

Royal Manchester Children's Hospital

Information for Patients

Clean Intermittent Catheterisation

This leaflet is designed to help you understand some of the reasons people need to intermittently catheterise (pass a tube in and out) their bladder, and more about what the process involves. Your nurse specialist or Doctor will have discussed the reasons specific to you/your child as to why you might need to carry out this procedure at home and you will be taught how to perform it by one of our specialist nursing team.

We know the idea of passing a tube into the bladder can be scary for both children and their families, but the team are here to support you every step of the way in helping to make this part of your everyday routine.

Why do I have to catheterise?

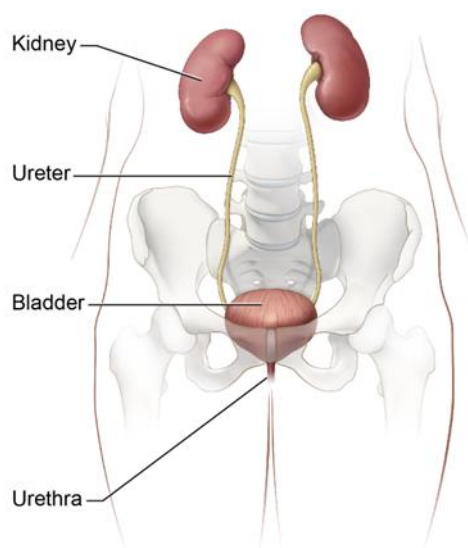
Before you can understand why you might need to catheterise, you need to learn a little bit about how the bladder works!

Your kidneys are responsible for filtering out toxins from your blood, and maintain your inner “fluid balance”, making sure your body doesn't have too much fluid at any one time. Excess fluid and toxins are excreted (passed) by the kidneys as urine (wee); this is why, when you drink lots in one go, you need to have a big wee shortly after!

Once the urine is excreted by the kidneys, it travels down two small tubes (called the “ureters”) to the bladder, which acts as a reservoir to hold your urine until you are ready to go to toilet.

The bladder is a big muscle and is connected to the outside of your body by a small tube called a urethra, which has an internal sphincter (ring of muscle) which helps you to control when you pass urine. For the bladder to empty properly, the sphincter needs to be relaxed and, at the same time, the bladder needs to squeeze to push all the urine out. If one or both of these mechanisms don't work, then your bladder will not empty properly which can cause other complications such as infection and incontinence.

Please see below a diagram of the urinary tract:



What sorts of things stops the bladder from emptying properly?

There are lots of different reasons why your bladder may not empty properly. Your bladder is controlled by signals from your brain, sent down the nerves along your spine, to the bladder. If there is an interruption in this pathway, it can result in your bladder being confused in what it needs to do. This is sometimes called a “neuropathic bladder”.

Sometimes the sphincter (ring of muscle) and the muscle of the bladder don’t always talk to each other as they should, and this can prevent the bladder from emptying fully and lead to “dysfunctional voiding”. Remember, your sphincter needs to relax at the same time that your bladder squeezes in order to empty properly.

There can also sometimes be different “types” of bladders which respond differently to being filled with urine – some bladders are stretchy and relaxed and are able to squeeze urine out when they are told to by the brain. However, some bladders are small and tight and therefore do not stretch or squeeze very well, leaving small bits of urine behind each time they empty.

The reason you or your child need to catheterise will be explained to you by your Doctor or nurse specialist. Understanding why you need to use catheters is very important and is the first step in the process.

We feel scared about using catheters, how can you make it easier for us?

It is completely normal to feel anxious about needing to pass a catheter in and out of your bladder. Whilst it is not a painful procedure, it can sometimes be uncomfortable, especially whilst you are still getting used to the sensation of the tube going in and out.

We have lots of ways to help make learning to catheterise as easy as possible, and work closely with play specialists whose job it is to help children understand medical procedures and make them less scary! The play specialist can help to explain the reasons for needing to catheterise in simple language which your child will understand and we even have a special teddy who needs to use catheters too!

We encourage children to familiarise themselves with the feel of a catheter through play and recommend tools such as reward charts and distraction to help them until they begin to get used to the procedure.

Depending on your child's underlying condition, they may need to catheterise from birth (in which case we teach parents/carers to perform the catheterisation) or they may be older and be able to learn to catheterise themselves, with support from their family and the nurse specialists.

