

Just can't wait

Help for people who have to
rush to the loo



*In*contact

www.incontact.org



Why this booklet?

One of the most common bladder problems is the sudden and urgent need to get to a loo. Many of us can't hold on for more than a few seconds before having an accident. Sometimes the bladder may empty with very little warning at all.

This problem can have a big effect on our lives. Many people stay at home or make very few trips out - just because they don't want to be far away from a toilet.

The good news is that there is a lot of help for this condition - so read on.

About *Incontact*

Incontact provides help for people with bladder and bowel problems. We produce a quarterly magazine and a range of booklets and information sheets. There are groups and helplines around the country. All of these are free for people affected by these common problems. *Incontact* gratefully receives donations to help us continue this important work. Cheques can be made to '*Incontact*'-see the back cover for our contact details.



It's always a worry when I go out, I make sure I know where the nearest toilet is



How does the bladder work normally?

The bladder is surrounded by a muscle - the **detrusor** muscle. Normally, this muscle is relaxed. As the bladder fills up, the detrusor muscle stretches.

Most people feel the need to go to the toilet when the bladder is about half full. But they can usually hold on for some time after that. When they are ready to pass water, the detrusor muscle squeezes and the urine comes out.

Who is this booklet for?

If you get sudden urges to go to the toilet, you could be suffering from an **overactive bladder**. This is sometimes called an **unstable** or **irritable bladder**, or **detrusor instability**. It means that your bladder wants to squeeze out urine - even if it is not full and you are not ready.

The sudden urge to go to the lavatory is called **urgency**. If you do not get there in time and have an accident, it is called **urge incontinence**.

You may also have to go to the toilet many times during the day (**frequency**) or during the night (which is called **nocturia**). At night you may not wake up in time and will wet the bed - sometimes called **nocturnal enuresis**.

What is the cause of an overactive bladder?

Why do some of us have a sudden urge to go - even when our bladder is not full? It is often hard to say what causes an overactive bladder. But we know that some things can irritate the bladder and make the symptoms worse.

The fluids we drink can cause problems - caffeine and alcohol can both irritate the bladder and cause urgency and frequency - see the section on Healthy Drinking Habits on page 5 & 6. On the other hand, some people do not drink enough fluids - their urine becomes very concentrated and this can irritate the bladder.

Another common cause of urgency is infection. Your doctor or nurse can do a simple test on a sample of your urine to see if it is infected.

An overactive bladder can be caused by a number of other conditions. People who have diabetes can develop an overactive bladder. Men with prostate problems are also at risk.

Any condition that effects the nervous system can cause problems. Stroke, Multiple Sclerosis, Parkinson's Disease and Alzheimer's are all possible causes. Some of these conditions can also cause problems in getting around - people affected may not be able to get to a toilet quickly enough.

However, for many people with an overactive bladder the cause is never found. It can be a relief to know that there is no other health problem causing your incontinence - but it can also feel frustrating and confusing not having a reason for the problem.

What can be done to help?

See a doctor or nurse

The first thing to do is talk to a doctor or nurse. It may be useful to start by calling your local continence advisor (also called a continence nurse specialist). This is a nurse who specialises in bladder and bowel problems. *In*contact can provide you with the phone number of your local continence nurse.

The doctor or nurse will assess you. Be ready to answer these questions:

- How often do you go to the loo?
- How often do you leak or have an accident?
- When do you leak or have accidents?
- What medicines do you take?
- What do you normally eat and drink?
- Is it painful or uncomfortable when you go to the loo?
- How many times do you get up at night?
- Do you ever wet the bed?

Here are some tests that your doctor or nurse may recommend. Ask him or her to explain what any test involves and how it can help.

Urinalysis - this test just needs a sample of urine to find out if there is any infection, or any blood in your urine.

Residual urine - this is to find out if there is any urine left in your bladder after you have gone to the loo. The doctor or nurse will insert a catheter into the bladder through the urethra. This can be a little uncomfortable. Another way to check residual urine is by using an ultrasound machine to take a bladder scan.

Internal investigations - the doctor or nurse puts their fingers inside the vagina (for women) or back passage (for men). This can show how strong the pelvic floor muscles are. For men, this can detect if the prostate gland is enlarged.

Urodynamics - this test can help find out the cause of bladder problems. It involves putting a thin catheter into the bladder through the urethra, and another into the rectum through the anus. This can be quite uncomfortable but the catheter is removed as soon as the test is over. This test is only carried out in special hospital units.

Treatment

Once you know what is causing your problem, you will be able to discuss possible treatments with your doctor or nurse. They will explain what the problem is and how the different treatments can help. They will explain any side effects too - these are extra problems that can be caused by the treatment. Together, you can decide which treatment is the most suitable.

The following pages give some information about treatments that you may be offered, as well as ways of helping yourself.

Healthy drinking habits

It is important to drink enough each day. Try to drink at least six cups or glasses of fluid each day. If you drink less than this, then increase the amount you drink gradually.

It is best not to drink too much tea, coffee, cola or fizzy drinks - these can irritate the bladder and make your problems worse. Alcoholic drinks can irritate the bladder too. Drink plain water, fruit juices or cordials, fruit or herbal tea. If you pay attention to what you drink you will notice which drinks cause problems.

Drinking one or two glasses of cranberry juice every day can help people who often get urine infections - although people with diabetes should check with their doctor first. Do not cut down the amount you drink - this makes your urine even more concentrated and can make bladder problems worse.

