

The facts about OAB

The first thing you should know is that you are not alone, 12% to 18% Canadians suffer from OAB.^{4,7} Approximately 14% of Canadians suffer from dry OAB (OAB without urge incontinence), and 4.5% suffer from wet OAB (OAB with urge incontinence). Even though OAB affects all ages, the incidence of OAB has been found to increase with age. In addition, the prevalence of OAB has been found to be higher in women than men (21.2% vs. 14.8%).⁴

The impact of OAB

OAB can adversely affect a person's daily routines and quality of life. Often, patients experience:³

Reduced social activity, because they do not go out as much or stop doing things they enjoy.

Stress, frustration and anxiety, because they are afraid they will have a wetting accident.

Sleep disturbances, because they find themselves getting up frequently during the night.

Skin rashes and urinary tract infections, due to frequent wetting accidents and over-washing with soap and water to prevent odour.

Increased risk of falls and fractures, as a result of rushing to the bathroom, particularly at night.

What's more, OAB can negatively affect a patient's productivity at work, which has both direct and indirect cost implications (e.g. time off work, loss of earnings, paid usage, etc.).⁶

What causes OAB?

For many patients, the cause of OAB is unknown. It is not a condition related to getting older, nor is it limited to women.

Risk factors of OAB

There are various underlying risk factors that can contribute to an overactive bladder condition.^{3,5} Some risk factors are common and may include: urinary tract infections, side effects of medications, obesity, pregnancy and menopause. Others are more severe and less common, such as: nerve damage caused by spinal cord lesions, neurological disease (e.g. Multiple Sclerosis, Parkinson's disease, etc.), stroke, and blocked urethra due to enlarged prostate or prostatic surgery in men.

While each risk factor may be associated with OAB, it is important to note that some may be linked to other forms of incontinence. Some people may experience leakage when exerting any sort of effort or exertion, such as sneezing, laughing, coughing or exercise. This is referred to as "Stress Incontinence," and is different from OAB.¹

Learn more about OAB in the Powder Room



www.powderroom.ca

A Quick Guide to Overactive Bladder has been made available through the Powder Room, a patient information and support program funded through an educational grant from Astellas Pharma Canada, Inc.



A Quick Guide To
Overactive Bladder.

About the Powder Room

The Powder Room was developed to address a need for awareness and understanding of overactive bladder, a condition affecting approximately 12% to 18% of Canadians. Overactive bladder (OAB) is a chronic medical condition that causes a person to feel the sudden urge to urinate even when their bladder is not full.

The Powder Room includes an interactive and educational website (www.powderroom.ca) designed to foster communication around OAB. It is a place where people with OAB can share their experiences, get answers to their questions and concerns, and express themselves through personal stories about their condition and how they feel. The Powder Room is a welcoming and comfortable private space that individuals can rely on for credible information on OAB. It is for individuals with OAB, their family, friends and healthcare professionals.

To ensure accuracy and relevance, content included in the Powder Room has been carefully reviewed by a committee of Canadian healthcare professionals who specialize in the field of urology. This process is important so that you can have confidence in the quality and accuracy of the information that is provided.

Visit the Powder Room on the web at www.powderroom.ca.

1-888-899-4-OAB (1-888-899-4622)

References for this guide

1. Corcos J, et al. Canadian Urological Association Guidelines on Urinary Incontinence. *Can J Urology* 2006; 12:3127-3138.
2. Ouslander J. Management of Overactive Bladder. *N Engl J Med* 2004; 350: 786-799.
3. Kelleher C, et al. Improved Quality of Life in Patients with Overactive Bladder Symptoms Treated with Solifenacin. *BJU International* 2005; 95:81-85.
4. Corcos J, et al. Prevalence of overactive bladder and incontinence in Canada. *Can J of Urology* 2004; 11: 2278-2284.
5. Wein A and R Rackley. Overactive Bladder: A Better Understanding of Pathophysiology, Diagnosis and Management. *J Urology* 2006; 175:55-510.
6. Freeman R and O Adeganmi. Overactive Bladder. *Best Pract Res Clin Obstet Gynaecol* 2005; 19: 829-841.
7. Irwin D, Milson I, Hunskaar S, et al. Population-based survey of urinary incontinence, overactive bladder, and other lower urinary tract symptoms in five countries: results of the EPIC study. *Eur Urol.* 2006 Dec;50(6):1306-14.

About OAB

Overactive Bladder (or OAB), can range from being a simple nuisance to a severe problem in a person's life. But the more you know about its causes and treatments, the better off you are in finding real relief. This pamphlet provides the information that you need to know about OAB. We hope you not only find it informative and educational, but that it points you in the right direction for solving your OAB problems.

Do I have OAB? Only your doctor can provide you with a diagnosis. However, to help you consider whether you are suffering from OAB, it may help to answer a few simple questions.

| | Yes | No |
|---|--------------------------|--------------------------|
| Do you often experience a sudden and overwhelming need to urinate? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you experience the sudden urge to urinate, followed by the uncontrolled loss of urine? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you need to urinate more than eight times throughout the day and night? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you wake up multiple times during the night to urinate? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you avoid social or intimate activities for fear that you might experience uncontrollable loss of urine? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you plan your daily activities around how accessible washrooms are to you? | <input type="checkbox"/> | <input type="checkbox"/> |

If you checked yes to any of the above questions, you may suffer from OAB. It is crucial that you consult your doctor to obtain a diagnosis and to determine the best treatment options for you.

Keep in mind that you and your doctor need to work together in order to successfully treat your OAB.

What you can do is educate yourself on the causes of, and treatment options for, OAB and most importantly, stick faithfully to the treatment routine that you and your doctor have agreed upon. Just remember that OAB can be effectively treated and you can look forward to getting relief from your OAB symptoms and regain full control of your life!

What exactly is OAB?

OAB is a medical condition that is characterized by a sudden, uncomfortable need to urinate. This can occur with daytime or nighttime frequency, and may or may not result in urine leakage.¹

OAB occurs when the bladder's smooth muscle, known as the detrusor muscle, squeezes or contracts while the bladder is still filling instead of when it is completely full.² When this muscle contracts, signals are sent to your brain resulting in the urge to urinate.⁵ This urgency sometimes leads to more trips than normal to the bathroom and for some people an uncontrolled loss of urine.

