesitate to contact the urodynamics and physiotherapy department on **023 8120 8967** if you have any questions about your treatment. We are open Monday to Friday 8.30am to 4.30pm. An answer machine 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

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