How often will I need to use a catheter?

The frequency that you need to use a catheter varies for every patient dependent on your underlying condition. Some people are able to wee most of their urine out, and only leave a small bit behind; for these children/babies they may only need to use a catheter a few times a day. Other children are more reliant on the catheter to empty their bladder and may need to use it every 2-3 hours throughout the day. Some children may also need the help of a catheter to drain their urine out overnight.

Your Doctor or nurse specialist will decide how often you need to use catheters depending on your diagnosis and if you experience any other symptoms, such as infections and incontinence. Sometimes we will help you establish using catheters just a few times a day, and gradually increase or decrease this depending on how well your child/baby has been and how much you drain from the catheter each time you use it.

It is very important that you inform your nurse specialist or Doctor if you notice an increase or decrease in the amount of urine you drain each time, or if you start to get urine infections, as it may be that we need to alter how often you catheterise. Sometimes we will also ask you to complete a "bladder diary" which involves measuring the urine for a few days, and tells us exactly how much is being passed urethrally (when you have a wee naturally) and how much is being passed out the catheter.

Are there any risks to using intermittent catheters?

Often, the biggest risk to you/your child or baby, is **not** doing their catheters when you should be. Intermittent catheters are considered a very safe and effective way to empty the bladder and have been used in medicine for a long time. The catheters we use today have been tried and tested and are developed to reduce the chance of causing any complications.

As inserting a catheter into the urethra (the tube that connects your bladder to the outside of your body) is unnatural, it can sometimes cause some irritation. This can be evident in increased discomfort and sensitivity, or sometimes specks of blood after performing the procedure, usually noticeable on the tip of the catheter. This is rarely anything to be concerned about and generally clears up by itself. However, if you are worried, let your nurse specialist know as they can provide further support and may be able to look at different catheters for you to try which you may find easier or more comfortable to use.

There is also a small chance of introducing bacteria into the bladder and causing a urine infection. However, as the catheters are single use (you always use a new one every time) and are sterile, the chance of this occurring is small. The best way to prevent infection is to ensure you wash your hands correctly (you will be shown how to do this by your nurse specialist), always use a new catheter every time, and perform the catheterisation at the frequency requested by your Doctor or nurse specialist. It is also important to make sure you fully empty the bladder before you take the catheter out as, repeatedly

leaving wee behind, can also lead to infections. Your nurse specialist will teach you how to make sure the bladder is fully empty before removing the catheter.

Signs of a urine infection are smelly and/or cloudy urine, feeling the need to wee more often than usual, pain when passing urine urethrally, tummy and/or back pain and a temperature persistently about 37.5°C.

If you are concerned your child has a urine infection then you should seek medical advice via the GP, 111, your nurse specialist or if you feel your child is very unwell then take them to your nearest A&E department, if necessary by calling 999 for an ambulance. You should always let your Doctor or nurse specialist know if your child/baby is getting urine infections so they can review your catheterisation to minimise the chance of infections occurring in the future.

How do I get catheters sent to me at home?

You will be set up with a home delivery company by your nurse specialist. The company requests your catheters on a monthly basis via prescription from your GP. Once they get the prescription, they will then send out your catheters. Never let your catheter supply run too low; if you notice you have less than a two-week supply left, ring your company and ask for more. Your nurse specialist and GP can help support you with any problems you may have.

What is the right way to wash my hands?

In order to give yourself the best possible chance of avoiding infection, you must always wash your hands thoroughly before you do your catheter, as well as afterwards as you would normally when you've been to the toilet. There are 7 steps to correct hand washing, and this should be the first thing you learn to do before you start using your catheters!



How do I perform clean intermittent catheterisation?

Clean intermittent catheterisation is a very straightforward procedure. Whilst there are some slight differences depending on whether you are a boy or a girl, the underlying steps and principles are exactly the same.

Intermittent catheterisation is a “clean” procedure which means that, providing you have washed your hands correctly and you use a new catheter every time, you do not need to take any additional steps such as wearing gloves when doing your catheters. You may notice that the nurses and Doctors wear

gloves and aprons when they teach you; this is because they are protecting you from the germs they may carry that are different to your own germs.

