**Bladder Management Ideas.**

**Will they work for you? We don’t know!**

**Investigate. Read. Discuss with MD.**

**Daily testing of your urine if you’re prone to UTIs.** First pee of the day. Pee into a cup and test with dip strips. The moment you detect an increase in white blood cells, take the action you’ve established with your physician. Treat early to prevent rapid deterioration which may require hospitalization to resolve.

**Drink a lot of water every day.** Low tech with high impact. It may seem counter-intuitive, especially when you’re dealing with frequency problems. Urine should always be pale, not strongly yellow.

**Double, triple, or quadruple void.**  Don’t rush. For men: stand then sit, or vice versa,

**Bladder pacer from Medtronics.** The company is reporting good results. InterStim is the product’s name.

**Self-catheterization** to empty the bladder. Consider the more expensive Coloplast system. Careful sanitizing of your hands before self-cath is vital to prevent infections. Self-cath 3 or 4 times a day and once at night.. May need to augment with Botox to stop leaking.

**Urinating on a schedule.** There is a delicate balance between hesitancy (getting flow started) vs. uncontrolled contractions of the bladder. Yet an overfilled bladder makes it more irritable. Some people find that overfilling is prevented by urinating on a schedule..

**“Tibial Nerve Stimulation” for an over-active bladder:**

* This idea for treating her neurogenic bladder symptoms came from her uro-gynocologist. The doc suggested she try it before looking at the Medtronic bladder pacer product. The bladder pacer requires surgical implanting. Tibial Nerve Stimulation is not invasive.
* Treatment takes place in the physician’s office, under the supervision of an R.N.
* 12 weekly visits are followed by 1 visit per month thereafter
* A small, acupuncture-like needle is inserted subcutaneously at one ankle. Minor electric current is applied. Another, similar needle is inserted subcutaneously at the other ankle and serves as a grounding wire. A battery-operated device sends a current through the tibial nerve, up the leg, to the sciatic nerve. The sciatic nerve travels to the bladder. Stimulation is felt in the foot/ankle region. It is not painful.
* The treatment is effective for 50% of the women who receive it. (This treatment is not limited to women. Men can receive it, too.)
* Now in the 7th of her 12 sessions, Alma says she is sleeping 7 hours without having to wake to go to the bathroom. She can sit through a full length movie and not have to leave to use the bathroom.
* The treatment reduces urgency due to inappropriate bladder contractions.
* No catheterization is necessary.

**Ellura to combat UTIs:** Concentrated cranberry juice. From the Mayo Clinic’s website:  
“There is preliminary evidence that cranberry may be effective in preventing urinary tract infections in children with neurogenic bladder.”

**D-Mannose to combat UTIs:** From a 2016 news article about D-mannose. “German physicians looking for nonantibiotic strategies to prevent urinary tract infection recurrence recommend this because it keeps bacteria from sticking to the ureter lining (Aktuell Urologie, May 2016). Skeptical health professionals may want to read about the molecular basis for this activity (IUCrJonline, Feb 26, 2016.)”

**Methenamine (generic name)/ Mandelamine (name-brand) to combat UTIs:** A nonantibiotic prescription medication. Taken orally, it enters the blood. When it hits urine in the bladder, it turns it into a weak formaldehyde solution. Bacteria can’t live in that environment. It works best when started at the end of antibiotic round, when the bacteria are knocked out..

**Cys-Control:** Over the counter product. Got a glowing report from an Israeli patient. It contains freeze-dried cranberries, grape and heather. Comes in a powdered form which you mix with water and drink. Tribe member used 2 packets a day for the first week and then went down to 1 packet per day, every day.

**Sudafed:** Over the counter product. Taken for urgency.

**Does eating or drinking make a difference to you?**

Different people have offered their experiences:

* Nothing to drink after 4:30 p.m.
* Nothing to drink after 7:30 p.m.
* No caffeine
* No carbonated beverages
* Citrus is a big trigger for one chat member

The legal stuff:   
"The chat room exists as a source of general information only.  The contents discussed do not represent therapeutic recommendations or prescriptions.  Users of the chat room are advised to consult their personal physicians for specific information or advice."