



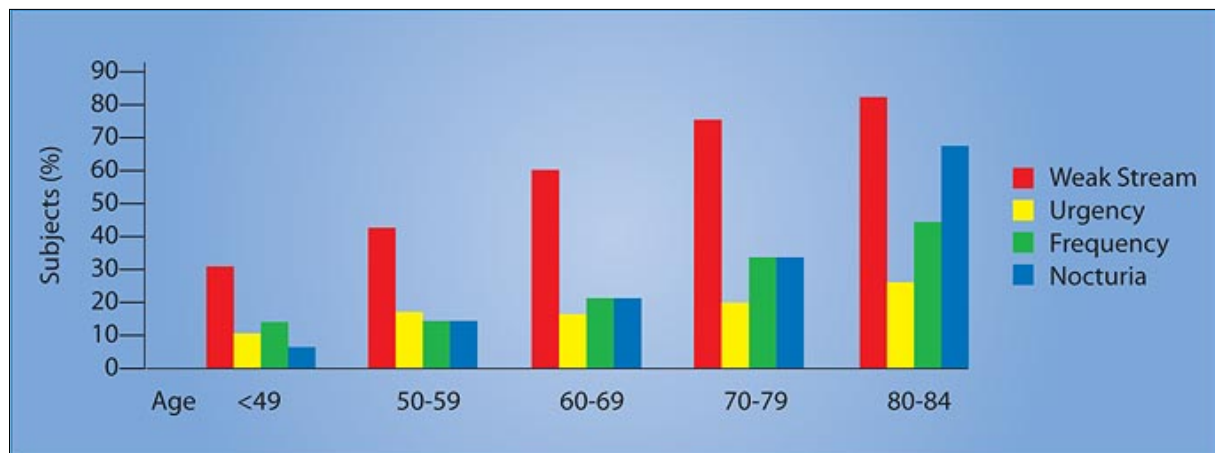
The British Association of Urological Surgeons

35-43 Lincoln's Inn Fields
London
WC2A 3PE

Phone: +44 (0)20 7869 6950
Fax: +44 (0)20 7404 5048
Website: www.baus.org.uk
E-mail: admin@baus.org.uk

MALE LOWER URINARY TRACT SYMPTOMS (LUTS) FREQUENTLY-ASKED QUESTIONS

What are the symptoms of LUTS?



Lower urinary tract symptoms (LUTS) include:

- a need to pass urine very frequently (frequency) without much warning (urgency);
- associated leakage of urine (urge incontinence);
- not being able to pass urine immediately (hesitancy);
- a decrease in the force of the urinary stream;
- it may be associated with having to pass urine more frequently at night (nocturia).

Sometimes, after prostate surgery, there can be leakage of urine during physical activity or when coughing / sneezing; this is called **stress incontinence**. Men can also experience leakage on walking away from the toilet (**post-micturition dribble**).

What is normal?

The kidneys filter blood continuously to produce urine which is stored in the bladder. The bladder will hold 300 – 500 ml of urine before an urge to pass urine is felt. This gives you time to reach the toilet. For various reasons, this message can become blurred, or your bladder may empty without warning, before you have time to reach a toilet.

At the bottom of the bladder is the prostate gland which encircles the urethra (water pipe). In men over 60, it is common for this gland to enlarge and give rise to the symptoms described above. If this happens, you should consult your GP, so that he/she can examine your prostate gland.

Going to the toilet more than six to eight times in 24 hours, with one of these visits occurring at night, is considered abnormal.

There are several strategies that can be employed to control symptoms of urgency and frequency.

How should I manage my fluid intake?

A daily fluid intake of 1.5 to 2 litres is recommended. This is equivalent to five to seven mugs of fluid.

Caffeine tends to act as a bladder irritant so it is recommended that you try caffeine-free products. Drink water or fruit squash instead of caffeinated drinks (tea, coffee, chocolate, Red Bull, Lucozade or cocoa). If you drink large quantities of caffeinated fluids, you should reduce your intake gradually (over a fortnight or so) to prevent withdrawal symptoms.



Large volumes of fluid over a short period of time, together with fizzy drinks, can cause rapid filling of the bladder, leading to frequency and urgency. Drinks should be spaced evenly throughout the day.

Ideally, your urine should be a light straw colour, like champagne or white wine. Very dark or strong-smelling urine is too concentrated and is a signal that you need to drink a bit more. If your urine is very pale with no smell, you may be drinking too much. During hot weather, air travel, after exercising and during illness you need to drink more.

