

Recurrent urinary tract infections

Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language please contact the PALS desk on 01271 314090 or at ndht.pals@nhs.net.

This leaflet provides information and guidance on reducing your risk of urinary tract infections.

Recurrent urinary tract infections (UTIs)

The three most common reasons for recurrent urinary tract infections are:

- Inadequate fluid intake
- Genitourinary syndrome of the menopause/Atrophic vaginitis (women only)
- Inability to empty the bladder adequately; an underactive bladder

Why fluid intake is important

The bladder is a muscle that expands as it fills up and contracts as it empties. When it is empty it folds in on itself, allowing bacteria to get trapped. Unless the bladder is adequately stretched with fluids the bacteria will not be flushed out.

Genitourinary syndrome of the menopause/Atrophic vaginitis

When women go through the menopause the body's oestrogen levels decrease, which leads to a thinning of the skin in and around the vagina and urinary tract. Some women notice that they feel dry and/or a little sore. The skin's outer layer is antibacterial in nature. With thinning skin this layer is compromised, creating an avenue for bacteria to enter and multiply/grow.

Underactive bladder

If the bladder does not adequately squeeze as it tries to empty, some urine will remain (a urinary residual) preventing bacteria from being flushed out and creating a medium for bacteria to grow in. Bacteria thrive in warm, moist areas.

Causes:

- Underlying medical/neurological problems e.g. multiple sclerosis, Parkinson's, diabetes
- Constipation
- An enlarged prostate (men only) squeezes the bladder outlet tube so that the bladder has to work much harder to force urine out of the bladder. Over a period of time the muscle can weaken and can no longer squeeze adequately to fully empty.
- Idiopathic; unknown cause

Treatments/preventative measures

- Adequate fluid intake on a daily basis. Drinking 1.5-2 litres/3-4 pints of a variety of fluids per day stretches and flushes the bladder, helping to prevent infections and constipation.
- Replenishing the skin with topical oestrogen cream or pessaries gradually thickens and strengthens the skin. These are available on prescription.
- Avoid and prevent constipation by eating plenty of fibre in the form of fruit and vegetables, wholemeal, granary, seeded breads and wheat or bran cereals. The Department of Health recommends 30g of fibre per person per day.
- An enlarged prostate can be relaxed and shrunk with medications
- Managing medical/neurological problems well can optimize bladder function

What can I do if my bladder is underactive?

- Don't rush when emptying your bladder. Underactive bladders often empty slowly, allow it time to do so.
- Double void i.e. stand and then sit down again on the toilet
- Tipping forwards and backwards/rocking whilst sat on the toilet
- Gentle pressure applied above and down into the pubic bone whilst sat on the toilet. This can help force urine out of the bladder.

All of the simple measures above can help ease a little more urine out of your bladder and reduce infection risk.

What if this doesn't improve my symptoms?

Unfortunately there are no medications available to make the bladder squeeze more effectively.

Learning to insert and remove a narrow tube (catheter) into the bladder to drain the residual urine several times per day can prevent further UTIs and reduce symptoms of urgency and frequency. This is known as intermittent catheterisation. The catheter is removed as soon as urine stops draining. Many people have found this process less difficult than they thought and find it relieves their symptoms significantly. You can be taught and supported with this technique by your bladder specialist nurse.

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email ndht.pals@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

'Care Opinion' comments forms are on all wards or online at www.careopinion.org.uk.

Royal Devon University Healthcare NHS Foundation Trust
Raleigh Park, Barnstaple
Devon EX31 4JB
Tel. 01271 322577
www.royaldevon.nhs.uk

© Royal Devon University Healthcare NHS Foundation Trust
This leaflet was designed by the Communications Department.
Email: ndht.contactus@nhs.net