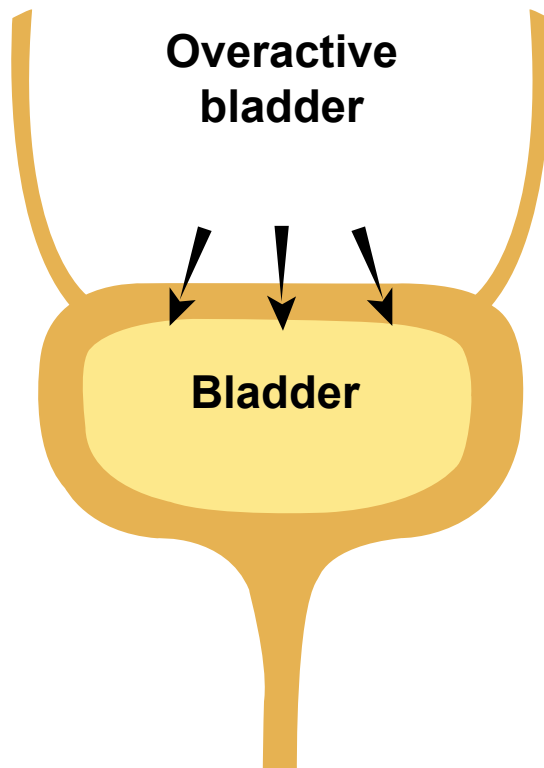




Have you recently been diagnosed with overactive bladder (OAB)?

Let me help you learn more about your OAB symptoms and possible treatment options

“WHAT IS OAB?”



As your doctor has likely explained, OAB stands for overactive bladder.

It is **NOT** a disease. Rather, it's the name for a group of bladder symptoms.

- OAB can happen when:
 - Nerve signals between your bladder and brain tell your bladder to empty **even though it isn't full**
 - The muscles in your bladder are **too active**
 - Either way, your bladder muscles contract to pass urine **before they should**
- These contractions cause the **sudden, strong need to urinate, called urgency**

“WHAT ARE THE SYMPTOMS OF OAB?”

People with OAB regularly experience one or more of the following symptoms:

URGENCY

A sudden and overwhelming need to urinate right away.

FREQUENCY

Urinating 8 or more times per day or what feels like too often.

URGE INCONTINENCE

A sudden urge followed by urine leakage (a wetting accident).

NOCTURIA

Waking up 1 or more times during the night to use the bathroom.

Some of these symptoms can be the result of a urinary tract infection (UTI), an illness, damage to nerves, or a side effect of a medication. Your doctor will check to make sure nothing else is causing your symptoms.

