

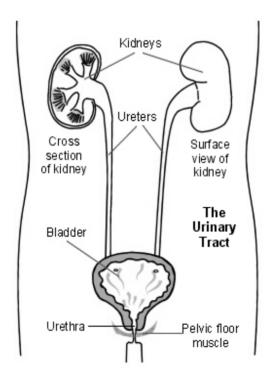
Bladder retraining treatment for urgency and urge incontinence

This leaflet explains what urge incontinence is and how we can help to reduce and relieve your symptoms. If you have any questions or concerns, please speak to one of the nurse specialists.



How do your bladder and kidneys normally work?

Your kidneys continually filter your blood by removing excess water and waste, which forms a solution called urine. This travels to your bladder, which acts as a temporary store until it is passed out of your body. It lies in front of your rectum or back passage (as well as the womb and vagina in women) and increases in size, rather like a balloon, as it fills up with urine.



Source: diagram copy EMIS and PiP 2006, as distributed on www.patient.co.uk

When your bladder is half full, it sends a message to your brain to make you aware that you will need to pass urine (urinate) soon. Your brain sends a message back to 'hold on' while you find a toilet. As your bladder fills up, the pressure inside it increases, giving you the urge (strong desire) to go to the toilet and pass urine.

When you pass urine, the muscles of your bladder contract, squeezing the urine out and down your urethra, see diagram on page 2. Your urethra is the tube that urine passes through before exiting the body.

Two other muscles help to control the passage of urine out of your body: the sphincter muscles, which surround your urethra; and the pelvic floor muscles, which support your bladder and bowel (as well as the womb in women). Both sets of muscles help to prevent urine from leaking out from the bladder when you do not want it to. They relax to allow you to pass urine, but remain contracted for the rest of the time.

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

What is urge incontinence?

Urinary incontinence is where you are unable to control your bladder when you pass urine. There are a number of different types of urinary incontinence, but the two most common types are:

- Urge incontinence, where you have a sudden need to pass urine (referred to as urgency) and may leak some urine before you reach a toilet. This type of incontinence is sometimes called an overactive bladder.
- Stress incontinence, where you leak urine without having the urge to go to the toilet. This may happen when you make a sudden movement, such as sneeze, laugh or exercise. The treatment for this type of incontinence is explained in our leaflets on **pelvic floor exercises**. Please ask us if you would like a copy.

The rest of this leaflet explains what **urge incontinence** is and how bladder retraining can help.

What causes urge incontinence?

Sometimes your bladder sends messages to your brain too early, before it is full. Your bladder overrides the 'hold on' message from your brain, causing your bladder to contract and release urine before you want it to. Because it does not fill up completely, you may need to go to the toilet more, referred to as frequency. People can also get into the habit of going to the toilet and emptying their bladder well before it is full. This makes you need to pass urine more frequently, as your bladder gets used to holding less urine and becomes more sensitive and overactive. An overactive bladder is more common as you grow older, due to changes in your bladder and pelvic floor muscles, as well as other medical conditions, such as diabetes (and the menopause in women). However, it is not a normal part of the ageing process and can occur in both men and women of all ages.

What is bladder retraining and how can it help?

Many people with urgency will get into the habit of going to the toilet too often, trying to make sure they are not caught short. This can make the problem of urgency even worse because the bladder gets used to holding less and less urine, causing it to shrink. It then 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.

The goal with bladder retraining is to cut the amount of times you pass urine down to six to eight times in a 24 hour period. This is done by gradually increasing the length of time between your trips to the toilet to pass urine. This may be difficult at first, but will become easier as your bladder adjusts to holding more urine. We offer bladder retraining in our bladder and bowel clinics. Anyone with an overactive bladder can attend these clinics.

Tips to help

You may find the following tips helpful when retraining your bladder:

- Do not rush to the toilet when you feel the need to pass urine. Sit still on a firm chair until the urge goes away and try to hold on as long as possible. If this is difficult for you, you can try to hold on for one minute at first and then gradually increase this time, according to your ability.
- Practise pelvic floor exercises, which strengthen your 'holding power'. Please ask us if you would like to read our leaflets on pelvic floor exercises.
- Do not get into the habit of going to the toilet 'just in case'.
- Try to distract your attention from your bladder by thinking of, or doing, something else.
- Try other forms of distraction/delaying tactics, such as crossing your legs, clenching your fists or applying pressure to the pelvic floor by sitting on something hard, such as the corner of a table. You could also try standing on your toes.
- Drink at least seven to eight cups of fluid a day. Do not reduce the amount of fluid you drink, as concentrated urine can irritate your bladder. This can make you more likely to develop a urinary tract infection (UTI) and need to pass urine more frequently. Reduce the amount of caffeine you drink, for example drink less tea and coffee, because caffeine can irritate the bladder and will make it harder for you to 'hold on'.

Further information

The Bladder and Bowel Foundation

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

t: 01926 357220

e: help@bladderandbowelcommunity.org

Disabled Living Foundation

Advises on and provides equipment for older and disabled people to lead independent lives. t: 0300 999 0004 w: www.dlf.org.uk

Parkinson's UK

Provides support and advice for people with Parkinson's disease and has a network of local groups. t: 0808 800 0303 e: hello@parkinsons.org.uk

Contact details

If you have any questions or concerns about your bladder retraining, please contact:

- Elaine Hazell (continence nurse specialist, urology) on 020 7188 6783,
- Ellie Stewart (clinical nurse specialist, urogynaecology) on 020 7188 3671,
- Florence llegbusi (continence nurse specialist, elderly care) on 020 7188 2083 or 020 7188 2093.

Alternatively, you can contact your GP. For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department. t: 020 7188 8801 (PALS) e: pals@astt.nhs.uk

t: 020 7188 3514 (complaints)

e: complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch: t: 020 7188 8815 e: languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day. t: 111

NHS Choices – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health. w: www.nhs.uk

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