



spotlight on health

A Condition No One Talks About

(NAPS)—Where is the bathroom? A simple, easy question we ask in restaurants, when traveling, and even when visiting friends. But for 17 million Americans who suffer from overactive bladder (OAB), finding a bathroom is more than a question, it is a way of life.

OAB and its symptoms can have a dramatic effect on everyday activities such as exercising, sleeping, intimacy, traveling and social interactions. As a result, many OAB sufferers become housebound from the fear and embarrassment of having a wetting accident in public. Many living with OAB say they feel shy, ashamed, or embarrassed about their condition, and therefore remain silent and untreated.

“OAB is not a normal part of the aging process and is a treatable medical condition,” says Diane A. Smith, RN, MSN, CRNP, a nurse practitioner at UroHealthcare, Newton Square, PA. “OAB can affect anyone, at any age.”

Symptoms of overactive bladder include:

- Urge urinary incontinence—wetting accidents
- Frequency—an increased rate of urination that is more than eight times a day and/or two or more times a night
- Urgency—a sudden desire to urinate

Recognizing the condition and opening a dialogue with a doctor, nurse or other healthcare professional about OAB is the first step toward improving the symptoms of OAB. Here are some helpful



The first step towards seeking effective treatment is starting a conversation with your doctor.

tips for starting the dialogue with your healthcare provider:

- **Call ahead**—it may make it easier to open the dialogue regarding your condition. Your doctor or nurse will then be sure to initiate the discussion about OAB during your appointment.
- **Make a list** of all the medications that you are currently taking and the symptoms that you are experiencing. Give the list to your doctor or nurse during your appointment.
- **Keep a diary** of your bathroom habits. Keep a note of what, *how much* and *when you drink, how often you use the bathroom, when you have accidents* and *what you were doing before your accidents*

happened. Keep in mind that your doctor will need to know what preceded your accident as it helps in the diagnosis of your condition.

“It is crucial that we address the misconceptions surrounding this condition and encourage patients to speak with their health care professionals,” says Cheryle Gartley, president of the Simon Foundation for Continence, a non-profit educational organization dedicated to providing assistance and support to those suffering from urinary incontinence. “It is equally important for physicians and nurses to help educate patients on the full range of options that are available that can help OAB sufferers resume control of their lives.”

Many OAB sufferers with symptoms of urgency, frequency, and accidents are being successfully treated with anticholinergic medications, such as DITROPAN XL® (oxybutynin chloride). DITROPAN XL, which blocks contractions of the bladder muscle, was the first once-a-day medication clinically proven to deliver 83 to 90 percent reduction in wetting accidents, versus 51 percent for placebo. Its safety and effectiveness have been demonstrated in patients from 18 to 98 years of age.

If you are suffering from symptoms of OAB, start a discussion with your doctor or nurse about the condition and your treatment options today.

For more information on OAB, contact your physician, visit the DITROPAN XL Web site at www.ditropanXL.com, or call the Simon Foundation for Continence at 1-800-23-SIMON.

Note: DITROPAN XL is indicated for the treatment of overactive bladder. You should not use DITROPAN XL if you have certain types of stomach, urinary or glaucoma problems. If you currently take medication for a gastrointestinal disorder or have had a gastrointestinal blockage, your healthcare professional should determine whether once-a-day DITROPAN XL is right for you.