URINARY URGENCY AND FREQUENCY

DIETARY MANIPULATION

Certain substances are known to irritate the bladder: Nicotine, caffeine, alcohol, and citrus to name a few. Try eliminating these from your diet or switch to decaffeinated products and see if your symptoms improve. Keep a diary and on particularly bad days try to trace back to see what foods or drinks may have contributed. Try to also identify any other substances or conditions which seem to irritate your bladder, eg rainy days, spicy and acidic foods, fizzy drinks etc. Some people may also benefit from avoiding foods that contain calcium oxalate.

FLUID INTAKE

Try to keep your fluid intake between 1.5 and 2 litres a day. Less fluid is required in winter, more in summer. This amounts to about 6-8 cups a day. Try to space these drinks out evenly through the day, and try to keep a fair proportion of it water or some other non-irritating fluid. If you get up more than once a night, try to restrict your fluid intake for 3-4 hours before going to bed.

BLADDER TRAINING

Bladder Training is often the most important form of treatment in the management of urinary urgency and frequency and for people with urge incontinence. The goal is to teach your bladder to slowly hold more and more, and to delay voiding until you tell your bladder when to go NOT when it tells you. This is done by gradually increasing the time intervals between voiding. To do this, we first make you fill in a bladder diary recording every time you go over a 48 hour period. From this we can then see, how often you empty, how big a volume your bladder holds, and how long you normally can hold on for between trips to the toilet. We then set a designated time interval (usually 1 hour) and ask that you suppress any urge to go within this time. To suppress the urge, try to distract your thoughts with something else, gently contract your pelvic floor muscles, curl your toes, and try to relax and breathe normally through it until it passes. You may initially need to cross your legs, use external pressure by pushing up with your hands or sit on the edge of something if the urge is strong. Try to relax and stay calm, the more uptight you are, the more your nervous system makes you want to go. By not answering signals to go and by holding off, you will train the bladder muscle to relax and fill more. Once you can consistently delay voiding for the designated interval, slowly increase the interval by 15-20 mins at a time. Keep progressing until you only need to go approximately 7 times a day and with an interval of 2-3 hours between. Remember this drill is only for during the day when you are awake. Keep a written record of your progress by recording your number of trips to the toilet in a day every few weeks to see your progress.

MEDICATION

Your doctor may prescribe medication to help your symptoms. It is important to remember these medications may have some side effects. Most of these are temporary and will go away after a few weeks. The most common side effects are a dry mouth, drowsiness, constipation, blurry vision, and an increased heart rate. If you experience a dry mouth, do not increase your fluid intake. Instead try sucking on a lolly, chewing gum, or eat a piece of moist fruit. If you are taking diuretics, consult your doctor about the best time of day to take them in order to minimise the disruption to your day (or night). S/he may suggest a medication change.