

Specialist Treatment of Nocturia

If symptoms persist, your GP may suggest that you are referred to a specialist. Treatment will depend on the root cause of your nocturia. Before visiting a specialist, you may find it useful to keep a bladder diary. There is an example of one of the following page of this leaflet which you can use to keep track of your symptoms.

Urge Incontinence - If you suffer from this a specialist bladder and bowel nurse or woman's health physio may be able to help you to retrain your bladder. After completing a diary like the one contained in this leaflet, you will be instructed to try to increase the length of time between voiding. You may also be offered some antimuscarinic medication to relax the bladder or the beta-3 adrenergic agonist Betmiga which increases the bladder's storage capacity.

Prostate Issues - A specialist will discuss the options with you according to the problem you are suffering from. You may be offered medications or even surgery if this is appropriate to your needs.

Anti-diuretic Hormone - You may be offered a synthetic analogue of AVP (Desmopressin) to control the amount of urine your kidneys produce at night. More recently, a reduced dose of formulation (Noqdirna) has become available. This may be prescribed to all adults (including those over the age of 65).



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Bladder Health UK does not engage in the practice of medicine. It is not a medical authority nor does it claim to have medical knowledge. In all cases Bladder Health UK recommends that you consult your own doctor or urologist regarding any course of treatment or medication. Any products mentioned in this publication are not necessarily recommended or endorsed by Bladder Health UK.

Bladder Diary

Time	Frequency (Urination)	Level of Urgency	Urine Leakage	Amount of Fluid (glasses or cups)
6am-8am		0 1 2 3	S M L N	
8am- 10am		0 1 2 3	S M L N	
10am -12pm		0 1 2 3	S M L N	
12pm - 2pm		0 1 2 3	S M L N	
2pm - 4pm		0 1 2 3	S M L N	
4pm - 6pm		0 1 2 3	S M L N	
6pm - 8pm		0 1 2 3	S M L N	
8am - 10pm		0 1 2 3	S M L N	
10pm - 12pm		0 1 2 3	S M L N	
12pm - 2am		0 1 2 3	S M L N	
2am - 4am		0 1 2 3	S M L N	
4am - 6am		0 1 2 3	S M L N	

Urine Leakage Key:
N = None S = Small M = Medium L = Large

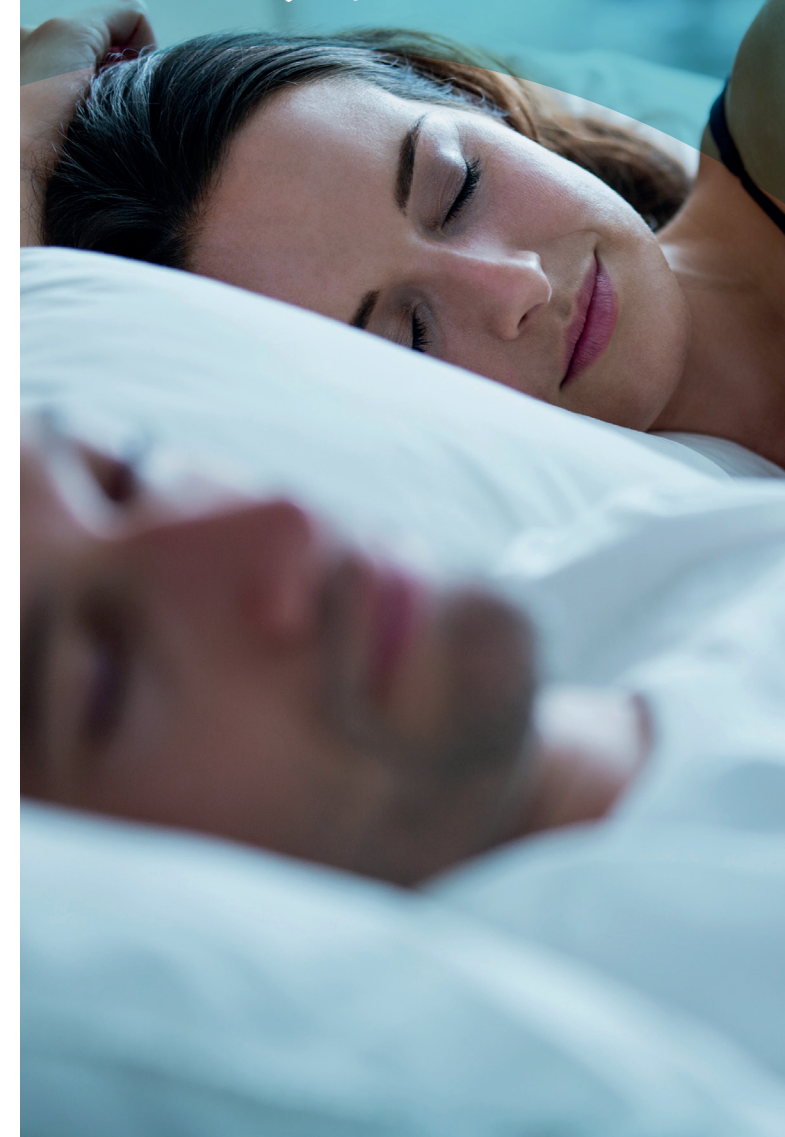
For further information on Nocturia visit: www.nocturia.co.uk



