

A healthy bladder

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Date published: 16.06.11
Ref: URO/Blad/1

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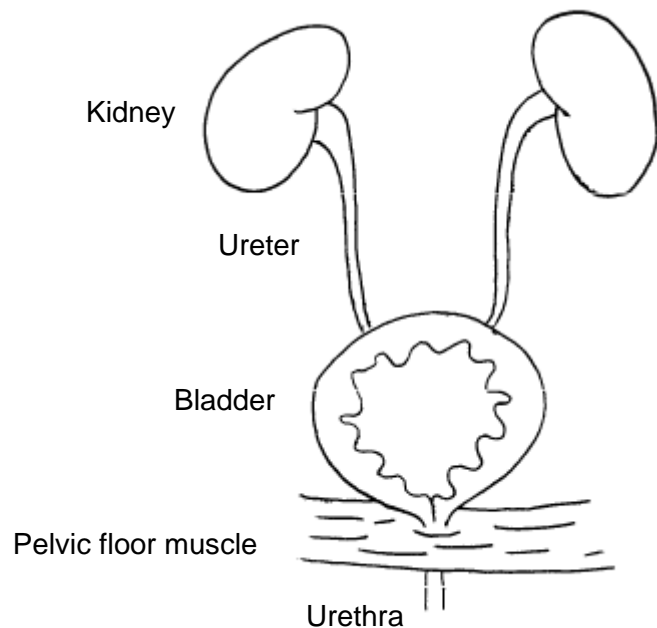
A patient's guide



.... caring for you 

How your bladder works

Urine is collected and stored in the bladder. The bladder is a muscular organ positioned in the pelvis just behind the pubic bone. In between visits to the toilet the bladder relaxes and fills up. When you go to the toilet the bladder squeezes and urine comes out through a tube called the urethra.



A normal bladder can hold between 400ml and 600ml of urine. On average, people empty their bladder four to seven times per day.

Organisations that can help

Bladder and Bowel Foundation

A national charity for people affected by bladder and bowel problems

Specialist Continence Nurse helpline for medical advice: 0845 345 0165

General enquiries: 01536 53325

Fax: 01536 533240

Email to: info@bladderandbowelfoundation.org

The Cystitis Overactive Bladder Foundation

Tel: (0)121 702 0820

Email: info@cobfoundation.org

www.cobfoundation.org

References

Abrams, P., Cardozo, L., Fall, L., Griffiths, D., Rosier, P., Ulmstern, U., van Kerrebroek, P., Victor, A., Wein, A. (2002). The standardisation of terminology in lower urinary tract function. *Neurourol. Urodyn* Vol 21 pp167 – 178

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National Collaborating Centre for Women's and Children's Health (Eds) (2006) *Urinary Incontinence. The management of urinary incontinence in women*. NICE clinical guideline 40. www.guidance.nice.org.uk/CG40

Any further questions

If you need any further advice please feel free to contact:

Continence Nurse Specialist in Women's Health Clinic 4C:
020 7288 5244

Clinical Research Nurse in Department of Medicine, Continence
Clinic:
020 7288 3174

Women's Health Physiotherapist:
020 7288 3043

Smoking Cessation Service:
020 7288 5139

Organisations that can help

Bladder and Bowel Care (No referral needed)
River Place Health Centre
Essex Road
London
N1 2DE

Appointments: 020 7527 1158
General enquires: 020 3316 8401
Fax: 020 3316 8405
Opening hours:
9am - 5pm, Monday to Friday

What can go wrong with the bladder?

Despite being so common, bladder difficulties are often hidden. The good news is that a lot can be done to manage, improve and sometimes cure these conditions.

Stress incontinence

Some people leak urine when they cough, sneeze, laugh, run, jump, make sudden movements or walk. This is called stress incontinence.

This usually happens because the muscles of the pelvic floor or urethral sphincter are weak or damaged.

Overactive Bladder Syndrome (OAB)

This is often referred to as an overactive bladder. This problem is caused when the bladder muscle squeezes even when you want to hold on. Symptoms include:

- A sudden need to pass urine
- Leaking before you are able to reach a toilet
- Going to the toilet frequently
- Having to wake up at least once a night to pass urine

Mixed incontinence

It is not unusual to have stress incontinence and OAB at the same time. This is called 'mixed symptoms'.

Problems in emptying

Sometimes the bladder doesn't empty properly. Some people experience overflow incontinence which may mean urine dribbles all of the time. This requires medical assessment and treatment.

