**Overview**

Interstitial cystitis (IC) is a chronic inflammatory condition of the bladder that causes frequent, urgent, and painful urination with or without pelvic discomfort. The natural lining of the bladder (epithelium) is protected from toxins in the urine by a coating of enzymes (mucopolysaccharides) called the GAG (glycoaminoglycan) layer.

In IC, this protective layer is defective, allowing toxins to penetrate into the “interstitial layers” of the bladder wall, depolarize the nerve endings located there, and cause severe irritative voiding symptoms and bladder pain.

Unlike inflammation of the bladder caused by bacterial infection (cystitis), which is associated with urinary tract infections (UTI) and usually treated with antibiotics, no infectious agent has been found in IC. Though not curable, IC is treatable and most patients find relief with treatment and lifestyle changes.

**Incidence and Prevalence**

According to the National Institutes of Health (NIH), IC affects about 700,000 people in the United States, 90% of which are women. The average age of onset is 40 years. Although only 25% of cases involve people under age 30, the number of children affected by IC may be greater than commonly believed. IC is often misdiagnosed, and sufferers may see several doctors over the course of years before a diagnosis is made. Increasing awareness of the disease is helping to speed diagnosis and treatment. Increasing numbers of men are being diagnosed with IC who had been previously misdiagnosed with chronic prostatitis.