www.bladderhealthuk.org

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Nocturia



Bladder Health UK

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This leaflet has been provided for you by Bladder Health UK to explain what nocturia is and why it can occur. It also outlines the strategies you can use yourself at home to reduce the symptoms.

If you are suffering from nocturia Bladder Health UK advises that you consult with a medical professional to establish and treat the root causes of your symptoms.

What is Nocturia?

Nocturia is the term used for frequently waking up at night to pass urine. It is common in the elderly who may get up at least twice during the night to pass urine. Younger people may get up once during the night. More frequent visits may indicate a problem and you should consult with a healthcare professional to obtain a diagnosis and have the underlying issue treated.

What Are The Causes of Nocturia?

Nocturnal Polyuria is the term for the production of an abnormally large volume of urine during sleep. The cause of nocturnal polyuria is always outside the urinary tract. Where no obvious cause is apparent, the condition may be attributed to the decreased nocturnal secretion of arginine vasopressin (the hormone which regulates urine output from the kidneys).

Overactive Bladder can give rise to urge incontinence (a sudden need to pass urine urgently)

Heart Disease - For those with a heart condition, the heart and circulation become less efficient and sufferers can notice swelling in the legs and ankles. This fluid drains off at night when the sufferer is lying down increasing the need to urinate at night.

Enlarged Prostate - An enlarged prostate for whatever reason can close off the urethra and make it harder for the bladder to empty leading to irritation and retention of urine within the bladder.

Pelvic Organ Prolapse - A prolapse may obstruct the urethra during the day leading to some bladder retention. When lying down, the prolapse reduces leaving the urethra unobstructed and the urine retained then drains away.

Diabetes - High blood sugar can increase thirst and fluid consumption leading to more frequent trips to the toilet.

Medications - Nocturia can be a side-effect of some medications. A healthcare professional will be able to review your medications with you and suggest an alternative if possible. Do not stop taking medications without the advice of your doctor!

Fluid Intake At Night - Drinking large amounts of fluid close to bedtime will increase your need to pass urine at night.

What Can I Do Myself To Manage Nocturia?

There are some strategies you can employ to make your symptoms a little less bothersome. Follow this advice:

- Consume your last drink at least two hours before bedtime but do not cut down on the recommended daily amount of fluid (8 glasses per day).
- Cut out drinks from your diet which contain caffeine such as tea, coffee and Coca-Cola. Caffeine is a bladder stimulant and is best avoided, particularly last thing at night.
- Both alcohol and carbonated drinks are bladder irritants and should be excluded.
- If you have swollen ankles and/or legs, try to sit or lie down in the afternoon and raise your legs and feet so that they are above the level of your heart to encourage excess fluid to drain off before night time.
- Seek medical advice if you suspect you may have pelvic organ prolapse.
- If you are taking medication which may cause your body to produce more urine speak to your GP in case there is an alternative which may work just as well. Never stop taking medication unless you have been advised to do so by your doctor!
- If you are suffering from urge incontinence consider seeing a specialist Bladder & Bowel Nurse at your local continence clinic for advice on bladder re-training.

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