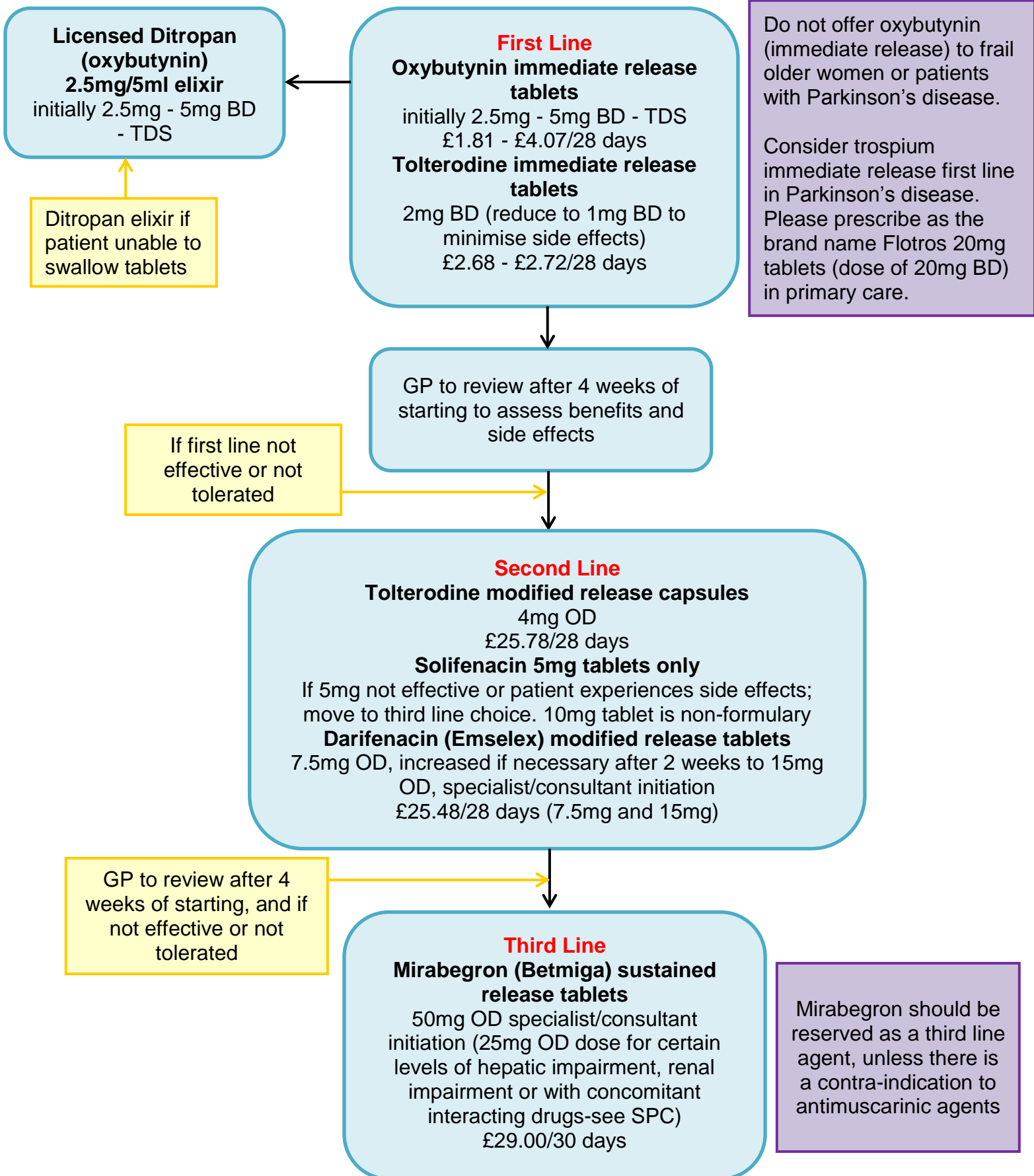


South West Essex medication pathway for overactive bladder and urinary incontinence



Prescribing notes

- NICE clinical guideline recommends bladder training (for a minimum of 6 weeks) as first-line treatment for women with urgency or mixed urinary incontinence (UI).
- Before starting overactive bladder (OAB) drug treatment, discuss with the patient:
 - the likelihood of success and common side effects, and
 - that some side effects such as dry mouth and constipation may indicate that treatment is starting to have an effect, and
 - that they may not see the full benefits until they have been taking the treatment for 4 weeks
- Common side effects of antimuscarinics include: dry mouth (up to 30%), constipation, blurred vision, dry eyes, nausea, dyspepsia, flatulence, palpitations, arrhythmia, dizziness, insomnia and skin reactions (see SPC for full details)
- Start with the lowest recommended dose when starting a new OAB drug treatment

Choice of agent

- Do not offer oxybutynin (immediate release) to frail older women
- Do not use flavoxate, propantheline and imipramine
- Solifenacin (Vesicare) is not recommended locally at the 10mg daily dose (non-formulary, £35.91 for 30 10mg tablets), and is significantly more costly. If solifenacin is commenced at a dose of 5mg daily, do not increase to 10mg daily, but consider the use of an alternative agent.
- Mirabegron should be reserved as a third line agent when antimuscarinics are clinically ineffective, or have unacceptable side effects, or if there is a contra-indication to antimuscarinic agents. Antimuscarinic drugs should not be used in patients with myasthenia gravis, significant bladder outflow obstruction or urinary retention, severe ulcerative colitis, toxic megacolon, and in GI obstruction and intestinal atony (see SPC for full details).

Reviewing treatment

- Review 4 weeks after the start of each new OAB drug treatment
- If there is no improvement or suboptimal improvement, or intolerable adverse effects change the dose, or try an alternative OAB drug (see pathway), and review again 4 weeks later
- Review women who remain on long-term drug treatment for UI or OAB annually in primary care (or every 6 months for women over 75)

NICE CG171- Urinary incontinence. The management of urinary incontinence in women. September 2013

NICE TA290-Mirabegron for treating symptoms of overactive bladder June 2013

Drug costing based on Drug Tariff and MIMS April 2014

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Approved by: Medicines Management Committee

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