



Hey Doc, I Can't Sleep at Night!

A Primer on Nocturia, or Nighttime Urination

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Overview

Nighttime urination is a frequent condition that we see in clinic. It is important to know that it is not uncommon to void once to twice a night as we get older.

However, if you get up significantly more than that, read on. A common pattern seen among people with this condition is an increased number of times to urinate per decade of life (i.e. once in your sixties, twice in your seventies, etc.). Your kidneys simply begin to make more urine at night as you age.

Certain aspects of nocturia are in your control, such as decreasing fluids before bedtime. Other issues such as heart conditions, diabetes, etc contribute to nocturia, and there is less you can do to improve your situation, and you may have to manage the condition as best as possible.

People who frequently need to urinate during their regular sleep hours often get less deep sleep than they should, and may exhibit sleepiness or exhaustion during the day.

Normally, when we sleep at night our urine becomes more concentrated, enabling us to sleep for a six to eight hour stretch without the bladder feeling uncomfortably full. When the bladder feels full, this signals the brain to wake up.

Sometimes the causes of nocturia are simple and easy to treat. Drink your normal liquid intake but earlier in the day. Avoid drinking late at night, particularly tea, cokes, coffee, wine or beer. Keep a diary of how much you drink, what you drink and when. This will help you identify situations that may make the nocturia worse.

Certain medications may result in nocturia, too. [Diuretics](#) and other blood pressure pills (Caduet, Lasix, HCTZ), which help the body shed excess fluids, are a direct cause of the condition. This may be addressed by taking diuretics earlier in the day.

People that are susceptible to nocturia include those with Diabetes, Hypertension, Obesity, People with Sleep Apnea, Bladder or Prostate Problems, and the elderly.

Although your doctor can help with some aspects of nocturia, there are several self-help measures you can try to stem the flow of your nocturnal urge:

- Void right before going to sleep
- Limit evening fluid intake after dinner and before bedtime
- [Wear compression stockings](#) (this returns fluids from your legs, back to your heart for the kidneys to process, making urine earlier in the day, instead of at night)
- Elevate of your legs during the day (see above)



Gotta Go, Gotta Go....The Overactive Bladder

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How does the bladder work? Your bladder expands like a balloon to accommodate the flow of urine. When it's reached about half its capacity, nerve signals alert your brain, and you sense that your bladder is "full." By the time it's three-quarters full, you feel the need to urinate (void). When you urinate, nerve signals coordinate the relaxation of the pelvic floor muscles and the muscles surrounding the neck of the bladder and upper portion of the urethra (urinary sphincter muscles). The muscles of the bladder contract, forcing urine out.

In the case of an “overactive” bladder, the muscle sends “false alarms” before its full. These emergency "false alarms" can cause a strong, sudden urge to go. And may even lead to wetting accidents. It affects 33 million men and women in the United States. That's 1 in 6 adults. It's more common than you might think.

Although medications are an easy solution, there are many things you can do that can reduce your symptoms by 50% or more, often reducing or eliminating the need for medications:

- **Manage fluid intake**

Good fluid intake involves not drinking too much and not drinking too little. Most people should drink Four to six 8-oz cups of fluid a day. At least half of that should be water. Reducing cokes, coffees, teas, and other caffeinated/carbonated beverages to a minimum should be a top priority. These fluids are diuretics (increase production of urine), and are acidic, which increase bladder irritability.

- **Alter your diet and/or make other lifestyle changes**

Some foods can irritate your bladder more than others. Here are some common offenders: caffeine, citrus fruits and juices, artificial sweeteners, tomato-based foods, sodas, alcohol, and spicy foods. Drinking more water can also help dilute the irritation.

- **Fiber intake.** Eat a diet rich in fiber, or take fiber supplements if instructed by your doctor, as constipation is commonly associated with bladder problems.

- **Bladder training.** Occasionally, your doctor may recommend a strategy to train yourself to delay voiding when you feel an urge to urinate. You'll begin with very small delays, such as 10 minutes, and gradually work your way up to urinating every three to five hours.

- **Scheduled toilet trips.** Set a schedule for toileting so that you urinate at the same time every day — every two to three hours is recommended — rather than when you feel the urge to urinate.

- **Pelvic floor muscle exercises.** Exercises called Kegel exercises strengthen your pelvic floor muscles and urinary sphincter — muscles that are critical for holding urine even if your bladder muscles involuntarily contract. These strengthened muscles are then contracted when you feel urge so that you can successfully suppress the bladder's involuntary contractions. Your doctor or a physical therapist can help you learn how to do these exercises correctly.

- **Maintaining a healthy weight.** If you're overweight, losing weight may ease your symptoms because extra weight is associated with more urge incontinence. Heavier people are also at greater risk of stress urinary incontinence

For some people certain foods may irritate the bladder, causing or worsening bladder symptoms. If symptoms are related to diet, avoiding highly acidic or spicy foods, caffeine, alcohol, and carbonated drinks should bring significant relief after approximately 10 days. This dietary link can then be confirmed when patients resume their original diet. If problems return, then diet is a factor. Once symptoms have improved on the restricted diet, patients can gradually add these foods back into the diet, one item at a time. If one specific food does cause symptoms, it can be easily identified and avoided. As foods are added back into the diet, it is crucial that patients maintain a significant water intake. Water should be the majority of what you drink every day.

Dietary Irritants often include the following; do your best to minimize their intake:

Alcohol, Cokes, Coffees, Teas, Carbonated Drinks, Vitamin B Complex, Apple Juice, Vinegar, Strawberries, Lemons, Nutra-Sweet, Tomatoes, Grapes, Cranberries, Chilies/Spicy Foods, Citrus/Fruit Juices, “Power or Energy” Drinks, mega-vitamin additives/shakes, weight loss supplements. Herbal teas, papaya, pear and apricot juices are good substitutes for some of the above.