

Bladder Retraining

Simple measures to control urine output and reduce bladder stimulation can often significantly reduce the severity of lower urinary tract symptoms. We recommend that you adhere to the following advice in the hope of improving your voiding habit and increasing the potential of any drug or surgical therapy you may be offered.

Fluid advice

Drinking patterns often contribute to urinary symptoms. The amount that you drink is about the same as the amount that you pass. Some types of fluid stimulate the bladder more than others because they cause your kidneys to produce more urine; examples include those containing alcohol or caffeine. These can also irritate your bladder lining and excite the muscle of the bladder wall making you want to pass urine more urgently and more frequently.

You should cut down or avoid:

- Tea & coffee
- Alcohol
- Coke
- Concentrated fruit juice

Conversely, decaffeinated drinks, water and squash are usually well tolerated.

How much should I drink and when?

You should drink about 2 litres per day – this will normally be very effectively regulated by thirst. If you are waking at night to pass urine, avoid drinks for about three hours before you go to bed and ensure that you empty your bladder before retiring to bed.

If you are taking diuretics for other medical problems, this advice may not help you. You should continue to take all prescribed medication.

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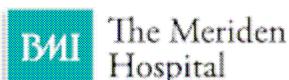
Many patients receive very little warning of the need to pass urine (urgency) and pass water frequently (frequency). Bladder retraining can help to improve frequency and urgency, often in combination with pelvic floor exercises and medication.

The aim of retraining is to return to voiding less than six or eight times a day. To start, you should record how often you void and how much you pass at each episode for one week. You can then set an initial target. For instance, if your diary demonstrates that you have been passing urine hourly, your first target might be to pass urine every 75 minutes. The following techniques may help you "hold on":

- Sit on a hard surface, to put pressure on the pelvic floor.
- Tighten your pelvic floor five times. This helps to relax the bladder.
- Distract yourself by, for example, reading the paper, watching tv or listening to the radio.

After achieving a target, set a new one. Continue in this way until your symptoms improve and you can manage to visit the toilet every three to four hours. It may take several weeks or months to get back into a normal voiding pattern.

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