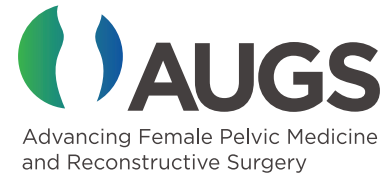


Choosing Wisely[®]

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Overactive Bladder and Pelvic Organ Prolapse

What women should know about tests and treatments

Your pelvic organs include your uterus, vagina, bladder, and rectum. Many things can weaken the muscles that support these organs: pregnancy and childbirth, chronic constipation, aging, coughing, and being overweight. Weak pelvic muscles can lead to:

- **Overactive bladder (OAB):** A strong, frequent urge to urinate.
- **Pelvic organ prolapse (POP):** The uterus, bladder, or rectum slips out of place and presses into the vagina.

Here's what you need to know about tests and treatments for OAB and POP.

Overactive bladder (OAB)

OAB is not a disease. It's a set of bothersome symptoms, including:

- You need to "go" often and urgently.
- You may also leak urine before you reach the bathroom.



Diagnosing OAB: Usually, all you need is a careful history, physical exam, and urine sample. Sometimes, the doctor does a quick test to see how much urine is left in the bladder after you urinate.

OAB—risky tests you usually don't need: If the doctor does not suspect a serious problem, you usually don't need imaging or invasive tests such as cystoscopy or urodynamics. These tests have risks. They can cause infections and irritation. They can lead to more worry and more unneeded tests.

You may need more tests if:

- Your doctor finds a problem, such as blood in the urine or nerve damage.
- Your condition doesn't improve with moderate steps (see the Advice column).

If there are symptoms of POP, they may include:

- A feeling of heaviness in the vagina
- Problems emptying the bladder or bowels
- Leaking urine or stool
- Discomfort during sex

Treating POP: POP is not a dangerous condition and it doesn't need surgery.

- If you have mild or no symptoms, you don't need any treatment.
- If POP bothers you, consider a pessary. This is a removable plastic device that is put in the vagina. It reduces pressure on the vagina. Pessaries are safe and can give immediate relief. They can be used for short or long periods of time. Ask your doctor about a pessary instead of surgery.

Surgery has risks, including:

- Bleeding
- Infection
- Damage to nerves or organs
- Blood clots
- New urinary leakage
- Pain during sex
- Repeat POP

If your doctor recommends using transvaginal mesh, ask why.

Consider surgery if:

- Your symptoms are severe.
- Non-surgical treatments haven't helped.
- You don't want a pessary or have trouble removing it for cleaning. You can do that yourself, or your doctor can do it for you.

This report is for you to use when talking with your healthcare provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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