You will be taught how to perform clean intermittent catheterisation by your nurse specialist – if you are old enough you can learn to do it yourself with support from the nurse and your family, or if you are a baby or unable to do it yourself your parent or carer will be taught to do it for you. We've included a summary of the steps you will have been taught which you can use for your reference.

Catheterising a **Boy**



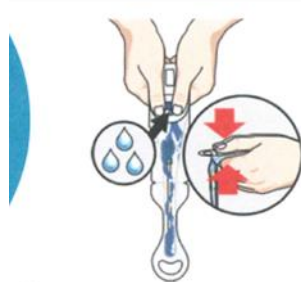
1. I begin by washing my hands.



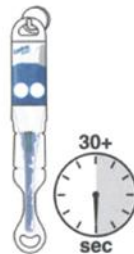
2. Then I unfold the package.



3. I hold the package straight up, then I fold the water pocket along the blue-white border, so that the white and blue areas meet each other.



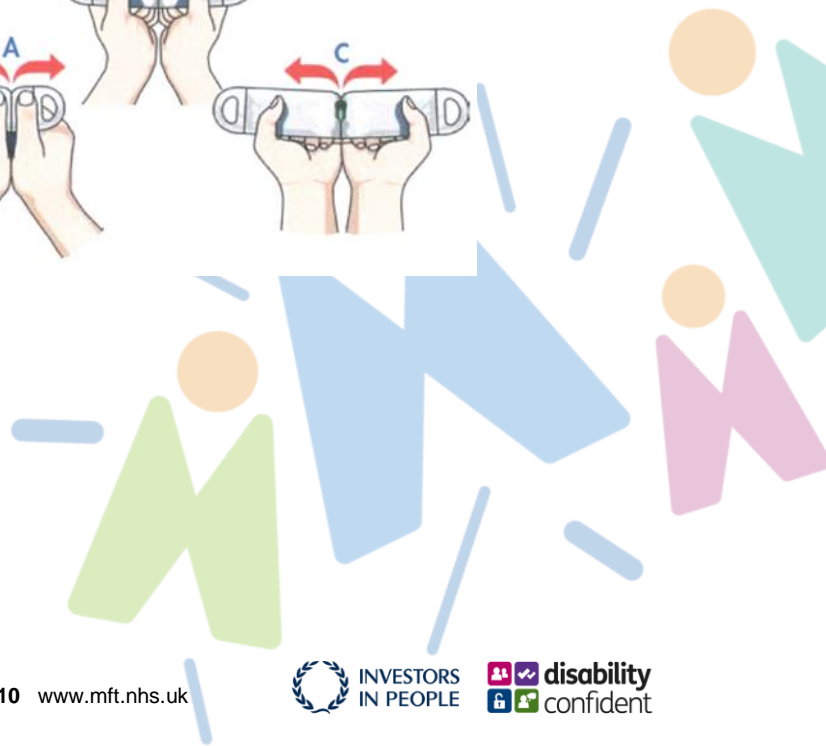
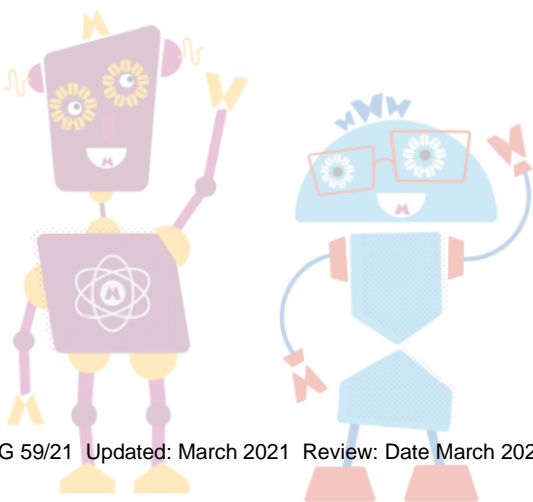
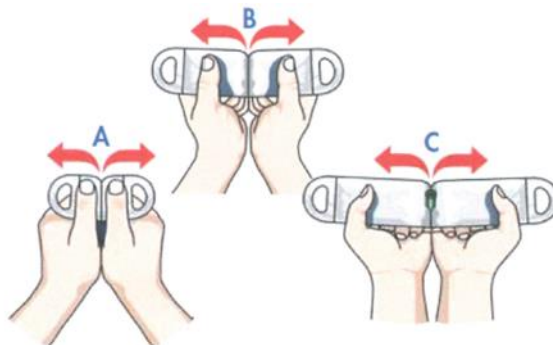
4. I squeeze the water pocket with both hands so that the water runs down and soaks the catheter.



