

Overactive bladder and urgency: when you can't wait to go

Urgency is the sudden feeling that waiting may no longer be possible, and it usually means the bladder's signaling is too sensitive rather than that the bladder is weak. Once infection, poor emptying and other causes are considered, a range of treatments, from bladder training to nerve stimulation and Botox injections, can restore control.

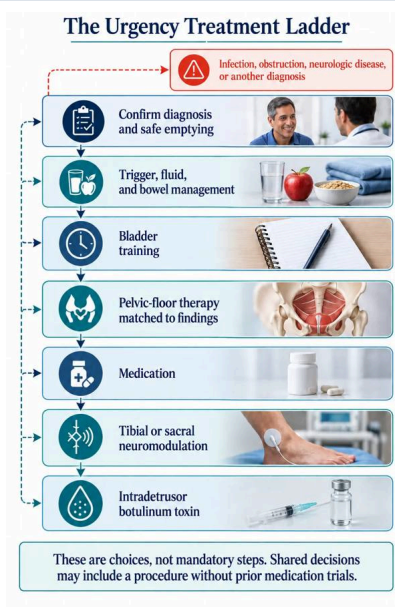


Figure 6.2. The Urgency Treatment Ladder. This teaching diagram groups treatment choices; it does not require every patient to start at the bottom or complete each step.

Key points

- Frequency is how often you go; urgency is the sudden, hard-to-defer quality of the urge.
- Overactive bladder is diagnosed only after other relevant causes have been considered.
- A post-void residual matters because urgency medications can be inappropriate when emptying is already poor.
- Generic advice to "do Kegels" is not always right; some people need pelvic-floor relaxation and coordination instead.
- The treatment ladder explains choices; it is not a compulsory order, and a procedure can be discussed without trying everything else first.
- Success means living normally again, not a perfectly silent bladder.

Get prompt care if you notice

- Sudden complete inability to urinate
- Fever or chills with flank pain
- Visible blood in the urine
- Urinary changes with new leg weakness, numbness or other new neurologic symptoms

Questions to ask your urologist

- What appears to be causing my urgency, and is my bladder emptying safely?
- Could infection, a medication, constipation or my pelvic floor be contributing?
- Would a bladder diary or pelvic-floor physical therapy help me?
- What is the goal of this medication or procedure, and what should improve first?
- Which options remain if the first treatment is not enough?

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