

A photograph of an elderly couple embracing outdoors. The man on the left has grey hair and a mustache, wearing a white polo shirt. The woman on the right has short grey hair and is wearing a blue t-shirt. They are both smiling warmly at the camera. The background is a soft-focus green, suggesting a park or garden setting.

Catheter care and you

Advice for
older people

NHS

Further support and advice

As well as your GP, Practice Nurse, District Nurse, or Clinical Nurse Specialist, you can contact the organisations below for support and advice.

Bladder & Bowel Foundation

Information and support services for those affected by bowel and bladder conditions.

Tel: **0845 345 0165**

Email: **info@bladderandbowelfoundation.org**

www.bladderandbowelfoundation.org

Disabled Living Foundation

Advice and information on independent living.

Tel: **0300 999 0004**

Email: **info@dlf.org.uk**

www.dlf.org.uk

Age UK

General advice and information for people in later life.

Freephone: **0800 169 65 65**

Lines are open seven days a week from 8am to 7pm

www.ageuk.org.uk

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What is this guide about?

Many older people have a catheter, although it's not a common topic of conversation as it can raise uncomfortable feelings of embarrassment. However, by understanding how to look after your catheter you can continue your usual day to day activities like socialising, shopping and exercising.

This guide explains what a catheter is, why you may need one, what are the risks and how it is fitted. It will also provide advice on how to care for your catheter, how to spot potential problems and who to contact if there is a problem.

It's important to look after your catheter, to reduce infection risk, and to ensure that it doesn't interfere with your everyday life.

You will notice that this guide came with a booklet in the *Catheter Care* wallet. This booklet is for your healthcare professional (your GP, Practice or District Nurse, or Continence Nurse) to record details about your catheter treatment.

Please take the 'Patient records' booklet with you if you have your catheter changed, removed or if you need to attend other services because of your catheter, such as an A&E Department.

You can continue with your normal everyday activities with a catheter.



Catheter basics: what to expect

What is a catheter?

A catheter is a soft flexible tube inserted in the bladder to drain urine. At the tip of the catheter tube there is a small balloon that is inflated with a small amount of sterile water that holds the catheter in position inside the bladder.

At the other end the catheter is connected to a drainage valve or bag. The catheter drains urine either through a catheter valve into a toilet or into a bag (a leg, belly or night bag).

Why am I having a catheter?

People of all ages may need to have a catheter fitted for a variety of reasons.

You may have difficulties passing urine, or it may be necessary when having certain operations. Sometimes it is inserted in hospital if you have been very unwell.

Talk to your healthcare professional to make sure you understand why you need a catheter, whether you have other options and when it should be removed. Page 21 has space for you to make notes.

How long will the catheter be in for?

You may have a catheter for a short period of time (hours, days, weeks) or more long-term. Ask your healthcare professional how long you will need the catheter for and when the removal or change appointment will be. Make a note of it on page 21.

Ask your healthcare professional:

- Why you are having a catheter.
- Are there other alternatives to a catheter.
- What type of catheter is best for you.
- How long you need the catheter for.
- If you will have follow up appointments.
- What problems might you have/need to contact your healthcare professional about.
- Who to contact if there is a problem - make a note of the contact details on page 22.

Catheter types and fittings

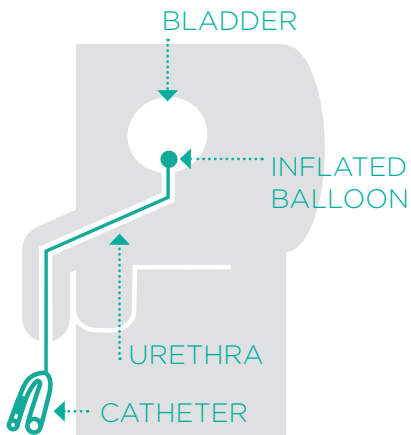
There are several types of catheter. They come in different lengths, sizes, and in either silicone or latex. Your circumstances and changing clinical needs will suggest which ones may be suitable for you. Your healthcare professional will discuss these options with you and explain how they are fitted.

