

ASK THE DOCTOR



Answers To Important Health Questions

by Dr. Marc Gittelman

(NAPSA)—I get questions about overactive bladder (OAB), like the two below, from my patients all the time. While these individuals sought help, others who suffer with bladder control issues are too embarrassed to discuss their concerns with their health care professional. On Thursday, November 17, from 7 a.m. to 7 p.m. EST, a group of



Dr. Gittelman

health care professionals will be standing by at 1-866-URGE-2-GO to answer bladder health-related questions and provide free counseling.

There really is no need to be embarrassed—but, if you are, this will be the confidential opportunity you need to get answers to some of your questions.

Dear Dr. Gittelman: Lately, I've had trouble controlling my bladder. I'm always running to the bathroom. Sometimes, I can't make it there in time. I'm very embarrassed and don't know what to do.

Dear Reader: First, you need to discuss your symptoms with your health care professional. Losing control of your bladder is not normal at any age and shouldn't be tolerated. You may have overactive bladder (OAB), which is characterized by a strong urge to urinate, the need to urinate more than eight times a day, waking up two or more times a night and having wetting accidents. OAB—which affects more than 33 million Americans—is not life threatening, but

can be life altering. The good news is a health care professional can easily diagnose OAB and suggest a therapy, such as medication or behavioral treatment that can alleviate symptoms.

Dear Dr. Gittelman: My doctor diagnosed me with overactive bladder (OAB)—since then, I've tried a variety of therapies, but they always make my mouth unbearably dry. What else can I try?

Dear Reader: Unfortunately, side effects like dry mouth have long been a leading cause of treatment discontinuation among people suffering from OAB. And while these medications have been shown to be effective in treating OAB symptoms, they can produce drying side effects.

There are several treatment options for OAB. One option you may want to consider is Oxytrol® (oxybutynin transdermal system), the only “patch” available to treat OAB. Oxytrol not only helps manage OAB symptoms, but also has a very low incidence of drying side effects (dry mouth, constipation). The twice-weekly dosing schedule provides you with continuous relief for up to four days per patch.

Oxytrol may not be for everyone. The most common adverse events occurring with Oxytrol were application site reactions, dry mouth, constipation, dysuria and abnormal vision. If you would like to learn more about Oxytrol and for the full prescribing information, talk to your doctor or visit www.OXYTROL.com.

• *Marc Gittelman, M.D., is the Director of the South Florida Medical Research Center in Miami,*