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Diagnosis of OAB

The underlined terms are listed in the glossary.

The doctor does a series of tests to understand what causes your symptoms. This is called a diagnosis. Overactive bladder symptoms (OAB) can point to other conditions. Part of the diagnosis is ruling out other possible explanations for the symptoms, such as urinary infection or diabetes.

First, the doctor or nurse will take your medical history and do a physical examination. If needed, other tests will be performed.

This section offers general information about the diagnosis of OAB and situations can vary from country to country.

Medical history

The doctor will take a detailed medical history and ask questions about your symptoms. You can help your doctor by preparing for the consultation:

- Describe your current symptoms
- Note how long you have had the symptoms for
- Make a list of the medication you are taking
- Make a list of previous surgical procedures
- Mention other diseases you suffer from
- Describe your lifestyle (exercising, smoking, alcohol, and diet)

Physical examination

Your doctor or nurse will do a general physical examination focussing on:

- Your abdomen
- Your genitals
- The nerves in your back

Urine test

You will need to give some of your urine for testing. The test will show if you have a urinary tract infection and if there are traces of blood or sugar in the urine.

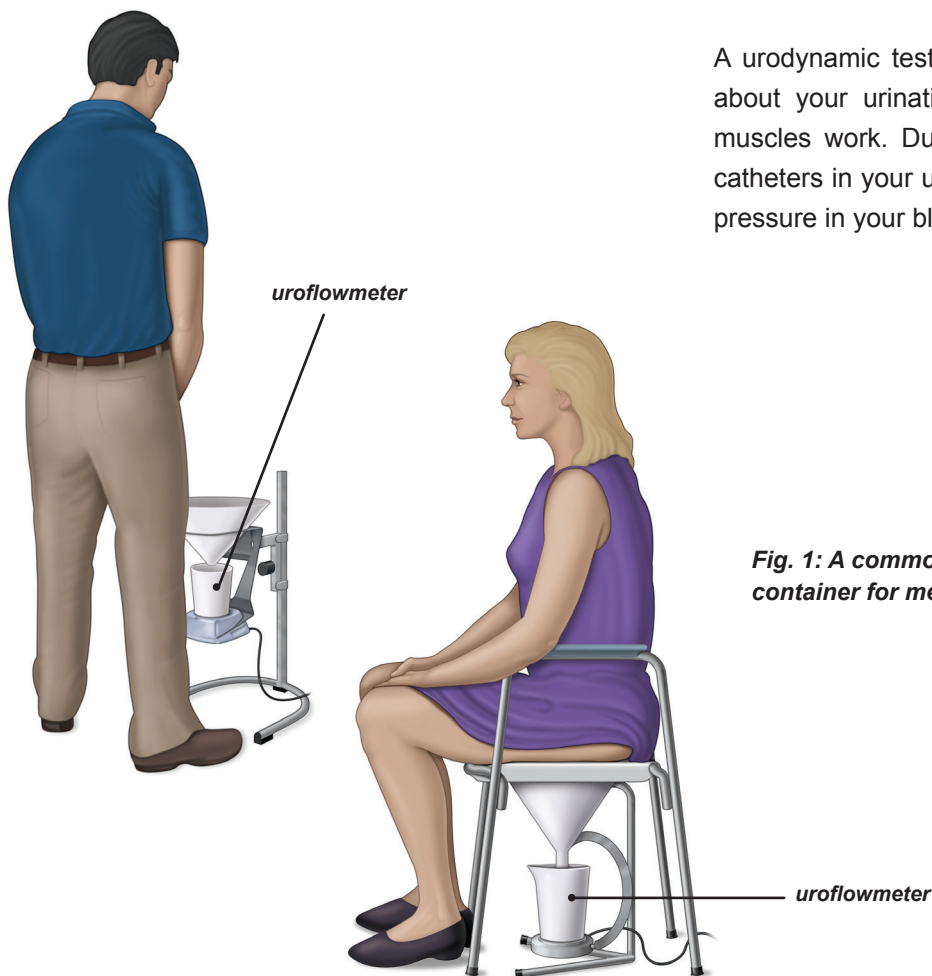
Bladder diary

Your doctor may ask you to keep a bladder diary. Here you can note down how much you drink, how often you urinate, and how much urine you produce. The bladder diary is important because it helps your doctor to understand your symptoms better. You can download a bladder diary from the website:

<http://patients.uroweb.org>

Uroflowmetry

This is a simple test which electronically records the rate of urine flow. It is easily done in privacy at the hospital or clinic. You will urinate into a container, called a uroflowmeter (**Fig. 1**). This test helps your doctor to check whether there is any obstruction to the flow of urine.



Imaging of the bladder

You will get an ultrasonography (also known as ultrasound), which uses high-frequency sounds to create an image of your bladder.

The doctor or nurse will scan your bladder to check how much urine is left in the bladder after urinating. This information helps to see if your symptoms are caused by urine retention in the bladder after urinating.

Bladder examination

If there is blood in the urine, you need a bladder examination. The doctor uses a type of endoscope – called a cystoscope – to look inside the bladder, usually under local anaesthesia.

Urodynamic evaluation

A urodynamic test is done to get more information about your urination cycle and how your bladder muscles work. During the test, your doctor inserts catheters in your urethra and rectum to measure the pressure in your bladder and abdomen.

Fig. 1: A common type of uroflowmetry container for men and women.

This information was updated in January 2014.

This leaflet is part of EAU Patient Information on OAB. It contains general information about overactive bladder symptoms. If you have any specific questions about your individual medical situation you should consult your doctor or other professional healthcare provider.

This information was produced by the European Association of Urology (EAU). The content of this leaflet is in line with the EAU Guidelines.

You can find this and other information on urological diseases at our website: <http://patients.uroweb.org>

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