Intermittent catheter (self-catheterisation)

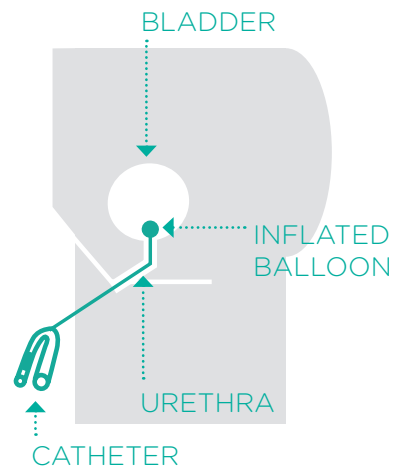
This catheter is inserted into the bladder through the passage (known as the urethra) that carries urine from the bladder to outside the body. You insert this catheter just long enough to drain urine directly into a toilet or drainage bag, and then remove it. The number of times you need to use it depends on your bladder problem. It could be anything from 1-8 times a day. Your healthcare professional will provide training in this technique.

Urethral catheter

Like the intermittent catheter, this catheter is inserted through the urethra. It is usually used if you need a catheter for a short period of time or if you cannot use an intermittent catheter. Your healthcare professional will use special equipment to insert the catheter and will apply some local anaesthetic gel to reduce discomfort. It can feel a little uncomfortable but is not usually a painful procedure.



Male urethral catheter

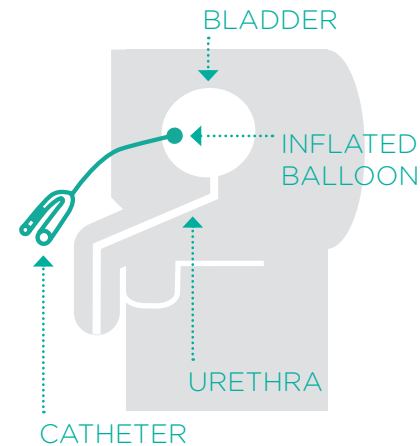


Female urethral catheter

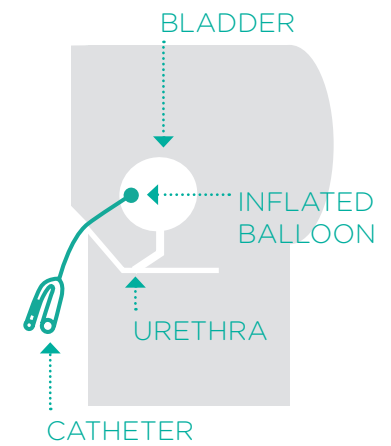
Suprapubic catheter

This catheter is inserted just below your belly button directly into your bladder. A doctor will insert this during a small operation, adding a small stitch near the catheter to hold it in place during the first 7-10 days. This stitch will be either a dissolving one or be removed by your healthcare professional. Initially you may feel some discomfort around the insertion area, however this reduces with healing.

Normally you would return to hospital for the first catheter change to ensure it is working properly, and then your nurse would look after future catheter changes. This catheter is normally offered if a urethral catheter cannot be inserted, if you need a catheter for a long period of time or if you are sexually active.



Male suprapubic catheter



Female suprapubic catheter

'Condom catheter'

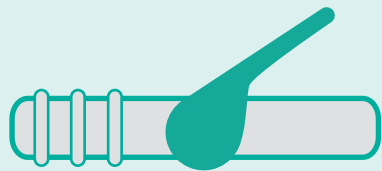
This catheter (also known as an 'external sheath' or 'penile sheath') fits over the penis like a condom, but is not a real catheter. It is held in place with an adhesive and attaches to a drainage bag which is strapped to a leg. It comes in different sizes and is available in latex and silicone. Your healthcare professional, or carer, will teach you how to fit it.

