



What Are the Common Signs of Overactive Bladder?

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Signs of Overactive Bladder

You've undoubtedly seen commercials on TV, touting the benefits of overactive bladder (OAB) medications. You've probably seen ads for adult incontinence products in magazines. All of a sudden, you're actually paying attention, because you're wondering, "Is it time I ask my physician if I have an overactive bladder?"

Well, the Urology Care Foundation estimates that some 33 million Americans have OAB; they even postulate that 30 percent of men and 40 percent have some type of OAB symptoms. With statistics this startling, it wouldn't be out of the realm of possibility that yes, you could have OAB.

However, it may be helpful to explore overactive bladder signs, symptoms, and causes before you pick up the phone to make an appointment with your physician.

What Are the Symptoms and Signs of OAB?

The symptoms and signs of OAB are typically self-limiting; this means that the symptoms are mostly restricted to the genitourinary system.

You probably feel a sudden urge to urinate; this urge to urinate can be very difficult to control. You can even experience urge incontinence, an involuntary release of urine, immediately following the urgent need to urinate.

You are probably urinating very frequently – upwards of eight or more times per day. You're most likely waking up at least twice during the night – this is called nocturia.

What it all boils down to, for most people, is that OAB has the power to interfere with daily living and disrupt sleep. Because of frequent bathroom visits, activities are interrupted and the quality of sleep is diminished.

As you can probably tell from these symptoms, OAB is a "collection" of symptoms. You may have all of these symptoms, or only one or two.

What Causes Overactive Bladder?

According to Mayo Clinic, OAB is common in the aging population. However, just because it is common does not mean that it is a normal part of aging. Understanding the causes of OAB and treating it at the cause is helpful, if possible; there are also a variety of other medications and methods to treat OAB.

When the bladder is working effectively, the kidneys produce urine. The urine drains from the kidneys to the bladder.

The bladder drains the urine out of your body through the urethra. All of this is made possible due to the nervous

system; when the bladder becomes full, a signal is sent to the brain – this signal tells the brain that you need to urinate.

When you urinate, the nerves relax the pelvic floor and the muscles of the urethra. The muscles of the bladder contract, causing the urine to be pushed out.

When you have OAB, the bladder muscles contract ineffectively. This happens regardless of the amount of urine in the bladder. The involuntary action of the bladder causes the sudden urge to urinate.

There are any number of things that can actually cause OAB; often times the cause is idiopathic, meaning that there is no known cause.

Possible Causes of Overactive Bladder

- You may have specific **neurologic conditions** that cause OAB, such as a stroke, multiple sclerosis, Alzheimer's disease, or declining cognitive function due to aging. Diabetes can also contribute to OAB; having elevated blood glucose levels can cause nerve damage throughout the body – and your bladder is not immune to this nerve damage.
- **Physical abnormalities** can also cause OAB. Examples include abnormalities of the bladder, like tumors or bladder stones, enlarged prostate, constipation, or prior surgeries to that area.
- Certain **medications** may contribute to OAB symptoms, especially medications that increase urine production, such as diuretics.
- Having **weak pelvic muscles**, in general, is also a culprit. This is common in women, especially women who have experienced pregnancy and childbirth. The force of a baby in the uterus can stretch the bladder, making it weaker. This weakening of the bladder muscles can cause the bladder to sag out of its natural place. It can even cause the urethra to stretch.
- As discussed prior, **aging**, in general, contributes to OAB. Physicians aren't sure *why* aging may cause OAB, but one theory is that the aging body has a diminished supply of estrogen (specifically due to menopause) – and this decrease in estrogen *may* be the culprit.
- Being **overweight** puts added pressure on your bladder. This pressure can cause urine to leak out of the bladder, thus contributing to OAB symptoms.
- A **urinary tract infection** can also cause OAB. The UTI may irritate the nerves of the bladder, thus causing the bladder muscles to spasm.

Diagnosis of OAB

Luckily, diagnosis of OAB is relatively simple. It typically doesn't require diagnostic exams or bloodwork.

It does require honesty on your part – you must sit down with your physician and outline the symptoms you have been experiencing, and you must be completely straightforward. Remember, your physician cannot help you if you are not honest.

Once you choose to have a discussion with your physician, he or she will obtain a medical history and look for any signs of overactive bladder.

The history will most likely be focused on your genitourinary system, and will probably include questions about your diet as well. Your physician is probably looking for clues as to what is causing OAB – a neurologic issue, or something reversible, like a UTI.

Your physician will most likely perform a focused physical exam, focusing on your pelvic region.

After your physical exam, your physician may discuss with you about different overactive bladder treatment options, medicinal and non-medication strategies, or a bladder training program.

The Bottom Line...

It is important to be candid with your physician regarding OAB signs and symptoms. Seeking a diagnosis is the first step in getting treatment – and hopefully a better quality of life! So don't be afraid to talk about your symptoms or your concerns with your doctor.