



Incontinence & Neurogenic Bladder

DOCTOR-PATIENT DISCUSSION GUIDE & RESOURCES

Do you have a nervous system condition that causes incontinence or worsens your condition? If so, there are treatments and solutions that may help. Incontinence may not be the focus of your doctor appointments, but treating it can vastly improve your quality of life.

NEUROGENIC BLADDER OVERVIEW

There's a name for nervous system conditions (also known as neurological conditions) that affect the bladder: Neurogenic bladder. There are two major types of bladder control problems that are associated with neurogenic bladder. Depending on the nerves involved and the nature of the damage, the bladder becomes either overactive, which is called spastic or hyper-reflexive, or underactive, which is called flaccid or hypotonic.

Neurogenic bladder can be congenital (that is, present at birth) or it can arise from various medical conditions, including stroke, Parkinson's disease, multiple sclerosis, spinal cord injuries, spinal surgeries, erectile dysfunction, trauma/accidents, central nervous system tumors and heavy metal poisoning.

The most common symptom of neurogenic bladder is the inability to control urination. Other symptoms may include:

- A weak or dribbling urinary stream
- Frequent urination (typically eight or more times per day)
- Urgency (a feeling or need to urinate immediately)
- Painful urination, which may also mean that there is a urinary tract infection

HOW IS NEUROGENIC BLADDER TREATED?

The main treatments for neurogenic bladder include the following:

- Clean intermittent catheterization (CIC): Catheters are thin, flexible tubes that can be inserted through the urethra and into the bladder to drain urine.
- Drugs: These include anticholinergic medications (oxybutynin, tolterodine, and others)
- Injections of botulinum A toxin (Botox®): A doctor injects Botox into the bladder or urinary muscles.
- Bladder augmentation (augmentation cystoplasty): This is a surgery in which segments of the intestine (sigmoid colon) are removed and attached to the walls of the bladder. This reduces the bladder's internal pressure and increases its ability to store urine.
- Ileal conduit: Part of the small bowel is used to make a urine stoma – an opening in the body. Urine is drained through the stoma into a small bag attached to the outside of the body.
- Lifestyle changes: These might include avoiding certain foods or drinks that can irritate the bladder. These include certain caffeinated drinks like coffee, carbonated beverages, spicy foods and citrus fruit. Losing weight can ease stress on the bladder. A behavioral treatment called delayed voiding may help some people with urine control.
- Supplemental products: Absorbent undergarments, pads, panty shields, panty liners, and adult diapers can help prevent wetness and odors while protecting skin and clothing. Bed pads can protect sheets and mattresses.

SEE REVERSE SIDE FOR  WHAT TO ASK YOUR DOCTOR?



Incontinence & Neurogenic Bladder

DOCTOR-PATIENT DISCUSSION GUIDE & RESOURCES

WHAT TO ASK YOUR DOCTOR?

Talking with your doctor about your condition is often the hardest part of your path to treatment. Don't let embarrassment get in the way of the medical help you deserve. Take this guide with you to your next appointment and use these questions to direct your conversation – you'll find that an open, honest discussion makes it much easier for you and your doctor to find a solution that's right for you:

- What treatments have had good success rates in people with my condition?
- What are the risks, benefits and side effects of these treatments?
- Why do you recommend this treatment for me?
- What can I expect before, during and after treatment?
- Are there any tests needed to prepare me for his treatment?
- How can I prepare for this treatment? Are there lifestyle or behavioral changes I can make to help improve my incontinence and increase the chances for a successful treatment?
- If this new treatment is not successful, what are the next steps?
- What should I expect if I do not take the medicine or have the test or procedure?
- Other

HELPFUL RESOURCES:

- | | |
|--|--|
| • American Parkinson Disease Association, Inc. | www.apdaparkinson.org |
| • Families for Depression Awareness | www.familyaware.org |
| • The National Parkinson Foundation | www.parkinson.org |
| • The National Rehabilitation Information Center | www.naric.com |
| • The National Spinal Cord Injury Association | www.spinalcord.org |
| • Spina Bifida Association of America | www.sbaa.org |
| • Spinal Cord Injury Network International | www.spinalcordinjury.org |
| • United Cerebral Palsy Association | www.ucp.org |
| • United Spinal Association | www.unitedspinal.org |



1-800-BLADDER
www.NAFC.org

Sources: <http://www.hopkinsmedicine.org> , www.clevelandclinic.org, www.nafc.org