How does a catheter stay in place?

Once the catheter is inserted, it is held in place by a small balloon at the tip of the catheter that is inflated with sterile water. You secure the catheter to your skin or leg with specially designed catheter straps, plasters or a sleeve. These help to ensure that the catheter is not pulled out.

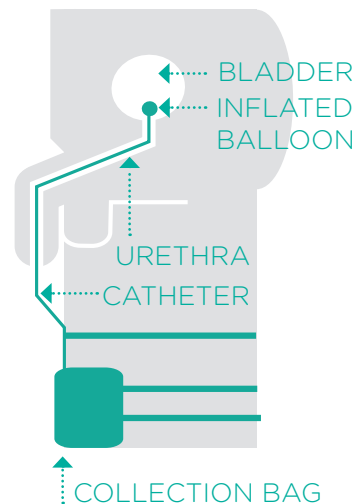
What happens if the catheter comes out?

A urethral catheter that is pulled out can cause bleeding and damage to your bladder and urethra. A suprapubic catheter that falls out will need to be re-inserted by a healthcare professional within a few hours to avoid closure of the insertion hole. In both cases you will need to contact your healthcare professional.



Catheter valve

This is like a tap at the end of your catheter. You open the valve at regular intervals to allow urine to drain from your bladder into a toilet. Valves are not suitable for everyone, however this option helps to maintain your bladder capacity and elasticity.



Collection bags

A belly bag is fastened by a waist belt, and a leg bag is strapped to your thigh or calf using Velcro straps or elasticated sleeves. Both are discreetly worn under clothes. Drainage bags are available on prescription. They vary in shape, material, tube length and type of drainage tap. For day use 350ml, 500ml, and 600ml bags are commonly used. At night you may prefer to use larger 1 or 2 litre bags. Your healthcare professional can advise you.

How will the catheter feel and how long will I have it?

You may find the catheter a little uncomfortable at first. It is common to feel as if you need the toilet and at times urine may leak around the catheter. Your bladder muscles may contract which can be painful.

If you feel uncomfortable:

- Check the catheter itself is secured and the bag is supported with straps or a sleeve.
- Check the catheter is not pulling or strained because the bag is too full or the straps too tight or too loose, and reposition the bag as needed.
- Do not try to strain and push the catheter out.
- Drink plenty of water and avoid tea, coffee, fruit juice and fizzy drinks.
- Take some painkillers to ease any pain.

Contact your healthcare professional about which painkillers are suitable for you or if the discomfort persists for more than four hours.

When will my catheter be changed?

Your healthcare professional will tell you when the catheter will be changed. Make a note of this on page 21. It will need changing every 4-12 weeks.

When and how will my catheter be removed?

You must not try to change or remove the catheter yourself. Your healthcare professional will arrange an appointment with you to remove it. It is removed by deflating the water balloon using a syringe and slipping the catheter out. This may be a little uncomfortable but not painful.

Ask your healthcare professional to explain the removal procedure.

Trial without catheter

You may be given a 'trial without catheter' to test whether you can pass urine after the catheter has been removed. You may be asked to attend a clinic and your bladder may be scanned to check that it is empty. If you cannot pass urine independently you may have a catheter fitted again.

Benefits and risks of having a catheter

The main benefit of a catheter is to allow you to pass urine when you have been finding it difficult. However all catheter users, with the exception of those using a condom catheter, are at risk of developing a urine infection (known as a 'urinary tract infection') or with long-term use, developing stones in their bladder (known as 'urinary stones' or 'bladder stones').

Turn to page 19 for ways to resolve common catheter problems.

Urinary Tract Infection

Urinary tract infections (UTIs) are one of the most common types of infection associated with catheters. The longer a catheter is in place, the higher the risk of infection. This is why it is important to know when your catheter should be replaced and removed. UTI symptoms include:

pain and discomfort in the lower tummy or groin area • a high temperature (fever) • chills • confusion • vomiting • cloudy urine with an unpleasant smell.

