

# Caring for your catheter

## Urology Department

## Patient Information Leaflet

### Introduction

This leaflet is for people who need to have catheter inserted into their bladder. Your urology nurse will explain how to care for the catheter before you leave hospital. This leaflet gives information about the catheter, and written instructions on how to care for it for when you get home.

If you would like more detailed information, please contact one of our urology nurse specialists.

### What is a catheter?

Your doctor has advised that you need to have a catheter inserted into your bladder to drain urine from it. A catheter is a small, flexible tube that is inserted through the water pipe (urethra) into the bladder to drain urine into a bag which is usually strapped to your leg. When the bag becomes full of urine, it will need to be emptied by opening the tap at the bottom of the bag, either over the lavatory or into a suitable container.

Alternatively, a catheter valve that fits securely into the end of the catheter can be used. This can be opened to allow urine to drain out at regular intervals. The valve is more discreet and can be more comfortable than a drainage bag. It allows your bladder to fill and empty as normally as possible when there is a catheter in place.

### Who will put the catheter in?

The catheter will be inserted by either a doctor or a nurse who will explain the reason for the catheter. They will also advise you as to whether it needs to be a permanent part of your lifestyle or only a temporary measure.

The catheter will feel strange at first and you will certainly feel conscious of it, constantly feeling that you want to pass urine. However, this sensation is quite normal and should soon pass.

## How do I care for my catheter?

It is important to keep the catheter clean as follows:

- Wash the catheter each day when you bath or shower, with soap and warm water.
- Always wash your hands before and after dealing with your catheter.
- Dry the catheter thoroughly and gently to prevent soreness.
- Always clean the catheter from the entrance site, in downward strokes.

Keeping your catheter clean will help prevent infections.

## How often is the catheter changed?

The catheter is usually changed every 12 weeks by the district nurse or a hospital nurse. If you are not sure of the arrangements for you, please contact the urology specialist nurses on:

01384 456111 ext. 2873 or mobile 07787 512834 (8am to 4pm, Monday to Friday)

**Do not** try to remove the catheter yourself. It should only be taken out by a doctor or nurse.

## The leg bag

If your catheter drains into a leg bag, this is attached directly to the catheter tube and will collect all the urine produced during the day. It will, of course, become heavier as it fills so do not allow it to become too full as this carries the risk of pulling out the catheter. Always wash your hands before and after using the tap on the end of the bag, and empty urine into the toilet or a container.

Small bags holding 500mls (one pint) or 750mls (one and a half pints) of urine are available. They are attached to the thigh or calf by use of straps or material holsters. They are available with long or short tubes so that they can be worn above or below the knee, as you prefer.

Leg bags can be used for seven days without being disconnected, unless there is a problem with them.

**Do not** put the straps over the front of the leg bags as this will block the flow of urine into the bag.

## The leg bag support

This is rather like a footless sock and is used to keep your leg bag securely attached to your leg.

## The G-strap

This prevents the catheter from being pulled. It has a Velcro strap around the catheter and your leg to hold the catheter firmly in position.

## The night drainage bag

Night drainage bags hold 2,000 mls (over three pints) of urine so there is no fear of them overflowing.

The bag is connected directly to the leg bag at night without disconnecting the leg bag. To connect the night drainage bag:

- Remove the leg bag support.
- Wash and dry your hands thoroughly.
- Empty the leg bag and, with the tap still open, push the end of the night bag into the small piece of tubing at the end of the tap, being careful not to touch the tip of the night bag. This should form a direct route for urine to collect in the night bag.
- Attach the night bag to its stand. This should stay on the floor by the side of your bed.
- In the morning, turn off the tap at the bottom of the leg bag.
- Disconnect the night bag. Pour the urine away by tearing the bag and allowing it to drain into the toilet. Throw the bag away as you will need to use a new bag each night. Make sure you wash and dry your hands thoroughly.

**Do** empty your catheter bag before it gets too full. This prevents leaking and abdominal (tummy) discomfort which usually happens when it is three quarters full.

**Do not** let the tubing become kinked or have the bag above your groin as this can lead to leaking or infection.

## Changing the leg bag

Never disconnect the bag from the catheter unless you are changing the bag. When changing the bag, do not touch the connector as this increases the risk of infection.

We will give you a small supply of leg and night bags before you leave hospital. Your hospital or district nurse will tell you how to obtain further supplies.