5. Then I hang up LoFric Primo using the loops or the self-adhesive area and let the catheter soak for 30 seconds. When the catheter is ready, it is really slippery. In the meantime I get myself ready to catheterise.

6. Once a day, I wash my willy with soap. At other times it's enough to use a little water before catheterising.

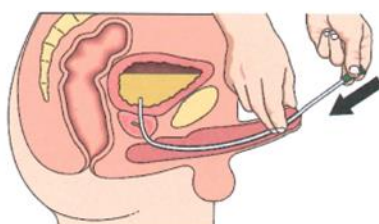
7. A. I peel open the packaging. I hold the package with one loop in each hand. I keep my hands close together and with a firm grip I slowly pull the packaging apart.
B. I take a new grip further down.
C. I continue opening until I can see the catheter's coloured connector.



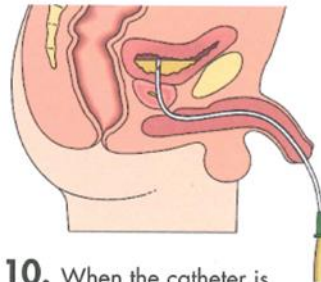


8. I hand up LoFric Primo using the loops or the self-adhesive area and remove the catheter from the package.

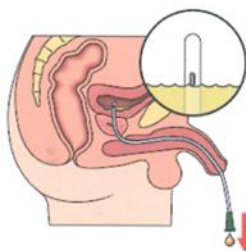
! Hint: I press the tip of the catheter with one hand to make it move upwards: this makes it easier to take the catheter out with the other hand.



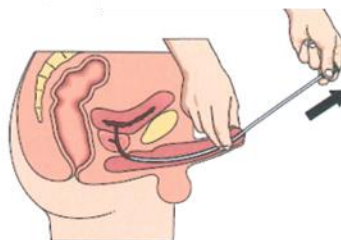
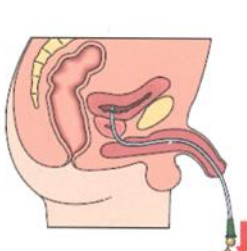
9. I insert the catheter. It is easier to put the catheter in if I can see the hole. I hold my willy pointing up and don't squeeze too hard. If it doesn't slide in easily I just wait a while. I take a deep breath or cough a little to relax the muscles, as this makes it easier to slide it in. If that doesn't work, I try using a new catheter.



10. When the catheter is all the way into the bladder, the wee comes out. I aim for the toilet.*

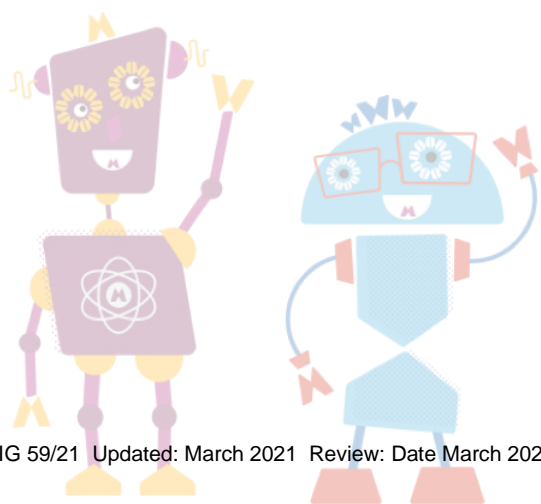


11. After the last drop of wee is out, I pull the catheter out slowly to make sure all the wee is really out. If more wee starts coming out, I stop and wait. When I am sure my bladder is emptied, I hold my willy pointing up again and I pinch or fold the catheter before I remove it all the way. This way I am sure that even the last drops of wee, left in the catheter, also come out.



12. The last thing I do is to wash my hands.

* If it is hard to get to a toilet I use a LoFric® Hydro-Kit™ catheter that comes with a bag to collect the wee.