Good hygiene practises and drinking plenty of fluids help reduce the risk of UTIs. If you think you have a UTI contact your GP or healthcare professional.

Good hygiene practices (see pages 13–14), plenty of fluids and a healthy diet help to reduce the risk of infections (see page 17).

Urinary Stones

Urinary stones can be associated with long term catheter use (usually over a period of years). Symptoms include discomfort and pain in the lower tummy, cloudy or dark coloured urine and blood in the urine. You may need a minor operation in order to break up the stones. Drinking plenty of fluids helps to reduce the risk of developing urinary stones (see page 17).

Remember to make a note of contact details of the healthcare professionals involved in your catheter care on page 22.

Intermittent catheter (self-catheterisation)

Advantages

- Has a lower risk of UTIs, blockages and leaks.
- As the urine is still stored in the bladder it helps to maintain bladder tone.
- Catheter is not continually in place.
- Can be taught to remove and insert the catheter yourself.
- Extra privacy as it does not need a bag and can be emptied directly into the toilet.

Disadvantages

- Regularly inserting the catheter throughout the day (and night) can be uncomfortable and inconvenient.
- Repeatedly inserting the catheter can damage the urethra.

Urethral catheter

Advantages

- No need to fit and remove a catheter throughout the day.
- It is quick and simple to drain urine.

Disadvantages

- Higher risk of blockages and leaks than intermittent catheters.
- Catheter must be left in place.
- If using a drainage bag (day and night bag) it must be worn at all times.
- Sex can be more difficult.

Suprapubic catheter

Advantages

- No need to fit and remove a catheter throughout the day.
- It is quick and simple to drain urine.
- Easier to have sex, to access and to clean than urethral catheter.
- No risk of damage to the passage that carries urine from the bladder to outside the body (the urethra) from the catheter.

Disadvantages

- Higher risk of blockages and leaks than intermittent catheters.
- A small operation is needed to fit it.
- Catheter must be left in place.
- If using a drainage bag (day and night bag) it must be worn at all times.
- A little urine may still leak from the urethra.
- Can sometimes be difficult to change.

Jean's story

“ I can't say I was thrilled to be told I needed to have a catheter. I was nervous and squeamish at the prospect, but I was having so much trouble going to the toilet something needed to be done.

I'm quite an active person and I worried I wouldn't be able to walk my dog or continue my exercise classes. I regularly have my children and grandchildren over – would they see it? What if the catheter came out? I would be so embarrassed.

My nurse talked me through how to look after my catheter, reassured me that I could carry on with my life as normal. I have plenty of long skirts and loose fitting trousers so I felt confident in public. We discussed how to keep the catheter clean and I knew who to contact if I had any problems.

I was fitted with a urethral catheter. It was uncomfortable at first and the bag took some getting used to, but after a week or so I was used to it. It didn't stop me walking and no one knew unless I told them.

Having a catheter wasn't the most pleasant of experiences but it worked out well for me. ”



Making it work

Washing your hands

We all wash our hands after going to the toilet or when preparing food. However when you have a catheter it is even more important to adopt good hygiene practices. Make sure you thoroughly wash your hands before and after touching your catheter or leg bag to reduce risk of infection. If a loved one or carer touches the catheter or bag, they must also thoroughly wash their hands.

Washing your hands before and after touching your catheter reduces the risk of infection.

You should use an un-perfumed soap, ideally from a dispenser, and rinse thoroughly with running water. Ensure your hands are thoroughly dry with disposable paper kitchen towels.

It is common to miss several areas when washing hands. Follow the steps on the opposite page to make sure you clean all areas.

Cleaning your catheter

It is important to keep the area where your catheter is inserted clean. Wash this area at least once a day with un-perfumed soap, using downward strokes from where the catheter enters the body. This downward motion helps to prevent infections.

You can shower or bathe as normal. Empty your leg bag first and leave the leg bag in place.

