



# WE COUNT

MEASURING THE HUMAN TOLL  
OF INCONTINENCE

## Overactive Bladder: Understanding your treatment options

### What is Overactive Bladder?

Overactive Bladder (OAB) is a condition where you frequently feel a strong, sudden need to urinate—even when your bladder isn't full. It can include:

- Urgency: feeling like you have to go right away
- Frequency: going more than 8 times a day
- Nocturia: waking up 2 or more times a night to urinate
- Urge incontinence: leaking urine before you make it to the bathroom

OAB often worsens with age or hormone changes, but it's not a normal part of aging. The good news? It's treatable.

**You DON'T have to live with the constant urge to go!**

*You're not alone!*

Up to

**40%**

of women in the U.S.  
experience OAB

### Lifestyle Changes

Many people find that small changes to daily habits can significantly improve symptoms. These may include:



#### Diet and Fluid Management

- Limit bladder irritants like caffeine, alcohol, spicy foods, citrus and carbonated drinks.
- Drink enough water, but space it throughout the day to avoid bladder overload.
- Avoid drinking large amounts before bedtime to reduce nighttime trips.



#### Bladder Training & Pelvic Floor Exercises

- Quick flicks: Rapid contractions of your pelvic muscles when you feel urgency.
- Kegels: Strengthen your pelvic floor and improve bladder control.
- A pelvic floor physical therapist can help guide these techniques.



#### Scheduled Bathroom Visits

- Timed voiding: Urinate on a regular schedule (e.g., every 2–4 hours), even if you don't feel the urge.
- Delayed voiding: Gradually increase the time between trips to the bathroom (if recommended by your doctor).



#### Prevent Constipation

- Eat fiber-rich foods like fruits, vegetables, beans and whole grains.
- Stay active and hydrated—regular bowel movements can reduce bladder pressure.



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### Medical Treatments

If your symptoms don't improve with lifestyle changes, there are a number of safe and effective medical options to consider:

#### Oral Medications

- Anticholinergics (e.g., oxybutynin, tolterodine) help relax the bladder but may cause dry mouth, constipation, or drowsiness.
- 3-Adrenergic Agonists (e.g., mirabegron, vibegron) also relax the bladder muscle and are often better tolerated with fewer side effects. These are especially helpful for people concerned about cognitive or dry mouth side effects.

#### Bladder Botox® (OnabotulinumtoxinA)

- Injected directly into the bladder wall by a specialist
- Helps reduce involuntary muscle contractions and leakage
- May require repeat treatments every 6–9 months
- A small number of patients may need to temporarily use a catheter

#### Nerve Stimulation Therapies

Many people who haven't found relief with medications find success with nerve stimulation treatments, which help restore healthy communication between your brain and bladder.

- Percutaneous Tibial Nerve Stimulation (PTNS) is an in-office treatment that uses a small needle in your ankle to send signals to the bladder.
- Sacral Neuromodulation (SNM) involves a small device being implanted near your tailbone that sends gentle pulses to the sacral nerve to regulate bladder function. You can try it during a test phase before deciding on long-term use.

### Talk with Your Doctor Today

You don't need to wait until symptoms become unbearable. If OAB is affecting your sleep, daily routines, travel plans or confidence, it's time to speak up. Bring a bladder diary ([click here for a free download](#)), a list of your symptoms and whatever questions you have to your appointment - and don't be shy! There's almost certainly a treatment plan that can help you take back control.

### Key Takeaways

- OAB is common—but treatable.
- You are not alone.
- There are *many* options to help you feel better.



Ready to learn more? [Click here to begin your journey overcoming OAB...](#)

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we-count](https://NAFC.org/we-count)

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