## The catheter valve

If your catheter has a valve to empty it:

- You will need to change the valve each week. Your nurse will show you how to do this.
- Empty the catheter every four hours or more often if your bladder feels full.
- Wash and dry your hands thoroughly, before and after emptying.
- After emptying, wipe the valve with clean tissue and replace it inside your underwear.
- Do not allow the catheter to hang down unsupported as this will cause discomfort. If you do not wear close-fitting clothes, your catheter should be supported by a G-strap on your leg.
- If you drain the urine into a container at home, you will need to wash this in warm, soapy water after each use. Store it upside down to allow it to drain dry.

## Eating and drinking

To keep your catheter draining well, it is important that you drink at least 12 cups, about four pints, of fluid every day. This can include tea, coffee, water, fruit juice etc.

When you have a catheter, it helps to have a high fibre diet to prevent constipation as this may stop the catheter from draining properly. High fibre foods include fresh fruit and vegetables, baked beans, wholemeal bread and bran cereals.

## What should I look out for?

You should consult your GP or district nurse if you have:

- Any discharge from the entrance site of the catheter. This could be cream, white, yellow or brown in colour or bloodstained.
- A horrible or strange smell from the catheter or your urine.
- Urine that looks cloudy or slimy.
- Pain or discomfort.
- Abdominal (tummy) discomfort and your catheter has not drained any urine for four hours.
- Leaking from the catheter or around the catheter site.
- Irritation from the catheter which is causing soreness or redness.

## Common problems with catheters

These include:

- Bladder spasms. These feel like abdominal (tummy) cramps and are quite common when you have a catheter in your bladder. The pain is caused by the bladder trying to squeeze out the balloon. If you are unable to tolerate these cramps, your GP can sometimes prescribe medication that may help.
- Leakage around the catheter, called bypassing. It is sometimes the result of bladder spasms or can take place when you open your bowels. If it does happen, please check that your urine is still draining. If it is not, you will need to contact your district nurse as soon as possible.
- Blood or debris in the urine. This can be common with a catheter but please mention it to your district nurse. If you see any large blood clots, or solid pieces of debris passing down the catheter, please contact your district nurse for advice as this may cause a blockage.
- Blockage. **This will become an emergency situation if not dealt with straight away.** Check that:
  - the drainage bag is below the level of your bladder
  - the catheter has no kinks or twists in it
  - that there are no clots or debris in the catheter
  - that you are drinking enough

If the catheter will not unblock, contact your district nurse immediately.

- Catheter falls out. This is unlikely to happen because there is a balloon holding two teaspoons of sterile water, which is inflated through a second tube inside the catheter. This must be deflated by a doctor or nurse before the catheter is removed. However if your catheter does fall out, contact your district nurse immediately.
- Urine infection. Bacteria are usually found in the urine once a catheter has been in for more than 10 to 14 days. It does not necessarily mean that you need to take antibiotics. However, if you have cloudy urine, cystitis (a burning sensation), urine that smells unpleasant or a high temperature, contact your GP or district nurse to determine whether you should have antibiotic treatment.

## Can I still make love?

Yes. Just follow these simple instructions:

Both partners should take extra care with hygiene.

Women should tape the catheter to their stomach. Their partner should wear a condom to prevent the risk of infection and also use plenty of water-soluble lubrication such as KY Jelly. You can get this from pharmacies. Occasionally, the catheter may come out and will need to be replaced. If you are sexually active, please discuss with your nurse the best way to manage with a catheter.

Men can fold the catheter tubing along the side of the erect penis and put a condom over the top. Please not that there should not be any pulling on the catheter tube. Again, plenty of KY Jelly is advised.

## Can I find out more?

You can find out more from the following website:

### **NHS Choices**

<http://www.nhs.uk/conditions/urinary-catheterization/Pages/Introduction.aspx>

## Contact information for urology nurse specialists

If you have any questions, you would like more information, or if there is anything you do not understand about this leaflet, please contact:

Urology nurse specialists on 01384 456111 ext. 2873 or mobile 07787 512834 (8am to 4pm, Monday to Friday)

Ward C6 on 01384 244282

Russells Hall Hospital switchboard number: 01384 456111

**This leaflet can be downloaded or printed from:**

<http://dudleygroup.nhs.uk/services-and-wards/urology/>

If you have any feedback on this patient information leaflet, please email [patient.information@dgh.nhs.uk](mailto:patient.information@dgh.nhs.uk)

**This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.**

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta brosură poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

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