



INTERSTITIAL CYSTITIS AND BLADDER PAIN

September is Interstitial Cystitis and Bladder Pain Awareness month. Interstitial Cystitis (IC) describes the condition of bladder pain and discomfort with a frequent and often urgent need to urinate. Painful Bladder Syndrome (PBS) is another name for the condition when there is no abnormality visible in the bladder. Bladder Pain Syndrome is the name suggested to include both IC and PBS.

How do I know if I have interstitial cystitis/painful bladder syndrome?

The symptoms of IC/PBS can vary greatly from person to person and even within the same individual. However, the most common symptoms are:

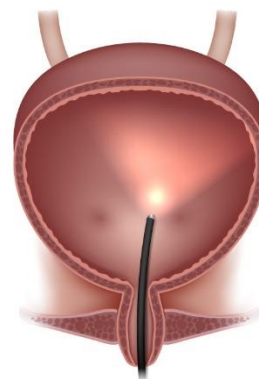
- An urgent need to urinate, both during the daytime and during the night.
- A frequent need to urinate. Women with severe cases of IC may urinate as many as 20 times a day or more.
- Pressure, pain, and tenderness around the bladder, pelvis, and perineum (the area between the vagina and anus). This pain and pressure may increase as the bladder fills and decrease as the bladder empties.
- A bladder that won't hold as much urine as it did before.
- Pain during sexual intercourse.

What causes this condition?

The exact cause of interstitial cystitis is unknown. People with IC may have a bladder wall that is inflamed and irritated (red and painful). Pinpoint bleeding of the bladder wall when it is stretched, ulcers, or fissures of the bladder lining may lead to pain, frequency and urgency. In 70% of people with interstitial cystitis, the bladder lining which protects the bladder wall from the toxic effects of urine is "leaky." Other theories suggest increased nerve cells in the bladder wall, or an autoimmune response may be involved. Those who have endometriosis and/or irritable bowel syndrome have an

increased risk of developing interstitial cystitis. The reason is unknown.

INTERSTITIAL CYSTITIS
INFLAMMATION OF THE URINARY BLADDER WALL



INTERSTITIAL CYSTITIS



NORMAL BLADDER SURFACE



How is interstitial cystitis treated?

IC is a chronic condition. Treatment options are focused on both avoiding flare ups and controlling the pain and symptoms on a daily basis. Treatment options can be as simple as restricting the dietary intake of bladder irritants such as alcohol or acidic foods, relaxation techniques, oral medications, bladder instillations, and in rare occasions, more invasive procedures including surgery or bladder injections.

What should I do if I suspect I have interstitial cystitis/painful bladder syndrome?

If you believe you might be experiencing IC/BPS you are encouraged to talk to your healthcare provider, who can discuss your medical history and perform a physical exam. Your provider can discuss and offer you several treatment options tailored to your needs.

For more information:

- IUGA Patient Website: www.YourPelvicFloor.org (Interstitial Cystitis)
- [International Painful Bladder Foundation](http://www.internationalpainfulbladderfoundation.org)

This information is intended to be used for educational purposes only. It is not intended to be used for the diagnosis or treatment of any medical condition, which should only be done by a qualified physician or other health care professional.