



Bladder control problems are a common complaint in MS patients and can be a major contributor to decreased quality of life. Healthy bladder function is complex and is controlled by nerves from the autonomic nervous system (both sympathetic and parasympathetic), nerves in the bladder itself, and a limited amount of voluntary control.

How the bladder works

To function normally, the bladder has to fill up without leaking and then empty at an appropriate time. During the filling phase, the sphincter (the muscle that contracts to prevent urine outflow from the bladder) has to remain closed while the bladder wall muscle relaxes and stretches out as the urine accumulates. Once the bladder fills up to a certain degree, you get the sensation of fullness and the urge to urinate. During emptying, the sphincter has to relax to allow urine to flow out of the bladder while the bladder wall muscle contracts to force out the urine.

When things go wrong

OVERACTIVE BLADDER

This is the most common problem in MS. In this condition, the bladder wall has problems relaxing to allow the bladder to fill, the urge to urinate occurs when the bladder is only partly full, and the onset of urination is hard to control. Typical complaints are urinary frequency, nighttime urination, and limited time between the first urge to urinate and the onset of urination, causing incontinence.

BLADDER-SPHINCTER DYSSYNERGIA

This problem occurs when the bladder wall and the sphincter don't act in a coordinated fashion. An example would be the bladder contracting when the sphincter is not open, so the urine can't pass effectively.

FLACCID BLADDER

This is less common than an overactive bladder in MS. In this condition, sensation from the bladder is impaired, the bladder fills to an excessive amount, and the urge to urinate is reduced or absent. Typical complaints include hesitancy, urinary retention, and leaking of small amounts of urine, known as overflow incontinence.

