

What is Nocturia?

Nocturia is the need to frequently wake up in the night to pass urine. Nocturia is more common with increased with age and getting up once – twice a night is normal, however, more frequent visits to the toilet may indicate a problem that can be treated. If you start needing to make several trips to the toilet at night, you may find this distressing or your sleep may be disturbed.

What causes Nocturia?

Hormonal changes:

The body normally produces a hormone: anti-diuretic hormone (ADH). ADH enables the body to retain fluid overnight, effectively allowing your kidneys to have a rest. As you get older, some people produce less of this hormone with the result that they produce more urine at night. This is a chemical that your body makes to help hold on to fluid at night, so you make less urine. Lower levels of this hormone mean that more urine is produced at night.

Prostate problems:

Men's prostate glands often start growing with age. This gland surrounds the urethra (the tube that urine passes through before exiting the body). An enlarged prostate can press on your urethra and prevent your bladder from emptying properly, so you need to pass urine more often both day and night.

Bladder problems:

Urge incontinence (also known as an overactive bladder). This is where you have a sudden need to pass urine and may leak before you are able to reach a toilet.

Bladder infections. These are usually caused by bacteria entering your bladder. Symptoms include dark, cloudy and smelly urine; a burning feeling or pain when passing urine; and not being able to empty your bladder completely.



Medical conditions:

Ageing causes the heart and circulatory system to be less effective. This results in fluid collecting in the tissues of the body during the day, and you may notice fluid in your ankles or lower legs. At night, when you are resting, your heart and circulatory system work more easily and absorb this fluid into your bloodstream. It is then pumped back to your kidneys where it is passed out of the body as extra urine.

Heart problems: If you have a heart condition, your heart and circulation become less efficient and you will notice swelling around your ankles. When you are lying down or your feet are raised up, fluid is absorbed into your blood stream and removed by your kidneys. This increases the need to urinate at night.

Diabetes: High blood sugar increases your thirst, so you may drink more than usual and this leads to a frequent need to go to the toilet. High blood sugar levels also irritate the bladder causing you to pass urine more frequently.

Problems with the urinary tract: e.g. kidney stones, urinary infections, or an overactive bladder (passing small, frequent volumes of urine and may be accompanied by urgency).

Sleep related problems: You are more likely to feel the urge to go to the toilet while you are awake. Therefore, if you keep waking up in the night or have problems sleeping, you are more likely to need to pass urine.

Sleep disorders: e.g. sleep apnoea

Drinking fluids: Excessive fluid intake, especially close to bedtime, will increase your need to go to the toilet during the night.

Is there anything I can do?

Healthy fluid intake of mixed fluids per day, about three to four pints or 1.5 - 2 litres. Reducing the amount you drink does not help, unless you currently drink large amounts. However, try reducing caffeine, artificial sweeteners, hot chocolate, green tea and fizzy/sparkling drinks. Drink plenty of water and juices. These can irritate your bladder and change your sleep patterns, as can alcohol.



If you regularly have swollen ankles, make sure you sit or lie down for about an hour during the day. Raise your legs and feet so they are at, or above, the level of your heart. It may also help to wear support stockings.

Some medicines make your body produce more urine or promote its flow. In many cases this is how the medicine works to treat the condition (for example, water tablets for high blood pressure). If you are unsure if your medicines could be causing Nocturia, ask your doctor. Please do not stop taking your medicines without the advice of your doctor.

Consider whether anything is disturbing your sleep. If your room is too light or too cold, this may wake you up. If you have painful conditions that disturb your sleep consult with your GP. Reduce any naps you take during the day to see if this helps you to sleep better at night. Also, avoid stimulants, i.e. drinks containing caffeine before you go to bed.

What specialist treatments are there?

If Nocturia persists you may have a bladder / prostate problem that requires treatment.

Prostate problems: These may be treated in different ways and your doctor / nurse specialist will discuss the options with you. They may include treatment with medicines and possibly trans-urethral resection of prostate (TURP) surgery. (Please see our leaflet on TURP for further information).

Urge incontinence: This is commonly treated using a group of medicines called antimuscarinics. These medicines relax your bladder so that it can hold more urine.

Anti-diuretic hormone (ADH): ADH helps to regulate water balance in the body. A lower level of this hormone increases excessive thirst and the need to go to the toilet. In a few cases of Nocturia, your health care professional can advise if medication can be taken before bedtime to reduce production of urine overnight.



A low dose of diuretic (water tablet) in the late afternoon / early evening may help to unload excess fluid before bed time. This causes the kidneys to process body fluid during the evening hours, rather than after you have gone to bed and promotes a better night's sleep.

Your doctor or nurse will explain the benefits and potential side-effect of these medications. They may take a routine blood test before prescribing medicine to help your Nocturia.

Further Information

Find more information about adult bladder and bowel health in our information library at www.bbuk.org.uk. You can also contact the Bladder & Bowel UK confidential helpline (0161 214 4591).

For further advice on bladder and bowel problems speak to your GP or other healthcare professional.

