

# spina bifida

Passport to success

Maintaining continence: Clean intermittent self catheterisation

## Time to review your self catheterisation technique

The major bladder management technique in spina bifida today is clean intermittent catheterisation (cathing).

Every few hours the bladder is emptied through a catheter (a plastic tube) inserted into the bladder.

This keeps the bladder as empty as possible and to function as 'normally' as possible.

**Keeping the bladder empty keeps you dry, prevents UTIs and prevents reflux.**

## The golden rules of cathing

- Establish a regular routine that suits your lifestyle.
- Empty the bladder according to your daily routine:
  - when you get up in the morning
  - after meal times
  - before going to bed.
- Always cath at the same time. This will help you to remember to cath when you are busy.
- Catheterisation should be performed before emptying the bowels
- Reusable catheters should be replaced by single-use catheters in the presence of a urinary tract infection.
- Allergies to latex (present in some gloves and catheters) are more common for you than the general population. Reactions can vary from mild skin rashes to severe anaphylactic shock. (You cannot breathe!)

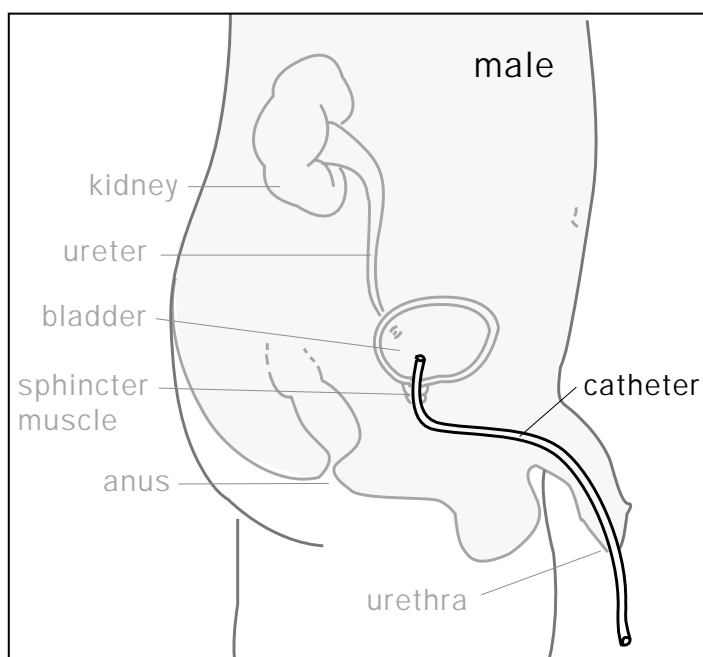
## Clean intermittent catheterisation: Instructions for males

Equipment required:

- catheter
- cleansing solution
- lubricating gel
- wipes, and
- continence pads.

Procedures:

- wash hands with soap and water
- retract foreskin (if not circumcised) and wash the tip of the penis using a cleansing solution
- hold penis upright and gently insert the catheter into the urethra. If resistance is met part way, rotate the catheter or use gentle but firm pressure on the catheter until the muscle relaxes. It may also help to take some deep, slow breaths.
- when the urine flow has stopped, advance the catheter one more inch to ensure that you get the last urine drops and the bladder is totally emptied
- slowly remove the catheter
- males with foreskins should always push the foreskin back again after the procedure
- wash hands, put on clean pad
- wash up catheter and pack up.



Catheterisation for males

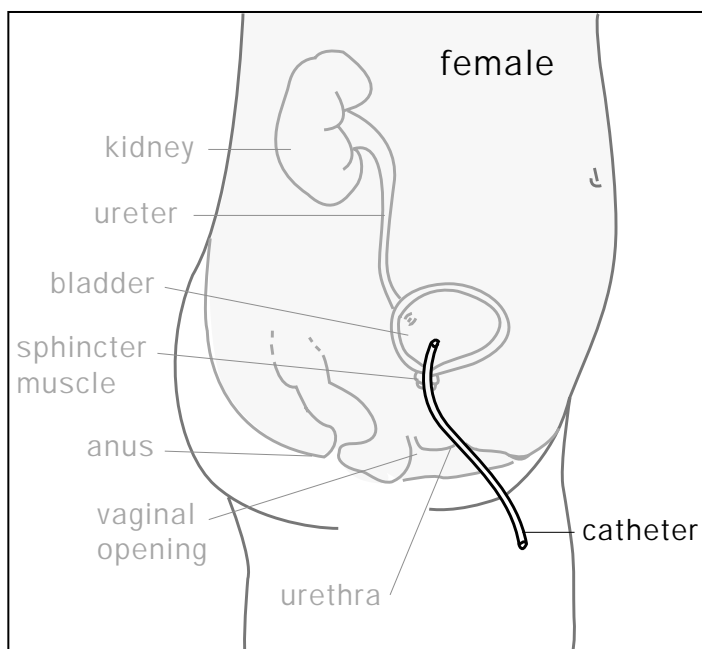
## Clean intermittent catheterisation: Instruction for females

### Equipment required:

- catheter
- cleansing solution
- lubricating gel
- wipes, and
- continence pads.