Bladder retraining

Many people with urgency will get into the habit of going to the toilet too often - trying to make sure they are never 'caught short'. This can make the problem of urgency even worse: the bladder gets used to holding less and less urine - causing it to shrink. It becomes even more sensitive or overactive.

Bladder retraining can help improve or even cure the problem of an overactive bladder. This is a method that helps the bladder hold more urine and become less overactive. Bladder retraining takes time and determination. A cure does not happen overnight, but it can be very successful.

Keep a diary or record of how often you pass urine - like the example on the next page. Keep a record for at least three days. See how often you usually go to the loo. Now gradually increase the time in between visits to the toilet. For example, if you normally go to the loo every hour, try and hold on a little bit longer.

When you get the urge to pass water, hold on for a bit - just a minute or two to start with. Try to hold on a little bit longer each time you feel the urge to go. The urge often stops if you hold on when you feel the first urge to go. Try not to think about going to the toilet - distract yourself by doing something.

Bladder retraining slowly stretches the bladder muscle. As it becomes used to holding more urine, the problems of overactive bladder and urgency are reduced.

Some people find bladder retraining easy and can do it quickly. Others find it harder and it can take longer. Often it will get easier to overcome the urge to pass water. One day you may realise that you have forgotten all about the toilet for several hours.

Keeping a chart or record throughout training will help you to see the progress you are making. Bladder retraining like this can help to control urgency (rushing to pass water) as well as frequency (going very often).

It is important to drink enough liquid for bladder retraining to work - see the section about healthy drinking habits on page 5 & 6. Some medicines (called anti- cholinergic drugs) can help reduce the urge to go when you are doing bladder retraining - ask your doctor or nurse about these.

EXAMPLE OF A CHART TO RECORD BLADDER HABITS

TIME	COMMENT	DRINKS
5am	woke up to have a pee	
7.30am	leaked before I got to the loo	cup of tea
9.15am	made it to the loo in time	

Pelvic floor exercises

Pelvic floor exercises can be a big help when you are doing bladder retraining. They help you hold on longer when you have the urge to go to the toilet.

These exercises can also help reduce the number of urges you have. Every time you work your pelvic floor muscles, your bladder relaxes, making it easier to hold more urine.

You should talk to your continence advisor or physiotherapist to make sure you are doing these exercises correctly. *Incontact's* booklet on stress incontinence contains more information about how to do them.

Electrical stimulation

Some people with an overactive bladder are helped by electrical stimulation of the pelvic floor. Both men and women can try this treatment. A probe is placed in the vagina (for women) or back passage (for men). The probe carries an electrical current which can strengthen the pelvic floor and reduce the sensitivity of an overactive bladder. This treatment is normally carried out under the supervision of a continence advisor or specialist physiotherapist.

Medication

There are drugs which can help improve an overactive bladder. These drugs can be very effective although, like all drugs, they sometimes have side effects. If side effects become troublesome you should go back to see the doctor.

These medications can help reduce the urgency you have to go to the toilet. They can help people with daytime urgency as well as the problem of getting up several times during the night. *Incontact* has an information sheet listing the different medications available.

Surgery

Some problems can be helped by surgery, but sometimes surgery can make things worse. Your doctor can tell you what any operation involves, the chances of success, and any side effects it could cause. Always ask if you are unsure about anything. You can also request *Incontact's* information sheets about common operations available.



Living with an overactive bladder

Some of us are never completely cured of an overactive bladder. The good news is there are products which can help manage the problem so we can still do most of the things we want to do.

A big problem with an overactive bladder is finding a toilet in time. Use your 'Just Can't Wait' card, available from *Incontact*. You can show this card when asking to use the toilet of a shop, restaurant or other UK business. It doesn't guarantee you access to their toilets, but it proves that you have a genuine medical condition which requires the urgent use of a toilet. Portable urinals can also help - *Incontact* have a factsheet about the products available.

The use of disabled toilets is also a great help to many of us with urgency. Special keys are available from RADAR - their address and phone number is on the back page.

The clothes we wear can also make it harder to get to the loo in time. Trousers, skirts and underwear that are easy to undo can help some people. Replacing buttons with elastic or Velcro can also help.

Pads and pants

Specially designed pads and pants can absorb leaks from the bladder, either day or night. Some are disposable, others can be washed and re-used. You may be able to get free pads from your local health authority - otherwise there are many varieties available for sale in shops or by mail order. *Incontact* has a booklet on the different types and designs available, as well as an information sheet listing all the different brands.

Where to go for more help

Incontact

United House, North Road

London N7 9DP

Tel: 0870 770 3246

e-mail: info@incontact.org web: www.incontact.org

The Cystitis and Overactive Bladder Foundation

76 High Street, Stony Stratford

Buckinghamshire MK11 1AH

Tel: 01908 569169

e-mail: info@cobfoundation.org

web: www.cobfoundation.org

RADAR

12 City Forum, 250 City Road

London EC1V 8AF

Tel: 020 7250 3222

e-mail: radar@radar.org.uk web: www.radar.org.uk

The Continence Foundation

has information leaflets and a helpline:

307 Hatton Square, 16 Baldwins Gardens, London EC1N 7RJ

Telephone: 0845 345 0165, Monday to Friday, 9.30 a.m. to 1.30 p.m.

e-mail: continence.foundation@dial.pipex.com

web: www.continence-foundation.org.uk

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