Catheterising a *Girl*

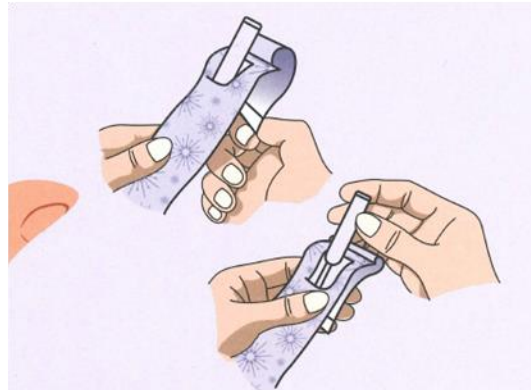


1. I begin by washing my hands.

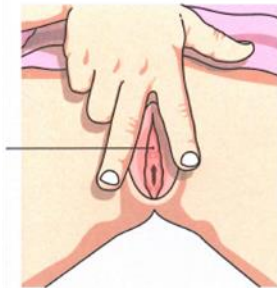
2. Once a day, I wash my private parts with soap. Otherwise it's enough to use water. I make sure that I always wash from the front to the back before I use my catheter.



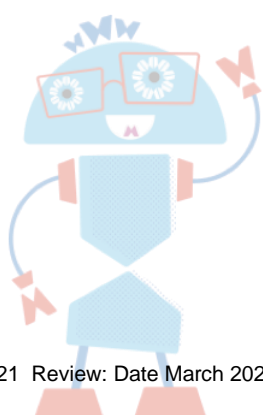
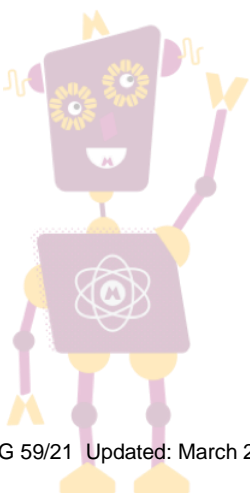
3. Squeeze to release the salt solution and the catheter is ready to use.

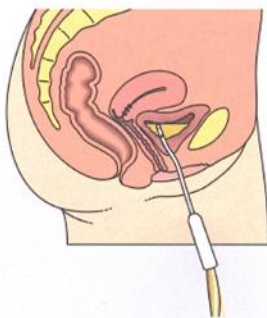


4. I peel open the label, hold it back and then grip the handle to take the catheter out.

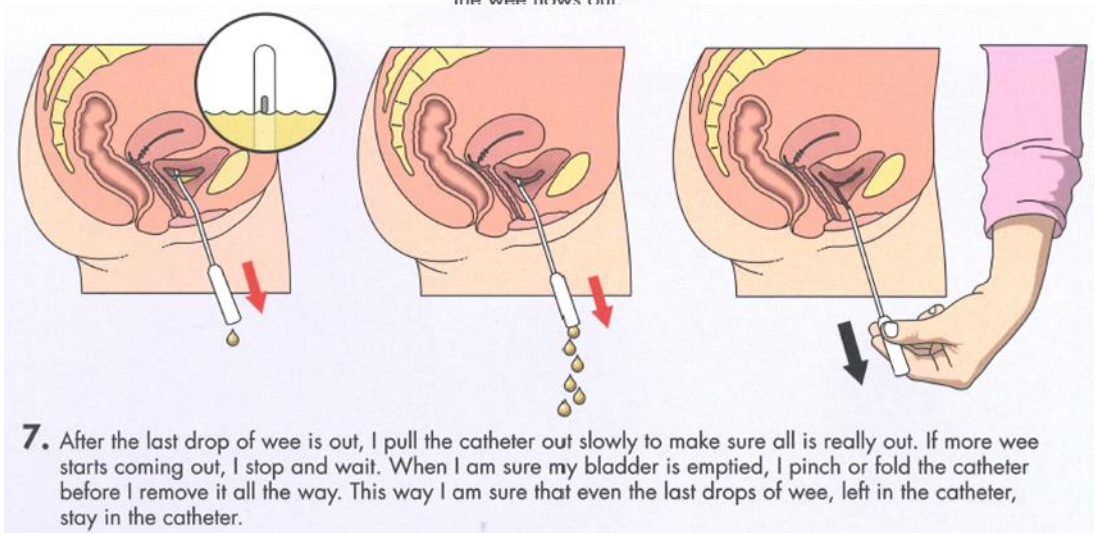


5. I insert the catheter. The opening of the urethra looks like a small star. At first it helps to use a mirror to find it, but you should soon learn how to feel your way.