Bladder infections/urinary tract infection (UTI)

A bladder infection or UTI is most commonly caused by bacteria from outside of the body travelling up the urethra and into your bladder. Symptoms include:

- increased frequency
- dark, cloudy and smelly urine
- burning feeling or pain when passing urine
- a sensation of incomplete bladder emptying
- pain in lower abdomen

This requires immediate medical assessment and treatment so please visit your GP for a urine test. If you have blood in your urine you need an urgent GP appointment as there could be a serious underlying cause.

Nocturia

Nocturia is when you get up frequently to go to the toilet during the night time. Although frequency can increase up to twice a night with age, it may be due to infection, overactive bladder or fluid retention in the daytime. This may need further assessment so please consult your GP.

Types of treatment offered at The Whittington Hospital NHS Trust

- Good bladder habits - what to drink or to avoid drinking
- Pelvic floor retraining
- Bladder retraining - a technique to reduce how often you go to the toilet.
- Learning how to catheterise yourself if you cannot empty your bladder.
- Medication to treat an infection or calm an overactive bladder.
- Referral for continence pads.
- Urodynamics (cystometry) - this test can help find out the cause of your bladder problems.
- Surgery - this is a last option and can be discussed with the nurse before referral to a consultant.
- If you have a chronic bladder problem and feel that you need more support, please ask your GP for referral to access our hospital specialist continence services.

Continence pads

Continence pads are different to sanitary pads which you use for menstrual periods, and more hygienic than tissue paper. They absorb the urine away from the skin which helps to reduce skin irritation and prevent urine infections.

They also deodorise so that you will not smell. They absorb much more fluid to prevent leaks onto your clothing. They come in all sizes: pantliners, small, medium, large, extra large and all-in-ones.

Smoking

Smoking is associated with incontinence and OAB. Smoking is also the leading risk factor for bladder cancer and is thought to be responsible for 50 per cent of all cases. It's never too late to stop smoking! If you wish help quitting please contact your GP or ask to be referred to the hospital smoking cessation service.

What can you do?

Pelvic floor exercises

Doing exercises to strengthen the pelvic floor muscle can treat incontinence. Ask for The Whittington Hospital leaflet Understanding pelvic floor muscle exercises.

Fluid intake

Your own body, i.e. your thirst will tell you exactly how much liquid you need. Many health experts advise drinking 2 – 3 litres of water a day regardless of thirst. Doing this will simply flush out the natural antibiotics and antibodies you have in your bladder. Drinking too little, however, won't help either. Your urine will become too concentrated. This in turn can lead to urinary infections and urinary stone formation.

Some fluids are bladder irritants and may make your symptoms worse. It might help your bladder to reduce your intake of these types of fluids such as:

- Caffeine (tea, green tea, coffee, cola drinks)
- Carbonated drinks (fizzy)
- Citrus juices
- Alcohol

You could replace them with non-caffeinated fluids such as:

- Diluted fruit squash
- Herbal tea (fruit, rooibos, flower, ginger, etc)
- Decaffeinated tea/coffee
- Soup

Cranberry may be useful to prevent urine infections. Check with your GP if you are taking blood thinning medication before taking cranberry. You can either take cranberry tablets or drink one cup of 100 per cent cranberry juice a day.

You may also wish to cut down on spicy or caffeinated foods as they may irritate the bladder.

Preventing urine infections

Washing the genital area once a day with water is adequate to prevent urine infections. Soap, bubble bath, vaginal douches and shower gel will disrupt the skin's natural defences. Use aqueous cream instead of soap once a day to wash only the external genital area, as this is gentle enough not to irritate the skin. You can buy this cheaply from chemists.

Other tips that may help to prevent urine infections include:

- avoid tight, particularly thong-style, underwear
- when wiping the genital area after using the toilet, always wipe from front to back.
- empty your bladder after sexual intercourse.

Bladder training

Try bladder training if you find that you are going to the toilet too often, passing only small amounts of urine and you are certain that you don't have an infection. Start by trying to hang on for an extra five minutes each time you want to go, although this will be uncomfortable.

When you have adjusted to this extra five minutes (this might take days, weeks or months), and it no longer distresses you, try ten minutes and so on.

At first you may leak urine more than normal as you are taking longer to get to the toilet, but you will find yourself leaking less within a few weeks. Wear a continence pad if you need to make yourself feel more secure, and less worried about being embarrassed.

When you are hanging on, try to distract yourself. Don't think about your bladder as it will make the urgency worse:

- Keep busy
- Make a shopping list
- Count backwards
- Sit on a hard chair
- Curl your toes and squeeze your buttocks
- Stay calm - don't get upset
- Tell your bladder that YOU are in charge, and not the other way around!

Aim to hold your bladder for two to four hours. Don't hold on for more than four hours.