

Maintaining continence and preventing UTIs and kidney damage

Golden rule 1:

Regular monitoring of your urine system by **you** and your doctor is the key to staying well.

Golden rule 2:

You are the most important person in maintaining your health and happiness

Golden rule 3:

Prevention is better than cure.

How do I prevent UTIs and kidney damage?

- Cranberry juice daily.
- Drink lots of water, especially in hot weather. Never get thirsty. Drinking lots of water flushes the bugs out.
- Perfect cathing technique prevents UTIs.
- Detecting UTIs early before they get out of control and into the kidneys.
- You should regularly dipstick your urine with a nitrite stick. If the sensitive pad on the stick turns red when you dribble urine over it, a UTI is most probably starting. Go to the doctor immediately.

What tests do I need to have done once a year in adulthood?

- Urological surveillance never stops, no matter how old you are.
- You will require:
 - renal ultrasound to check for kidney condition and growth
 - renal function tests (blood tests) to check for how well your bladder and muscles are working; what volume of urine is being held and if the pressures in your system are okay.
- Refer to your health planner and make sure you record the times and dates of your regular medical appointments.
- It is essential that you go to all medical appointments and have all the tests your doctors order, **even when you feel perfectly well.**

See our continence nurse at least annually to:

- check your cathing routine
- review your products and aids — catheter type and size; pads; how to improve your routine, etc.

If you have a stoma, this should be checked by a stomal nurse at least annually.

See the example continence management planner at the end for an example of an annual cycle of good continence care.

Maintaining continence: Surgery 1

What other surgical procedures are available for improved bladder continence?

The decision to proceed with surgical intervention is a complex one, and must be tailored to suit each individual. Procedures are constantly improving so it is worth keeping up to date by asking your urologist about developments when you visit. It is also one of the reasons you must have regular urological tests.

The following is a list of common urological procedures used in spina bifida.

Vesicostomy: What is it?

The bladder is directly connected to the skin by a stoma. Urine drains directly out.

Why have it?

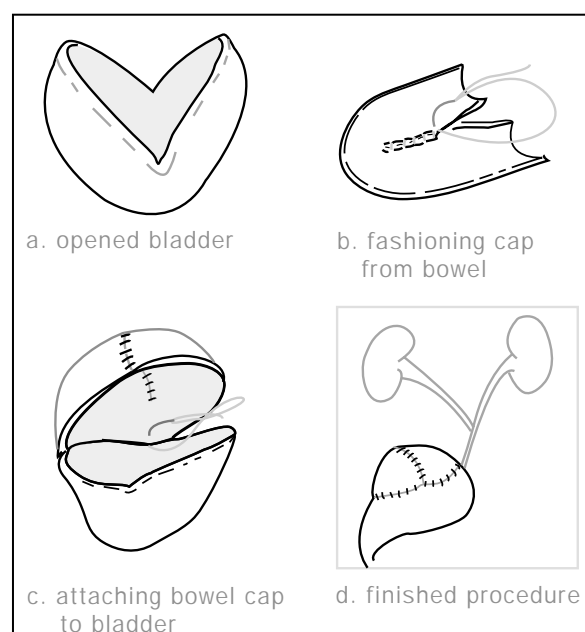
When there is poor bladder emptying with UTIs and back pressure (reflux) to the kidneys.

Augmentation cystoplasty: What is it?

The bladder is made bigger by sewing on a piece of bowel, stomach, or urinary system tissue.

Why have it?

When there is bad back pressure (reflux) to the kidneys.



Bladder augmentation

spina bifida

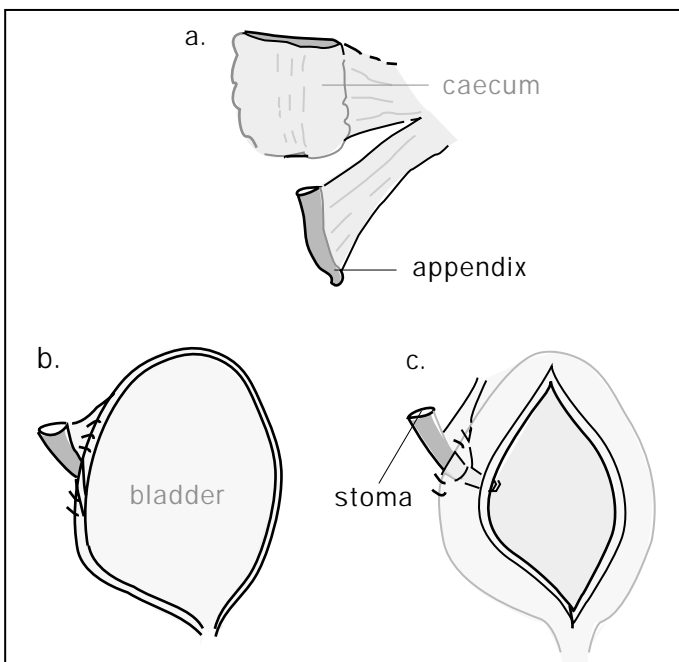
Passport to success

The Mitrofanoff procedure/catheterisable stomas for the bladder: What is it?

The appendix is used to connect the bladder to the skin. The bladder can then be cathed via the stoma (hole) in the skin through the appendix.

Why have it?

When the urethra is blocked and cathing is impossible or when the person can't cath for some other reason.



Mitrofanoff procedure

Maintaining continence: Surgery 2

Transurethral injection: What is it?

The sphincter (ring of muscle) that stops urine from leaking out of the bladder is injected to tighten it up.

Why have it?

When there is leakage (incontinence) from a floppy sphincter that does not close well.

Slings: What are they?

A sling, often made of tendon, is looped under the bladder around the urethra. This operation is generally done in women.

Why have it?

When there is leakage (incontinence) from a floppy sphincter that does not close well.

Artificial urinary sphincters: What are they?

An artificial sphincter often made of silicon is inserted to help close a floppy sphincter. This procedure is usually done in men.

Why have it?

When there is leakage (incontinence) from a floppy sphincter that does not close well.

Circumcision: What is it?

The foreskin of the male penis is cut away

Why have it?

When the foreskin is 'gummed down' and causes UTIs or prevents cathing or interferes with having normal erections.

If you cannot easily pull your foreskin back over the head of your penis, see your doctor.