

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.

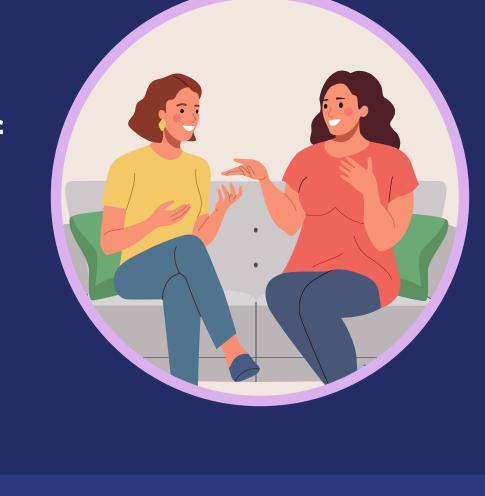


At least 4 in 10 women have OAB

symptoms of OAB are normal signs of aging — but they're not. OAB can be treated, but it won't go

More than 1 in 2 women think that

away on its own.





Symptoms of Overactive Bladder **Urgency:** Sudden and urgent need

to leak urine



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



Frequency: Peeing 8 or more times in 24 hours

Nocturia: Waking up more than



In a recent survey, 3 in 5 women

to be "extremely bothersome." If OAB isn't treated, symptoms can get worse.

with symptoms found leaking urine

once at night to pee



• 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

- Primary care provider or gynecologist Can diagnose you and refer you

Who Can Help with Overactive Bladder

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

Pelvic floor muscle exercises

you have to or not

Drink enough water

Exercise every day

gel or patch)

- Biofeedback, using sensors to help you control your pelvic floor muscles Quit using tobacco products
- Limit food and drinks that irritate your bladder, such as caffeine, alcohol, carbonated drinks, citrus, tomatoes, chocolate, spicy foods
- Medications Bladder muscle relaxants (oral or topical
- 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.

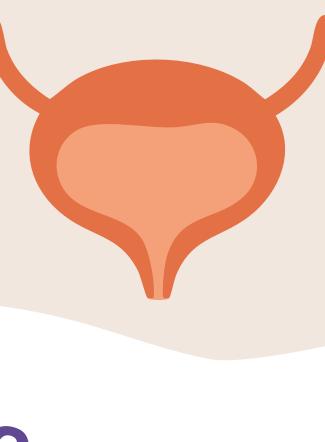
pulses through your leg to your lower back

 Sacral neuromodulation (SNM): Sends pulses to stimulate nerves that control your bladder

Percutaneous tibial nerve stimulation (PTNS): Sends

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



Or you might need to try a few treatments together.