### Procedures:

- wash hands with soap and water
- clean the vulva with three wipes from front to back
- wipe hands
- with one hand, hold the labia apart and see or feel the clitoris
- with the other hand, place the tip of the catheter behind the clitoris. Insert gently until it enters the urethra. Gently push in until the urine flow begins.
- when urine has stopped flowing, slowly pull out catheter
- wash hands, put on clean pad
- wash up catheter and pack up.



Catheterisation for females

## Clean intermittent catheterisation: Instructions for males and females

### Four more rules to remember:

1. The routine must be the same each time.
2. Ensure that hands are clean at each point in the procedure.
3. Be careful to prevent contamination from clothing.
4. The bladder must be fully drained, as incomplete emptying is a common cause of urinary tract infections.

Sometimes the flow of urine is stopped if the sphincter closes upon the catheter giving the impression of complete bladder emptying. This may be indicated by resistance when removing the catheter and lower urine output than expected during drainage. In this case, you will need to repeat the procedure in 1/2 to 1 hour.

### Clean intermittent catheterisation: Questions and answers 1

#### What should I clean my catheter with?

Clean your catheter with clean soapy water, rinse it well and store it in an antibacterial solution like Milton.

#### What if I leak (dribble) inbetween cathing?

You need to manage it! There are many different types of continence pads, which will soak up the volume of urine you 'leak' between catheterising and will contain the smell. You need a comfortable continence pad, which holds the volume dribbled for at least 2 hours, retains odour and does not irritate the skin. See your continence nurse for help.

#### Why do I feel pain when I catheterise?

This can be for many reasons, some serious. It can be from a UTI, a damaged urethra where the catheter does not glide smoothly in and out, or muscle spasm, especially in the sphincter. Sometimes the sphincter will not easily open. Do not force the catheter in — try again in half an hour.

If ever blood is present, go to the doctor immediately. If pain persists for a week or more, see your doctor.



# spina bifida

## Clean intermittent catheterisation: Questions and answers 2

What if I don't catheterise because I have had a urinary diversion procedure?

Some older people with spina bifida do not catheterise.

You have most probably had an operation called a urinary diversion when you were very young. In this operation, the ureters coming from your kidneys to your bladder were cut and tied. Urine flow was effectively diverted to a stoma (opening) on the skin of your lower stomach and into a urinary bag.

This procedure is not preferred today, because it places greater stress on your kidneys, and coping with a bag is harder to conceal and deal with in many activities.

However, if you have a stoma and a urinary continence bag, this is a very effective way of achieving bladder continence.

You must care for your stoma — to stop the skin around it ulcerating (going hard and becoming irritated). You must have a well fitting bag and change it regularly. You must regularly dipstick your urine with a nitrite stick to test for UTI.

The continence nurse or stomal therapist at your spina bifida clinic is an expert in this care, and will assist you develop and maintain a consistent and effective routine.

Some adults have their diversion operation reversed or 'undiverted', and move to a CIC routine. The ureters coming from your kidneys to your bladder are rejoined. Your urologist will assist and guide you to make the right decision in this matter.

## Urinary tract infections (UTIs)

As described earlier, people with spina bifida are prone to UTIs.

You must be constantly on the alert for the warning signs and symptoms, which may indicate the presence of a UTI.

Early detection of a UTI will keep you well and out of hospital

The best person to pick up UTI early is **you**.

The commonest symptoms of a UTI are needing to go to the toilet often and pain when the urine comes out.

Because you may have reduced sensation in the pelvic region, you find it more difficult to notice these signs.

Other symptoms of UTI are:

- smelly or cloudy urine
- fever, nausea or vomiting
- sleepiness or tiredness
- loss of appetite
- headache and fever
- just feeling 'off colour'.

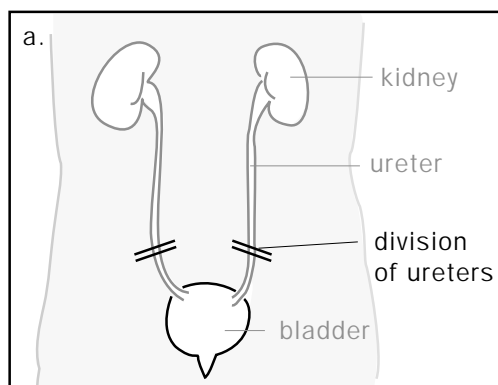
Kidney pain and spina bifida: an emergency. Do not hesitate to get expert help immediately.

Back pain in the kidney region occurs when the kidneys are infected.

Kidney infections are very serious and can damage the kidneys

Kidney infections are always an emergency.

Always see a doctor or go to hospital immediately if you have a kidney infection.



Urinary tract diversion:  
a. before,  
b. ileal conduit  
and  
c. after diversion.

