



Overactive bladder training

This leaflet aims to help you if you have an overactive bladder and experience very sudden, intense and often frequent desires to pass urine (pee).

What causes an overactive bladder?

1. Bladder spasms (called *detrusor over-activity*)

The detrusor is the muscle controlling the bladder. Detrusor over-activity is where the bladder intermittently squeezes while filling with urine. These spasms of the bladder muscle can give a sudden intense urge to pee even though there may only be a small volume of urine in the bladder at that time.

2. Tight bladder (called *decreased bladder compliance*)

Decreased bladder compliance is where the bladder is small and the wall of the bladder is stiff. As a result, as the bladder fills, the bladder wall has difficulty stretching and expanding. This tightness of the bladder wall results in a stronger sensation of needing to pee than would normally be expected with low volumes of urine.

3. Increased bladder nerve signal

There are a number of nerves that send messages from the bladder to tell the brain how full it is getting. Sometimes, these nerves become overactive, resulting in large signals being sent to brain even when only small volume of urine is present in the bladder.

4. Urge incontinence

Sometimes, the bladder urgency can be associated with urine leakage called urge incontinence. Urge incontinence is where a person not only feels an intense urge to pee, but also leaks urine while trying to get to the toilet. It could be related to weakness of pelvic floor muscles preventing the bladder valve in the urethra staying closed.

5. Weak pelvic floor muscles

Weak pelvic floor muscles may cause difficulty squeezing the urethra (bladder valve) closed. This allows urine to escape when you are not on the toilet. Also, it causes difficulty sending messages to the bladder to stay relaxed while it is filling. This can lead to increased feelings of needing to go to the toilet.

How can we help overactive bladder and urge incontinence?

There are various treatments available to help you to get back control of your bladder.

Getting back control

Step 1. Lifestyle and diet modification:

- **Drinking ‘too much’ or ‘too little’ can make it worse.** Try to drink gradually so your bladder fills slowly, drinking too much, too quickly can cause bladder spasms. You should be drinking around 1.5-2L of water per day.
- **Reduce your caffeine intake.** Caffeine is present in tea, coffee, sports drinks, many soft drinks and chocolates. Reducing caffeine will help with your urgency and incontinence.
- **Reduce artificial sweeteners.** Artificial sweeteners irritate the bladder and cutting them down reduces urgency. Many ‘reduced sugar’ products now contain artificial sweeteners, so it’s always good to check the ingredients.
- **Space your fluid intake throughout the day.** Some people avoid drinking at work or when going out, and then drink large quantities in short period of time. This fills up the bladder quickly and causes urgency.

Step 2. Behaviour training: normal bladder sensation:

Normally, the bladder can hold up to 400-500mls of urine. The sensation that urine is present happens when about 150-200mls is in the bladder. As more and more urine enters the bladder, the continued expansion of the wall should create a gradually increasing urge to pass urine. It is expected that once the bladder reaches approximately 400-500mls, most people will feel a reasonably strong urge to pass urine.

Behaviour training is about changing how you react to feelings of ‘urgency’. The first step is to realise that if you can wait a minute or so and use some techniques known to relax the bladder, the spasm will often pass. **Waiting and walking to the toilet after the spasm has passed will mean you are less likely to leak urine because there is less pressure trying to push the urine out.**

How you can help the bladder spasm pass

Try the following steps:

- Squeeze and hold your pelvic floor muscles.
- Distracting yourself, e.g. counting backwards or making a list. When a bladder spasm occurs, try to concentrate on something difficult that involves numbers, lists, order of tasks etc.(tricks your brain into focusing on something else other than bladder sensation).
- Relaxed breathing.
- Curling your toes in the shoes/standing on your toes.
- Rising up onto the balls of your feet and tightening your calf muscles.
- Sitting down on the chair/arm rest/corner of table/sitting down with the heel of your foot pressed up against your groin. When you give pressure, your body will focus on sending these messages rather than sending messages from the bladder, and will reduce your sensation of urgency.

Step 3. Bladder training / bladder drill:

This is a technique where you try to go to the toilet at set times.

- Try to go to the toilet at a set time everyday whether you feel the need to pee or not (for example starting by going to the toilet every hour). The aim is to gradually increase the time between going to the toilet, thereby decreasing the urgency and incontinence.

- Stick with the same time until you are able to reach the toilet comfortably (no urgency or incontinence). If you feel the urge to pee before the designated time, try to use the distraction techniques as above in order to reduce the urgency to reach the designated time.
- If you achieve three days in a row without any urgency sensations or leakage at a particular time, then you progress to next stage of holding longer, e.g. wait another 15 min-half an hour.
- If you find this difficult, you can start by simply delaying going to pee for 5 minutes, gradually extending this time as your bladder gets used to it.

The schedule interval can be increased by 15-30 minutes each week depending on your progress and how bad the urgency is.

Stage 1	1-hour intervals
Stage 2	1 hour 15 minute intervals
Stage 3	1 hour 30 minute intervals
Stage 4	1 hour 45 minute intervals
Stage 5	2-hour intervals
Stage 6	2 hour 15 minute intervals

Aim to reach 2 hour 40 minute to 3-hour intervals between emptying your bladder.

You would be given a series of bladder diaries by your physiotherapist to maintain through the period of your bladder training to assess your progress.

Other treatments available to help an overactive bladder

- Electrical stimulation treatments
- Medications
- Botox therapy

How to contact us

Pelvic Health and Maternity Physiotherapists, RBFT Physiotherapy Department **Tel: 0118 322 7811 or 7812.**

Where can I find more information?

- International Continence Society - www.ics.org
- Pelvic Obstetric ND Gynaecological Physiotherapy - www.pogp.csp.org.uk
- NHS website - www.nhs.uk/conditions/urinary-incontinence/

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBHFT Pelvic Health & Maternity Physiotherapists

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