Do not use talcum powder or cream around the catheter or insertion area as this can increase the risk of infection.

If you have been told not to shower or bathe, or are unable to, you must wash the area where your catheter is inserted at least twice a day.

Dry the catheter insertion area and catheter with disposable paper kitchen towels.

1 Wash the palms of your hands



2 Wash between your fingers at the back of your hands



3 Wash between your fingers palm to palm



4 Wash your palms



5 Wash your thumbs and thumb joints



6 Wash your finger tips and under your nails



If you have a leg bag, do not disconnect it when washing as this increases the risk of infection.

During the night

If you use a leg bag ensure you loosen the Velcro straps at night so you don't restrict blood flow to your leg. Do not remove the straps as they stop the leg bag from pulling the catheter. If you use specially designed plasters to secure the catheter these should also be used at night. To reduce the risk of infections the catheter valve or leg-bag should not be disconnected from the catheter.

You may want to fit an extra capacity 1 or 2 litre bag to avoid getting up in the night to change the leg bag or release the catheter valve. Attach the larger bag to the catheter valve or leg-bag and leave the connecting valve turned on to ensure urine flows from the smaller to the larger bag. The larger bag is easily fitted, but use a drainage bag stand, positioned lower than the bladder, to encourage drainage.

Extra capacity bags are not re-usable. After use, wear disposable gloves and pull the side tap to empty the contents into a toilet. Wrap the bag in newspaper or a plastic bag and put in the normal household rubbish.



Your healthcare professional will show you how to connect and disconnect your night bag.

When should I empty my catheter?

Empty a leg bag into a toilet once it is three quarters full. Avoid touching the toilet with the tap when emptying the bag and ensure you wipe the tap clean with a disposable kitchen paper towel. Don't let the leg bag get overfull. This prevents it pulling on the catheter. Make sure you wash your hands before and after handling your catheter or bag.

Empty a catheter fitted with a valve into a toilet at regular intervals: when you feel like the toilet or at least every 2-3 hours during the day.

Your healthcare professional will show you how to empty your catheter.

How often should I fit a new drainage bag?

You should fit a new leg bag every 5-7 days and a belly bag every 28 days. Drain the contents of the bag into a toilet and flush as usual. Place used catheter bags in a fastened bag and thrown away in your normal household waste.

Make sure you thoroughly wash your hands before and after handling your catheter or bag. See page 14.

Where can I get more catheter bags and equipment?

Your healthcare professional will give you some catheter supplies after fitting your catheter and tell you how to get more in future. Most catheter equipment is available on prescription. If you are aged 60 or over, you are entitled to free prescriptions.

Lifestyle

A healthy diet, plenty of fluids and regular exercise will benefit you and maintain a healthy bladder.

It's always important to have a healthy balanced diet, but especially when you have a catheter.

A diet which is high in fibre helps to avoid constipation. A full bowel pressing on your bladder can reduce urine drainage and may even block the catheter.

Foods that are high in fibre include:

- fresh and dried fruit
- root vegetables (carrots and potatoes) and salads
- wholemeal and granary bread
- wholegrain cereals, oats, barley and rye
- brown rice
- kidney beans, lentils and chickpeas
- seeds and nuts

Vegetables such as peas, green beans and broccoli, also contribute to your fibre intake. Aim to eat at least five portions of fruit and vegetables each day.

Start the day with a high-fibre breakfast (oats, porridge, muesli, other wholegrain cereals) and fresh or dried fruit.

Having a catheter shouldn't affect your everyday activities.

Drinking plenty of water dilutes your urine and reduces the risk of infection. Aim to drink at least six to eight large glasses (one and a half to two litres) of fluids a day. Avoid drinking too much caffeine (tea and coffee) and fizzy drinks.

A little alcohol may be drunk as this does not affect your catheter. However if you are recovering from surgery or taking medicine your doctor may advise you to avoid alcohol.

