This will allow you and your nurse to be able to see if you are progressing or having any difficulties.

General information

- Drink approximately 1 1/2 to 2 litres of fluid a day. If you do
 not have enough fluid or reduce your fluid intake, the urine
 you produce becomes more concentrated and may reduce
 the capacity of your bladder. In turn this may make you go
 more often
- You may become constipated and dehydrated by decreasing your fluids
- Potentially irritating beverages such as tea, coffee, cola, hot chocolate, alcohol, carbonated and acidic drink and artificial sweeteners may irritate the bladder
- Drinks which are less irritating to the bladder are decaffeinated tea, coffee, diluted squashes and water

What else will be covered at my clinic appointment?

Discussions will include:

- Lifestyle discussion in relation to your bladder symptoms i.e. diet, fluids, smoking and weight
- Possible medication which may be introduced to help your symptoms, if appropriate
- Any question/concerns you may have

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille please email the Patient Information team at patient.information@ulh.nhs.uk

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A guide to aid bladder re-training

Continence Department

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Aim of the leaflet

This leaflet is aimed at people who have bladder symptoms. It will provide information regarding an overactive bladder (OAB) and frequency and urgency and how they may be treated. It may not cover everything but further information will be given at your clinic appointment.

Bladder information

Your bladder is a muscular organ which fills and empties, allowing you to store and pass urine. A normal functioning bladder usually empties every 3 to 4 hours with voiding volumes in the range of 300 to 500mls. Your urine is normally acidic and creates a bladder environment where bacteria can survive. A good urinary flow of at least 200mls will aid your bladder to flush out and help prevent infection.

What is an overactive bladder?

Three factors make up the diagnosis of an overactive bladder. You may have all three or various combinations of these factors which are:

- **Urinary frequency:** going to the toilet more than eight times in 24 hours
- Urinary urgency: an urgent desire to pass urine
- Urge incontinence: leakage of urine before you reach the toilet

How is an OAB and frequency/urgency diagnosed?

- OAB is diagnosed from an investigation on your bladder called Urodynamics. Not everyone needs this investigation to address their bladder symptoms.
- Frequency and urgency symptoms can be detected by observing your baseline frequency voiding chart. You will have been asked to complete the chart prior to your appointment with the nursing team.

What may cause an OAB or frequency/urgency?

These may be caused or contributed to by:

- A Urinary tract infection (UTI)
- Constipation
- Prostate enlargement
- Anxiety
- Certain medication
- Through the nervous system i.e. a cerebral vascular accident (CVA), Parkinson's disease, diabetes, multiple sclerosis (MS), spinal cord injury (SCI)
- Alcohol

What will bladder retraining achieve?

It will help towards:

- Reducing the amount of times you pass urine to between 4 to 8 times per day
- Increasing the times between toilet visits to 3 to 4 hours
- Reducing the severe urgency to pass urine
- Encouraging your bladder to hold more urine

How do I undertake bladder retraining?

Start by avoiding "going just in case," or every time you pass or are near a toilet. Look at how often you are going to the toilet; it may be every 1 1/2 hours or every hour or less. Aim to hold on for a few minutes more, then as your confidence grows, gradually lengthen the time interval until you are passing urine perhaps every 3 to 4 hours. You may set a goal/time that you feel is acceptable for you personally and fits in with your lifestyle. Try distraction techniques to gain your confidence, which in turn will allow your bladder to stretch and hold more urine. To assess your improvement against your baseline chart, a further chart will need to be completed, required for 3 days prior to your next appointment.