

Tolterodine for bladder problems



This leaflet is for parents and carers about how to use this medicine in children. Our information sometimes differs from that provided by the manufacturers, because their information is usually aimed at adults. Please read this leaflet carefully. Keep it somewhere safe so that you can read it again.

Name of medicine

Tolterodine tartrate

Common brand names

Tablets: Detrusitol, tolterodine

Slow-release (XL) capsules: Mariosea XL, Neditol XL, Tolterma XL, Tolthen XL, Blerone XL, Detrusitol XL, Preblacone XL

Why is it important for my child to take this medicine?

Tolterodine helps to relax the muscles in the wall of the bladder, where urine (wee) is stored. This allows the bladder to hold more urine. This will help children who wet the bed at night (nocturnal enuresis) and those who have difficulty controlling when they wee (urinary incontinence) or who wee often during the day (urinary frequency).

What is tolterodine available as?

- Tablets: 1 mg, 2 mg
- Slow-release (XL) capsules: 2 mg, 4 mg

When should I give tolterodine?

Tolterodine is usually given **once** or **twice** each day. Your doctor will tell you how often to give it.

- **Once a day:** This should be at bedtime for children with nocturnal enuresis. For children with other bladder disorders you can give tolterodine in the morning *or* the evening.
- **Twice a day:** Give one dose in the morning and one in the evening. Ideally, these times are 10–12 hours apart. For example, this could be between 7 and 8 am and between 7 and 8 pm.

Give the medicine at about the same time(s) each day so that this becomes part of your child's daily routine, which will help you to remember.

How much should I give?

Your doctor will work out the amount of medicine (the dose) that is right for your child. The dose will be shown on the medicine label.

Your doctor will probably recommend that your child has a low dose to start with. They may then increase the dose if necessary.



It is important that you follow your doctor's instructions about how much to give.

Do not increase the dose unless your doctor tells you to.

How should I give it?



Tablets should be swallowed with a glass of water, squash or juice. Your child should not chew the tablets.

You can crush the tablet and mix it with a small amount of soft food such as yogurt, honey or mashed potato. Make sure your child swallows it all straight away, without chewing.



Slow-release (XL) capsules should be swallowed whole with a glass of water, squash or juice. Your child should not chew the capsules.

When should the medicine start to work?

The medicine starts to work within a few hours but you may not see any improvement for up to a week. It can take up to 4 weeks for the medicine to have maximum effect. It is important that you continue to give tolterodine as you have been told to by the doctor during this time.

What if my child is sick (vomits)?

- If your child is sick less than 30 minutes after having a dose of tolterodine, give them the same dose again.
- If your child is sick more than 30 minutes after having a dose of tolterodine, you do not need to give them another dose. Wait until the next normal dose.
- If your child is sick again, seek advice from your doctor, pharmacist or hospital. They will decide what to do based on your child's condition and the medicine involved.

What if I forget to give it?

- If you usually give it once a day: Give the missed dose when you remember during the day, as long as this is at least 12 hours before the next dose is due. If you remember after this time, do not give the missed dose. Wait until the next usual dose.
- If you usually give it twice a day: If you remember up to 4 hours after you should have given a dose, give your child the missed dose. For example, if you usually give a dose at about 7 am, you can give the missed dose at any time up to 11 am. If you remember after that time, do not give the missed dose. Give the next dose as usual.

What if I think I have given too much?

You are unlikely to do harm if you give an extra dose of tolterodine by mistake. If you concerned that you may have given too much, contact your doctor or NHS services. Have the medicine or packaging with you if you telephone for advice.



Are there any possible side-effects?

We use medicines to make our children better, but sometimes they cause effects that we don't want (sideeffects).

