



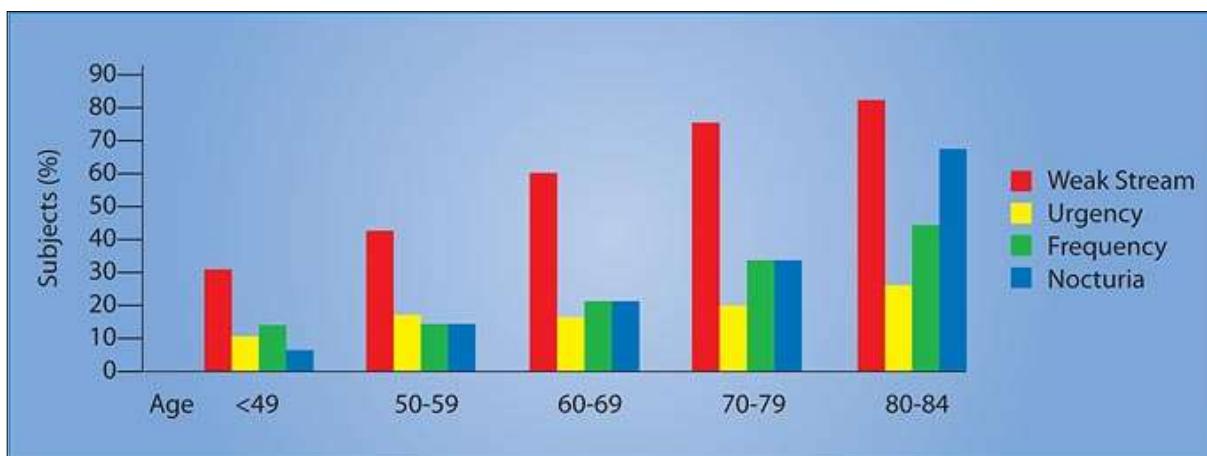
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# MALE LOWER URINARY TRACT SYMPTOMS (LUTS) FREQUENTLY-ASKED QUESTIONS

## What are the symptoms of LUTS?



Lower urinary tract symptoms (LUTS) include the need to pass urine very frequently (frequency) without much warning (urgency), associated with leakage of urine (urge incontinence); not being able to pass urine immediately (hesitancy) and a decrease in the force of the urinary stream. This may also be associated with having to pass urine frequently at night.

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 after they finish urinating (terminal dribble) and on walking away from the toilet (post-micturition dribble).

## What is normal?

The kidneys filter blood continuously, to produce urine that is stored in the bladder. The bladder will hold 400 – 500 ml of urine until an urge to pass urine is normally felt when the bladder is full, thus giving time to reach the toilet. For various reasons, this message may become blurred or your bladder may contract, to empty without warning, not allowing you time to reach the toilet.

At the base of the bladder is the prostate gland which encircles the urethra (water pipe). In men over the age of 60, it is quite common for this gland to become enlarged and give rise to the urinary symptoms described above. It is important for

you to consult your GP regarding this, so that he/she can examine your prostate gland.

Going to the toilet up to 6-8 times in 24 hours, with one of these 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 approximately 5-7 mugs.

Caffeine tends to act as an irritant to the bladder so it is recommended that caffeine-free products are tried; these are widely available. Substitute caffeinated drinks with water or fruit squashes. Caffeine is found in tea, coffee, chocolate, high-energy drinks like Red Bull or Lucozade and in cocoa. If you drink large quantities of caffeinated drinks and you wish to reduce your consumption, you should cut down gradually over a fortnight to reduce any withdrawal symptoms.



Large volumes of fluid over a short period of time and 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. Very dark or strong-smelling urine may mean it is too concentrated and you need to drink a bit more. If your urine is very pale with no smell, then you may be drinking too much. During hot weather, air travel, after exercising and during illness you may need to drink more.

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

| Good                 | Possible irritants  | Bad          |
|----------------------|---|--------------|
| Water                | Caffeinated rinks   | Fizzy drinks |
| Decaffeinated drinks | Grapefruit juice  | Alcohol      |
| Squashes & cordials  | Spicy food<br>(Strong tea & coffee contain more caffeine & tannins) |              |

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

## Are there any drugs that can help?

A number of medications can be prescribed by your GP to help control urgency, 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 so, if you find they are causing you great difficulty, you should consult your GP.

A number of common drugs and remedies can also contribute to bladder symptoms. You should seek advice about these from your Pharmacist, GP or Continence Nurse.

## **What habits should I adopt or avoid?**

You should avoid:

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

Good tips are:

- allow your bladder time to empty properly. If you feel you are not emptying completely, make sure you have fully emptied by waiting 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. 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 “train” 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 5-15 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 urinate is delayed.



During the next week, do the same thing and delay passing urine by a further 5-15 minutes; by doing this, your bladder will learn to hold more and your symptoms will reduce.

Please be persistent and remember that your bladder is like any other muscle in the body and may require a few months' training to reach its full potential.

## **Can 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 will 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
- it is used to control wind and for “holding on” with your bowels

The sphincter (closing) muscles around the bladder neck may be damaged by prostate surgery so that the pelvic floor muscles become an important means of 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 are constipated. Because the bladder and bowel are next to each other, a full bowel will affect bladder function.

To keep a healthy bowel:

- eat a balanced diet that includes both soluble fibre (oats, barley, berries & fruit) and insoluble fibre (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
- 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 been proven to have a negative impact on symptoms of stress incontinence. There are many ways of losing weight; your GP should be able to guide you as to 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, remember to 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 and that this is due to the excessive strain that repetitive coughing puts on the pelvic

floor. If you do smoke and would like support to stop smoking, contact the NHS Smoking Helpline on 0800 169 0169 or your local Stopping Smoking Service.

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

The Bladder & Bowel Foundation

Tel: 0845 345 0165

[Website](#)

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