6. When the catheter is all the way into the bladder, the wee flows out *



7. After the last drop of wee is out, I pull the catheter out slowly to make sure all is really out. If more wee starts coming out, I stop and wait. When I am sure my bladder is emptied, I pinch or fold the catheter before I remove it all the way. This way I am sure that even the last drops of wee, left in the catheter, stay in the catheter.

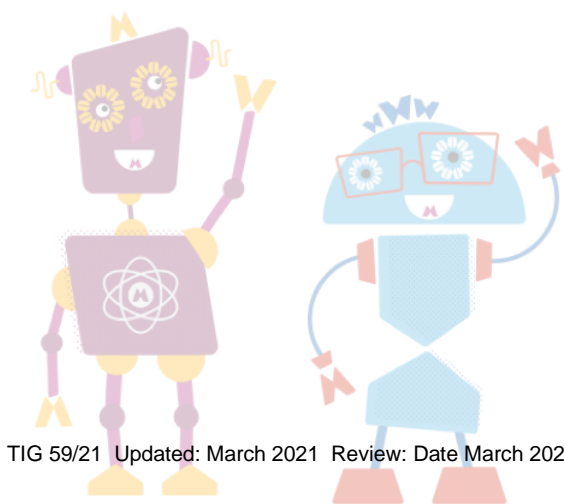


8. I put the catheter back in the package before I throw it away.



9. The last thing I do, is wash my hands.

* Because I sit in a wheelchair it is sometimes hard to empty the wee into the toilet. Then I use a Lofric® Hydro-Kit® catheter that comes with a bag to collect the wee.



Troubleshooting

No urine drains when I pass the catheter

It may be that you have not inserted the catheter far enough to enter the bladder. Sometimes the sphincter (ring of muscle) at the bladder neck can feel a bit like a wall, and it can be easy to think that you cannot advance the catheter any further. By staying relaxed and taking some deep breaths, you should be able to pass the catheter beyond this sphincter and into the bladder itself. In boys, it's also important to gently retract the foreskin enough to see the urethral opening, and hold it tilted upwards so there is a straight passage into the bladder when using your catheter.

You should always see urine drain out the end of the catheter every time you catheterise, although the amount you drain may be slightly different each time.

It hurts when I pass the catheter

When performing catheterisation correctly, it should not be a painful procedure, although some people describe it as feeling uncomfortable (you quickly get used to this feeling!). Often, the key to making catheterising as comfortable as possible, is to stay relaxed as this makes the passage into the bladder as open and wide as possible. Try taking some deep breaths and try again after resting for 15 minutes. If you continue to have pain every time you catheterise, contact your nurse specialist, as they may be able to offer further support and advice on different types of catheters to help make the procedure more comfortable.

Urine leaks around the catheter when I insert it/whilst it is draining

It is quite common for urine to sometimes leak around the catheter. This is because you are holding the "door" into your bladder open when you pass a catheter inside. It may be that the catheter is a bit too small for you and, by going up a catheter size, you will drain the bladder more effectively. Your nurse specialist can arrange for sample catheters in different sizes to be sent out for you to try out at home. Urine may also leak around the catheter because it is draining out of the bladder at high pressure; you may also see urine "spraying" out the end of the catheter. If you notice this, please let your nurse specialist know as it may be that they need to review how often you do your catheters.

I cannot get the catheter to go in

One of the most common reasons people struggle to pass a catheter is because they are not relaxed, and the muscle at the entrance to the bladder is tight, causing an obstruction. Try to take some slow deep breaths to relax your muscles, or sometimes coughing can help to open the sphincter (ring of muscle) enough to allow the catheter to go in. You can also retry again 15 minutes later, after having a little rest. If you are still struggling to pass the catheter, seek medical advice.

I've run out of catheters

If you have run out or have less than a week worth of catheters left then you need to contact the Hospital for advice. If necessary, the Hospital may need to supply you with a small quantity of catheters to last you until you are able to get a delivery from your home delivery company. It is important to always check how many catheters you have left, and ensure you place an order for more via your home delivery company when you have approximately two weeks' worth of catheters left. This is because it can take up to two weeks for the GP to prescribe your products, and for the home delivery company to get them delivered to your home address.