Side-effects you must do something about

- Tolterodine may occasionally cause urinary retention, meaning that it is difficult to wee. If your child has difficulty emptying their bladder or starting to wee, or they cannot wee when they feel the need, contact your doctor.
- If your child has a high temperature (above 38C), a burning sensation when they wee, pain in the back or side, or cloudy or pink wee, they may have an infection in the bladder (urinary tract infection or UTI). Contact your doctor or pharmacist.
- If your child has chest pain or they feel their heart is racing, contact your doctor.
- Your child may get headache, dry mouth, indigestion, dry eyes, pins and needles. Contact your doctor, as the dose of tolterodine may be too high.
- Your child may have difficult doing a poo (constipation). Keep a note of how often they do a poo. If they get constipated, or if they feel that they want to poo but can't, contact your doctor or pharmacist for help.

Other side-effects you need to know about

- When your child first starts taking tolterodine they may feel sleepy, dizzy or have blurred vision. These effects are usually mild and should wear off after a few days as your child gets used to the medicine. If they are still a problem after 2 weeks, or you are worried, contact your doctor but continue to give tolterodine.
- Tell your child's teacher that they are taking tolterodine and that they may feel sleepy. Your child should take extra care when taking part in physical activities.
- Your child may get stomach pain feel sick (nausea) or be sick (vomit), pass a lot of wind (burping or farting), have diarrhoea (loose poo) or constipation (difficulty doing a poo) when they first start taking tolterodine.
- Your child may sometimes get side-effects that are not listed above. If you notice anything unusual and are concerned, contact your doctor. You can report any suspected side-effects to the UK safety scheme at <u>yellowcard.mhra.gov.uk/</u>
- More information on side-effects can be found in a <u>leaflet</u> on our website.

Can other medicines be given at the same time as tolterodine?

- You can give your child medicines that contain paracetamol or ibuprofen unless your doctor has told you not to.
- Tolterodine should not be taken with some medicines that you get on prescription. Tell your doctor and pharmacist about any other medicines your child is taking before giving tolterodine.
- Check with your doctor or pharmacist before giving any other medicines to your child. This includes herbal or complementary medicines.

General advice about medicines

- Try to give medicines at about the same times each day, to help you remember.
- If you are not sure a medicine is working, contact your doctor but continue to give the medicine as usual in the meantime. Do not give extra doses, as you may do harm.
- Only give this medicine to your child. Never give it to anyone else, even if their condition appears to be the same, as this could do harm.
- Make sure that you always have enough medicine. Order a new prescription at least 2 weeks before you will run out.
- Make sure that the medicine you have at home has not reached the 'best before' or 'use by' date on the packaging. Give old medicines to your pharmacist to dispose of.

Where should I keep this medicine?

- Keep the medicine in a cupboard, away from heat and direct sunlight. It does not need to be kept in the fridge.
- Make sure that children cannot see or reach the medicine.
- Keep the medicine in the container it came in.

Who to contact for more information

Your doctor, pharmacist or nurse will be able to give you more information about tolterodine and about other medicines used to treat bladder problems

You can also get useful information from:

| England: NHS 111 | Tel 111 <u>nhs.uk</u> |
|----------------------|---------------------------|
| Scotland: NHS 24 | Tel 111 nhs24.com |
| Wales: NHS 111 Wales | Tel 111 111.wales.nhs.uk |
| Northern Ireland: | NI Direct nidirect.gov.uk |

www.medicinesforchildren.org.uk









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The primary information source for this leaflet is the British National Formulary for Children. Details on other sources used can be found on www.medicinesforchildren.org.uk. We take great care to make sure that the information in this leaflet is correct and up to date. However, medicines can be used in different ways for different patients. It is important that you ask the advice of your doctor or pharmacist if you are not sure about something. This leaflet is about the use of these medicines in the UK, and may not apply to other countries. The Royal College of Paediatrics and Child Health, Neonatal and Paediatric Pharmacists Group, WellChild and the contributors and editors cannot be held responsible for the accuracy of information, omissions of information, or any actions that may be taken as a consequence of reading this leaflet.