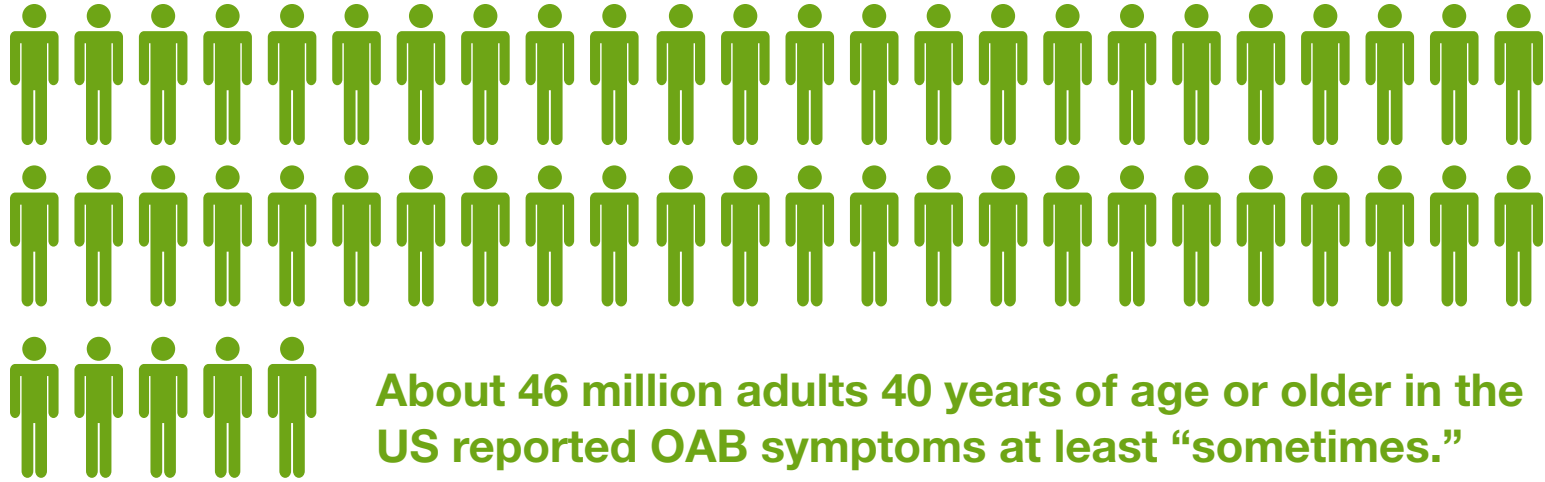
“WHAT ARE THE FACTS ABOUT OAB?”

Don't believe OAB myths! Here's a reminder of the facts about OAB...

- OAB is **NOT** “just part of being a woman”
- OAB is **NOT** “just having an ‘enlarged’ (big) prostate”
- OAB is **NOT** “just a normal part of getting older”
- OAB is **NOT** caused by something you did
- Surgery is **NOT** the only treatment for OAB
- There **ARE** treatments for OAB that can help manage symptoms
- There **ARE** treatments that many people with OAB find helpful
- There **ARE** treatments that can help, even if your symptoms aren't severe or if you don't have urine leaks

“HOW MANY PEOPLE HAVE OAB?”

OAB is a common condition in the United States



Unfortunately, many people do not seek medical help because they mistakenly believe that:

- Bladder control problems are an inevitable part of aging
- There is no treatment available
- Discussing their problem with their doctor will be too embarrassing

“WHO IS AT RISK FOR OAB?”

As you grow older, you're at higher risk for OAB

GENDER

- Both **men and women** report symptoms of OAB
- Women who have gone through **menopause** have a higher than normal risk
- Men who have had **prostate problems** also seem to have an increased risk for OAB

HEALTH CONDITIONS

- People with **diseases** that **affect the brain or nervous system**, such as stroke and multiple sclerosis (MS), are at higher risk for OAB

DIET

- Food and drinks that can bother your bladder (like **caffeine**, **alcohol**, and **very spicy foods**) may make OAB symptoms worse

“HOW ARE OAB SYMPTOMS TREATED?”

Currently, your doctor may be using one treatment alone or a combination to help you manage your OAB symptoms. Treatment choices include:

LIFESTYLE CHANGES

- **Changing what you eat and drink** to see if less caffeine, alcohol, and/or spicy foods will reduce your symptoms
- Keeping a **daily “bladder diary”** of your trips to the bathroom
- Going to the bathroom at **scheduled times** during the day
- Doing “quick flick” **pelvic exercises** to help you relax your bladder muscle when you feel a strong urge to urinate

PRESCRIPTION MEDICATIONS

- Your doctor may **prescribe drugs** to help with your OAB symptoms

“MY DOCTOR PRESCRIBED MEDICATION FOR MY OAB SYMPTOMS—SO NOW WHAT?”

If your doctor has prescribed medication to help you manage your OAB symptoms, then you should

- Take your medication every day or as directed by your doctor
 - Be patient and stick with your medication
- Keep track of your progress
 - It is important to communicate your progress to your doctor to ensure the best possible treatment outcome
 - Remember to refill your prescription