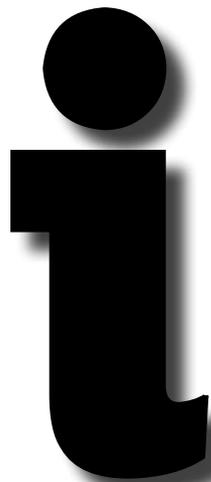


Painful Bladder Syndrome (page 1 of 2)



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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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Painful bladder syndrome is a condition where patients experience pain in and around the bladder. Doctors are unsure why people develop the syndrome however some suggest it is due to an autoimmune response after a bladder infection.

Symptoms

The symptoms experienced are pain, pressure and tenderness around the abdomen, bladder, urethra, vagina, pelvis and perineum. Many patients experience discomfort on passing water and have to visit the bathroom more frequently, as well as a need to rush to the bathroom.

Many women find that symptoms are worse during menstruation and experience pain on intercourse. The symptoms are very similar to urine infections, but when sent to the lab for testing nothing is found in the sample. Some patients also suffer from irritable bowel syndrome and fibromyalgia.

Diagnosis

There is no one test to diagnose painful bladder syndrome and diagnosis is often made after ruling out other conditions. Some of the tests used include:

- **Cystoscopy:** this involves looking inside the bladder with a telescope and taking samples of the bladder (known as a biopsy). These are then sent for analysis. A cystoscopy can be done under local or general anaesthetic.
- **Urodynamics:** this looks at the pressures inside the bladder as it fills and empties. This can be useful in ruling out an over active bladder.
- **Urinalysis:** this involves sending a sample of urine to the lab for testing to see if there is any infection present.
- **Imaging of the bladder:** either by ultrasound or MRI to rule out other conditions such as bladder diverticulum.

Treatments

There are several different treatment options for painful bladder. These include:

- **bladder Distension:** this is usually done at the time of cystoscopy under a general anaesthetic and involves the surgeon filling the bladder with fluid and keeping it stretched for a couple of minutes before emptying the fluid out. Symptoms may worsen for 24 - 48hours after the procedure but then usually settle within 2 - 4 weeks

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- **bladder instillation:** using a small catheter, a solution is instilled into the bladder and is kept there for as long as possible. The solution coats the lining of the bladder helping to reduce symptoms. A course of 6 treatments is given before starting a programme where instillation is given every 4-6 weeks
- **oral medications:** there are a variety of medications available and your doctor will prescribe if they think it may be suitable for you.

Other advice

- reduce stress levels as it is known that stress can increase symptoms
- give up smoking as it exacerbates symptoms
- exercise: gentle stretching exercises such as walking and swimming have been shown to help reduce symptoms.

Diet

There is a lot of evidence which suggests certain foods worsen the symptoms of painful bladder. It is important to try to eliminate these from your diet to see if your symptoms improve. Like any diet, it is important to eat healthily including fruit and vegetables. Try keeping a diary of your symptoms and diet, to monitor which foods trigger your symptoms.

Foods and drinks known to make worsen the symptoms of painful bladder syndrome are:

- alcohol
- carbonated drinks
- caffeine such as tea and coffee (try drinking decaffeinated drinks)
- high acid content foods including fruit juices
- aged cheese
- yoghurt
- pickles
- chocolate
- tomatoes
- spices
- artificial sweeteners.