The table below indicates some of the fluids and foods which can irritate the bladder:

Good	Possible irritants	Bad
Water Decaffeinated drinks Squashes & cordials	Caffeinated drinks Grapefruit juice Spicy food Strong tea & coffee	Fizzy drinks Alcohol

Cranberry juice should be limited to 400ml per day and should be avoided if you have interstitial cystitis or you have been prescribed warfarin.

Are there any drugs that can help?

A number of drugs can be prescribed by your GP to help control urgency or urge incontinence, and to treat prostate disease. You can discuss these with your GP.

Taking a prescribed diuretic (water) tablet will cause you to go to the toilet more frequently than normal for a few hours after you have taken it. It is important for your health that you continue to take prescribed medications but, if you find that they are causing you great difficulty, you should consult your GP.

Are there any habits I should adopt or avoid?

You should avoid:

- going to the toilet “just in case”; and
- straining to empty your bladder or bowel.

Good habits to adopt are:

- allow your bladder time to empty properly (if you feel you are not emptying completely, wait a few seconds and then try to empty more);
- if you are troubled by getting up to empty your bladder at night, do not drink immediately before you go to bed; and
- if you wake up thirsty during the night, have only a few sips of water.

Does bladder training have a role?

Yes. This is a process whereby you “retrain” your bladder to hold a greater volume of urine.

It is used to treat an overactive or unstable bladder that is responsible for the symptoms you are experiencing. If you have this condition, the bladder contracts before you are ready to go to the toilet; this can happen especially if you get into the habit of going “just in case” because the bladder then “learns” to hold only a small amount.



Instead of your bladder controlling you, you must learn to control it. When you feel the urge to pass urine, tell yourself that you are not going to. Try to distract yourself for 5 to 15 minutes from the time you get the first urge (use whatever method best distracts you). If you do this for a week, every time you want to pass urine, you should find that, by the end of the week, the urge to pass urine is delayed.

During the following week, do the same thing but delay passing urine by a further 5 to 15 minutes. By doing this, your bladder will gradually learn to hold more, and your symptoms will reduce. Be persistent and remember that your bladder is like any other muscle in the body; it may require a few months’ training to reach its full potential.

Do pelvic floor exercises help?

Rushing to the toilet will not help your symptoms. You can, however, tighten your pelvic floor muscles to help calm your bladder when the feeling of urgency develops. This may enable you to hold on for longer. Sitting or standing still when you get this urge will help you concentrate on tightening your pelvic floor muscles.

The pelvic floor does a number of things:

- it supports your pelvic organs and abdominal contents, especially when you are standing or exercising;
- it supports the bladder to help stop leakage. The muscles need to work gently at all times and must be able to work harder when you cough, sneeze or strain. If the muscles are not working effectively, you may suffer from urinary incontinence; and
- it is used to control wind and to “hold on” with your bowels.

The sphincter (closing) muscles around the bladder neck may be damaged by prostate surgery. If this happens, the pelvic floor muscles become very important in regaining continence. You can also contract your pelvic floor muscles after emptying your bladder to prevent post-micturition dribble.

To do this, the pelvic floor muscles need to be exercised to help maintain and/or improve their strength.

Are there any other important points?

Avoid constipation

Many people find their urinary symptoms are worse if they get constipated. Because the bladder and bowel are next to each other, a full bowel can also affect bladder function.

To keep a healthy bowel:

- eat a balanced diet that includes both soluble fibre (oats, barley, berries & fruit) and roughage (insoluble fibre such as wheat-based foods, cereal, vegetables & nuts);
- eat regular meals;
- go to the toilet to empty your bowel when you feel the need. Delaying may lead to constipation; and
- maintain an adequate fluid intake of 1.5 to 2 litres per day.

Lose weight

To minimise the load on your pelvic floor, aim for an acceptable weight for your height and build. Being overweight (a body mass index, BMI over 29) has a negative impact on symptoms of stress incontinence.

There are many ways of losing weight and your GP should be able to advise you on the most suitable method for you.

Avoid heavy lifting

Lifting puts an extra strain on the pelvic floor. If you do need to lift a heavy object, tighten your pelvic floor before you lift and hold it tight until you have lowered your load.

Stop smoking

Research suggests that smokers are more likely to experience urinary incontinence due to the excessive strain that coughing puts on the pelvic floor. If you do smoke and would

like support to stop, contact the NHS Smoking Helpline on 0800 169 0169 or your local “Stopping Smoking Service”.

For further information and advice, contact your local Continence Advisory Service or:

The Bladder & Bowel Foundation

Tel: 0845 345 0165

<http://www.bladderandbowelfoundation.org>

Disclaimer

While we have made every effort to be sure the information in this booklet is accurate, we cannot guarantee there are no errors or omissions. We cannot accept responsibility for any loss resulting from something that anyone has, or has not, done as a result of the information in this booklet.

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