

Looking after your catheter

 Information for patients



In hospital and in the community

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What is a catheter?

A catheter is a soft hollow tube, which is used to drain urine from the bladder.

The catheter is inserted into the urethra (urethral catheter) or through a small hole in your abdomen directly into your bladder (suprapubic catheter).

Your urethra is the tube through which urine passes. In men it runs from the bladder through to the penis and in women from the bladder through to the vulva.

Once inserted, a small balloon device is inflated which prevents the catheter from falling out.



It is connected to a drainage bag which can be fixed to your leg or allowed to drain into a bag on a stand at the side of your bed. As an

alternative, a catheter valve may be used. This is attached to the end of the catheter and is usually released every 3 - 4 hours.

The catheter needs to be replaced by a nurse every 28 days if short-term, or every 12 weeks if long-term. However, some need changing more frequently than 12 weeks.

The doctors and nurses caring for you will review the ongoing need for the catheter or whether it can be removed. They will make this decision with you.

Why do I need a catheter?

A urinary catheter can be used on a long-term or short-term basis.

Doctors and nurses consider carefully whether a catheter is required and, where possible will involve you, and if you wish, your family in the decision.

Sometimes a urinary catheter is required for reasons such as:

- When an accurate measurement of how much urine you are producing is essential (e.g. if you have a serious infection).
- If you are not able to pass urine due to a blockage (e.g. enlarged prostate, or sometimes after surgery).
- If the bladder cannot generate enough force to empty and send urine down the urethra.
- In preparation for some types of surgery where expansion (filling) of the bladder is useful (e.g. operations on the womb).
- In preparation for other operations where a long period of recovery is anticipated so that the urine output of someone who is unconscious can be monitored.
- If you are very ill and are not able to go to the toilet.
- Where there is skin breakdown which may be made worse by incontinence.

What are the risks of a long-term indwelling catheter?

Having a urinary catheter to drain urine from the bladder can resolve a wide range of medical problems. However, there are some risks to having a long term indwelling catheter:

- Damage to the urethra and bladder caused by the long-term presence of the catheter, or by it being pulled accidentally.
- The inside of the catheter can develop grit or tiny stones due to the effect of bacteria. This may be seen in the catheter and in the urine bag.
- An indwelling catheter provides a route for bacteria to get into the bladder that may cause a urinary tract infection.
- Stones in the kidney and urinary tract are more common if you have an indwelling catheter.
- You may experience other problems such as urine passing around the outside of the catheter so that you still get wet. This is called bypassing and can occur particularly if you have diabetes or you have had a stroke.
- If you have bladder spasm the bladder muscle may push your catheter out with the balloon still full of water.
- If you are constipated this may also cause bypassing or block the catheter.

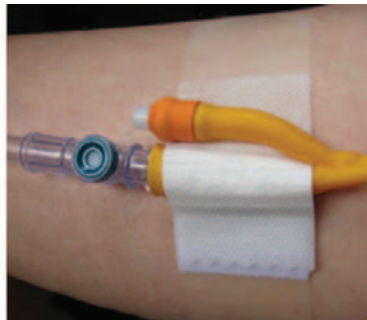
Drainage bags

Leg bags

Leg bags are worn on the thigh or calf and are available in different sizes and varying tube lengths.

The drainage bag will need a good support system to prevent the catheter being pulled. This can include a special strap to anchor the catheter to your leg and a woven leg sleeve or fabric straps to secure the leg bag to your calf or thigh. When you change the leg bag do not touch the tip of the tube.

Examples of devices to secure the catheter to the leg





How and when do I empty my leg bag?

Remember to always wash your hands before and after dealing with your catheter. Empty your bag into a clean toilet or jug. Wipe the end with toilet paper.

The leg bag will require emptying when it is half to three quarters full. If the bag gets too full it may cause the catheter to pull and be uncomfortable.

The leg bag will require changing every 5 to 7 days depending on the manufacturer's instructions. This can be carried out by a nurse or carer if you are unable to do it yourself.

Night bags

A night bag is attached to the bottom of the leg bag or to your catheter valve. This stores the urine you produce overnight and can be emptied the following morning so as not to disturb your sleep.

When you attach your night bag do not touch the tip of the bag tube. Remember to open the tap to allow urine to drain from the leg bag into the night bag.



Support your night bag on a floor hanger and position it lower than the bladder to aid drainage. Never leave your drainage bag touching the floor as it will pick up bacteria.

Night bags should only be used once and disposed of in the morning. Remember to close the leg bag tap before removing the night bag.

Catheter valves

These are more discreet than a leg bag and, because urine is stored in the bladder, they will keep your bladder in good working order. They need to be emptied at regular intervals. The valves are not suitable for everyone, so you will need to discuss with your health professional.

