

A guide for patients about

## **incomplete bladder emptying and tips to help**

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### **What is incomplete bladder emptying?**

When the bladder doesn't empty properly this may cause numerous problems. One of the problems is known as overflow incontinence. This is when the bladder doesn't empty and urine leaks out. You may not get the message to go to the toilet either. The bladder never empties completely so some residue is normal. You may find it difficult to start to pass water and that even when you have started; the flow is weak and slow. You might find that you dribble after you have finished passing water. Perhaps you dribble urine all the time, even without noticing.

### **What causes incomplete bladder emptying?**

Incomplete bladder emptying occurs when the muscles of the bladder are not able to squeeze properly to empty the bladder. This can happen in cases where there may have been nerve or muscle damage, perhaps caused by injury, surgery, or disease such as Parkinson's disease, Multiple Sclerosis and Spina Bifida. Medication can also cause problems with bladder emptying.

In some cases, it can be due to an obstruction which is making it more difficult for you to empty your bladder. This obstruction can be caused by an enlarged prostate in men, a kidney stone blocking the urethra, constipation, or stricture of the urethra in either men or women, which makes it difficult for urine to flow out of the bladder outlet.

If you are not able to empty completely, your bladder and its muscles may become floppy over time. With larger amounts of urine being held in the bladder all the time urine will leak out when you don't want it to and you may have a constant feeling of fullness.

Your doctor may want to investigate the cause of your overflow incontinence and once this has been established, a treatment plan can be formulated.

While your problem is being investigated your bladder will still not be emptying properly and there is a risk that the residual urine which stays in the bladder will become infected. This may cause further complications and problems.

### **What can I do to help?**

- Comfort and privacy are necessary to empty easily. Women should always sit down properly on the toilet with the feet supported; this helps the pelvic floor muscles to relax and allows sufficient time to empty the bladder completely. This means hovering over the toilet should be avoided.
- After the initial emptying/void, stand up, move around/wiggle your bottom then sit down again on the toilet and try to urinate again.
- Some people find that leaning forward and placing your elbows on to your knees, can be effective. Other women find they have to wait five minutes after the initial wee / void and then try to repeat urination.
- Leaning forward (and rocking) may promote urination.
- After you have finished passing urine, squeeze the pelvic floor muscle and then relax it, to try and completely empty
- Tapping over the bladder may assist in triggering a contraction in some people.
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- Stroking or tickling the lower back may stimulate urination and has been reported to be helpful in some patients.
- The sound of water can promote the bladder muscle to contract, but care should be taken not to promote bladder muscle instability with overuse of this technique.

## Contact us

For more information or advice please contact the number below. If you need help outside these times, call your GP.

**Phone:** 0300 790 0310

**Email:** [kentchft.continence@nhs.net](mailto:kentchft.continence@nhs.net)

## Write to us:

The Kent Continence Team  
Exchange House  
Thomas Way  
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Kent  
CT3 4NH

## Do you have feedback about our health services?

**Phone:** 0300 123 1807

8am to 5pm, Monday to Friday

**Text:** 07899 903499

**Email:** [kentchft.PALS@nhs.net](mailto:kentchft.PALS@nhs.net)

**Web:** [www.kentcht.nhs.uk/PALS](http://www.kentcht.nhs.uk/PALS)

### Patient Advice and Liaison Service (PALS)

Kent Community Health NHS Foundation Trust  
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