



Overactive Bladder Won't Go Away on Its Own

You don't need to live with overactive bladder. Learn about your treatment options.

Overactive bladder (OAB) is the frequent and urgent need to pee.



At least 4 in 10 women have OAB

More than 1 in 2 women think that symptoms of OAB are normal signs of aging — but they're not.

OAB can be treated, but it won't go away on its own.



Symptoms of Overactive Bladder



Urgency: Sudden and urgent need to pee



Urge incontinence: The sudden and urgent need to pee that causes you to leak urine



Frequency: Peeing 8 or more times in 24 hours



Nocturia: Waking up more than once at night to pee

In a recent survey, **3 in 5 women** with symptoms found leaking urine to be “extremely bothersome.”



If OAB isn't treated, symptoms can get worse.

- Bladder muscles can weaken
- Pelvic floor tissues can thin

3 in 4 women with OAB report some negative impact from the condition, including:

- Getting a bad night's sleep
- Interference with social activities
- Concerns about intimacy



Who Can Help with Overactive Bladder

Primary care provider or gynecologist

- Your first line of support
- Can diagnose you and refer you to specialists

Urologists

- Specialize in the urinary tract

Urogynecologists

- Specialize in the female urinary tract and pelvic floor

Pelvic floor therapists

- Physical therapists who specialize in the pelvic floor

Treatments for Overactive Bladder

One treatment option alone might be enough for you.

Or you might need to try a few treatments together.

Treatments include

Lifestyle changes

- **Bladder training**
 - Keep a bladder diary to track what you eat and drink and when you pee
 - Double voiding: Peeing a few seconds after you already peed
 - Delayed voiding: Waiting to pee a little longer each time
 - Timed peeing: Only peeing at scheduled times whether you have to or not
- **Pelvic floor muscle exercises**
- **Biofeedback**, using sensors to help you control your pelvic floor muscles
- **Quit using tobacco products**
- **Drink enough water**
- **Limit food and drinks that irritate your bladder**, such as caffeine, alcohol, carbonated drinks, citrus, tomatoes, chocolate, spicy foods
- **Exercise every day**

Medications

- **Bladder muscle relaxants** (oral or topical gel or patch)
- **Botox injections** into the bladder muscle
- **Vaginal estrogen therapy** for postmenopausal women
- **Certain antidepressants**

Nerve stimulation

Electrical pulses can help the nerve signals between your brain and bladder communicate better.

- **Percutaneous tibial nerve stimulation (PTNS):** Sends pulses through your leg to your lower back
- **Sacral neuromodulation (SNM):** Sends pulses to stimulate nerves that control your bladder

New implantable and wearable devices allow more options for at-home nerve stimulation treatment.

Surgery

In very serious cases, your healthcare provider might recommend surgery to make your bladder bigger or to reroute the flow of pee.



Got symptoms? Get treated.