How do I avoid getting infections?

Good personal hygiene is very important when you have a catheter.

Always wash your hands with soap and water before and after dealing with your catheter.

Before carers deal with your catheter or drainage bag they should wash their hands with soap and water and ensure they are dry before wearing a new pair of disposable gloves.

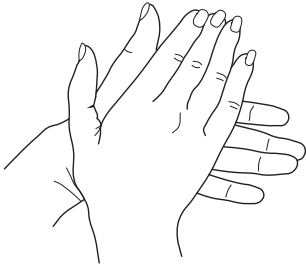
Have a regular bath or shower to ensure the catheter entry site is kept clean.

Wash around where the catheter enters your body at least once a day with soap and water to remove any encrustation or debris which may have dried to your catheter.

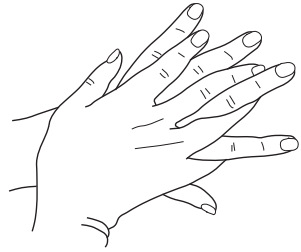
When cleaning the catheter, always wipe downwards and away from the body.

Do not use talcum powder or oil based creams around the catheter area.

Good hand washing technique



Palm to palm



Right palm over left back
and left palm over right back



Palm to palm, fingers interlaced



Backs of fingers to opposing palms,
with fingers interlocking



Rotational rubbing of right thumb,
clasping in left palm and vice versa



Rotational rubbing backwards and
forwards with clasping fingers of
right hand in left palm and vice versa

Eating and drinking

It is important to drink plenty of fluids a day; we recommend that you drink between 2-3 litres a day, or about 12 cups, unless directed otherwise by your doctor or consultant. This will dilute your urine and possibly reduce the risk of infection. It may also help to flush out any sediment in your bladder.

Constipation may lead to your catheter not draining properly. Try to eat a healthy and balanced diet to ensure a regular bowel movement.

Storage of equipment

Store your products in a clean, cool and dry place out of direct sunlight in the original packaging.

Dispose of products if they are past their expiry date or if the packaging has been damaged.

Disposal of equipment

Place your used products into two plastic bags and then put into your household bin.

If you have an infection, ask your health professional for advice on disposal.

Dealing with catheter problems

On occasions, people may experience problems with their catheters or accessories. The following advice may help:

Excess leakage of urine around the catheter

- A small amount of leakage may occasionally occur as there is a small gap between the body (urethra) and the catheter.
- Bladder spasms can also occur which may result in leakage.
- Provided your catheter is draining correctly, leakage is not an emergency, although do mention it to your health professional.

Poor drainage or non-drainage of urine

- Check the catheter tubing is not kinked or twisted.
- Check the drainage bag is properly connected and doesn't need emptying.
- Ensure the leg or night bag is below the level of the bladder.
- Ensure you are drinking enough fluids.
- Walking encourages better drainage and may dislodge any debris in the catheter.

Pain or discomfort

- Check that your drainage bag is not pulling on your catheter and that the bag is well supported.
- Pain in your lower abdomen or back (with or without a fever) could indicate a urine infection and you should seek advice from your health professional.

Blood in your urine

- You may occasionally see specs of blood in your urine and this is generally nothing to worry about.
- A larger quantity of blood in your urine may be a sign of a urinary tract infection and you should speak with your health professional.

When should I call a health professional?

If you develop any of the following symptoms, call your health professional:

- If you think you have a urine infection - the urine may have a foul odour.
- Your urine has changed colour, is very cloudy, looks bloody or has large blood clots in it.
- Urine keeps draining around the insertion site.
- No urine or very little urine is flowing into the collection bag and you feel your bladder is full.
- Your catheter keeps getting blocked.
- The catheter falls out.
- You have a fever.
- You develop nausea, vomiting or feel unwell.

Supplies

It is important to keep a supply of equipment in your home so that you are prepared if you encounter a problem:

- Two spare catheters with 10 ml syringe and sterile water.
- Anaesthetic / lubricating gel
- Drainage bags
- Equipment to support the catheter
- Patient notes with the catheter history

Storage

Store all your catheters, valves or drainage bags in their original packaging in a safe, dry place away from direct heat or sunlight.

Further support and advice

If you would like further advice regarding any of the information in this leaflet please speak to a healthcare professional.

Community nurse.....

Doctor.....

Spinal Injuries Outpatients Department:

- **0114 271 5677**

Urology out-patients:

- **0114 271 2343**

Gynaecology out-patients:

- **0114 226 8441**

Community Continence Service:

- **0114 305 1599**

Continence Advisor (NGH):

- **0114 271 4187**



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