

# GYNAECOLOGY & OBSTETRICS UPDATE

Website for Doctors [MarkMalak.com](http://MarkMalak.com)

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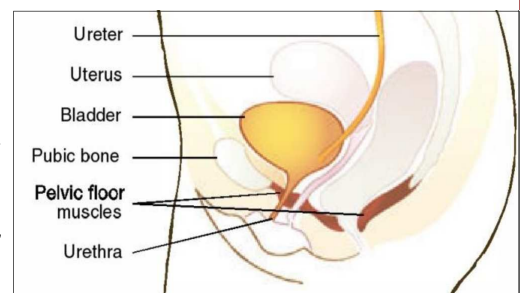
M Malak, A Grimston,  
J Andrews, N Lawton,  
A Spirou, W Fletcher

**Integrated management of pelvic floor disorders: Prolapse, urinary incontinence (1ry & recurrent), frequency, urgency and recurrent cystitis**

**NHS Clinical  
Excellence  
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(achieving the highest  
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## A Healthy Bladder

Bladder health is a key component of overall health. Internal and external factors influence bladder health. Primary prevention through education regarding normal bladder structures and functioning can help promote healthy bladder habits and early treatment seeking for bladder conditions. It is important to raise awareness about bladder health that, in turn, will reduce the associated personal, social and economic burden, including anxiety and depression related to stigma and costs associated with bladder conditions. ***Increases in healthcare-seeking behaviours should result from knowledge that most bladder conditions are treatable and a range of treatment options exist, including self-management.***



Promoting and achieving optimal bladder health can help minimise the effects of bladder conditions on the affected population, healthcare professionals, educators, and employers. Bladder health initiatives have focused largely on primary prevention of incontinence only. ***It is very important, however, to***

***promote wide-spread bladder health awareness in the context of overall health.***

**An unhealthy bladder** may be due to a number of conditions that cause lower urinary tract symptoms (LUTS), e.g. overactive bladder (OAB), bladder outlet obstruction (BOO), bladder pain syndrome (BPS), urinary tract infection (UTI) and bladder cancers. LUTS can be divided into three categories: storage, voiding and postmicturition.

- **Storage symptoms** include urinary incontinence (UI, including stress, urgency or mixed incontinence), increased daytime voiding frequency, nocturia and urgency.
- **Voiding symptoms** include hesitancy, slow stream, straining and spraying.
- **Postmicturition symptoms** include feeling of incomplete emptying and postmicturition leakage.
- **BPS** is defined as an unpleasant sensation (pain, pressure discomfort) perceived to be related to the urinary bladder, associated with LUTS of more than 6 weeks duration, in the absence of infection or other identifiable causes.

Consensus was reached that there are established clinical directives that are generally agreed upon to promote and maintain bladder health. These include:

- consume an adequate amount of fluid (25–30 ml/kg per day, the amount needed to empty the bladder every 3 to 4 h),**
- moderate consumption of foods or beverages known to irritate the bladder:** coffee, tea, soda, alcoholic beverages, citrus fruits and juices, artificial sweeteners and hot peppers
- adopt a relaxed position for urination and allow time for the bladder to empty,**
- use self-management practices of pelvic floor muscle training, bladder training and pre-emptive pelvic floor contraction to improve and maintain bladder health,**
- avoid constipation,**
- avoid obesity; and**
- do not smoke.**

Bladder conditions affect a large proportion of the world population. Over 45% of the world population aged  $\geq 20$  years (1.9 billion people) are affected by LUTS. Approximately 8.2% are estimated to be affected by UI, including 3.2% with stress UI, 1.2% with urgency UI, 1.3% with mixed UI. About 11% of the world population (455 million people) affected by OAB.

**Reference:** A Healthy Bladder: A Consensus Statement: [http://www.medscape.com/viewarticle/750519\\_2](http://www.medscape.com/viewarticle/750519_2)