Urine should be pale yellow in colour and will be a darker yellow if you are not drinking enough. However some foods (such as beetroot) can discolour the urine.

If you notice blood in your urine, turn to page 20.



Taking regular gentle exercise is good for you and your bladder health. A catheter shouldn't limit your ability to exercise. Talk to your healthcare professional about what exercise is suitable for you, and when you can start.

If you are walking or cycling, make sure your catheter tube isn't pulling and is in a comfortable position. Adaptions to make cycling more comfortable are available such as, a 'noseless' saddle. Ask your local bicycle retailer for advice.



Smaller drainage bags and catheter valves are available specifically for when you go swimming. If you have a suprapubic catheter you can go swimming as soon as the skin around the insertion area heals. The swimming pool water must be treated with chlorine (leisure centre swimming pools are but public lidos are not), and always ensure that the insertion area is clean and dry after a swim.

You can have sex when you have either a urethral or suprapubic catheter. If you have a suprapubic catheter make sure the catheter tube is taped out of the way.

Make sure you thoroughly wash before and after sex.

If you are a man, with a urethral catheter, wait until you have an erection and fold the catheter tube under your penis and cover it with a condom. If you are a women, place the tube over your stomach and tape it in place. Using lubricating jelly will not damage the catheter.

Wearing cotton underwear allows good air flow and helps keep you dry. Loose fitting clothing allows for good air flow, comfort and discretion.

You can travel and go on holiday with a catheter. Make sure you take spare catheter equipment with you (drainage bags, valves). If you use night bags, pack a portable night bag holder. For long journeys you may want to connect a night bag and discreetly place this under your seat in a plastic carrier bag. If you are flying or going abroad, ask your GP for a letter that states the purpose of your catheter equipment, and remember to drink plenty of water as altitude dehydrates the body.

You may want to tell a close friend or family member that you have a catheter. Try to explain why you need a catheter and what it does. Explain how a catheter affects you and if you feel embarrassed, let them know and ask for their support.

Problems with your catheter

The following advice should help you manage common problems that can occur. Drinking plenty of water helps to resolve many of them. However if you are concerned don't hesitate to contact your healthcare professional.

Little or no drainage of urine

First empty the drainage bag and see if any of these actions stimulate drainage:

- Lift the drainage bag above and then below the level of your bladder.
- Check the catheter tube for kinks or twists.
- Check the drainage bag doesn't need emptying and is connected properly.
- If you can, try walking about. This encourages better drainage.

Leakage of urine around the catheter

A small amount of leakage may occur especially when a catheter is newly fitted. It can be due to a bladder spasm and usually passes in 24–48 hours. Leakage is due to a bladder contraction pushing urine through the small gap between the catheter tube and the urethra.

Check that:

- There are no kinks or twists in the catheter tube.
- The drainage bag is below your bladder.
- You are not constipated as this puts pressure on your bladder.

Discomfort or pain

If you experience any pain or discomfort, check that the drainage bag is not pulling on the catheter. If there is pain in your lower tummy, groin area or lower back, you should contact your healthcare professional immediately as you may have a urinary tract infection.

Urine colour

Urine should be a pale yellow colour. If it is cloudy, dark or has an unpleasant smell, you will need to drink more water.

Blood in your urine

A small amount of blood can appear in urine when a catheter has first been inserted. This is not generally anything to worry about and drinking plenty of water will flush it through.

If you continue to notice blood, a larger amount of blood or blood clots, you may have a urinary tract infection and should contact your healthcare professional immediately.

A catheter that is pulled on may cause some bleeding. Ensure that your catheter is secured properly to prevent this. Accidentally pulling out a catheter may cause some bleeding. If this happens you should contact your healthcare professional immediately.

If taking these actions doesn't resolve the problem, contact your healthcare professional.

When to call a healthcare professional

If you have followed the advice on the opposite page and are still experiencing problems you should contact your healthcare professional.

You should contact your healthcare professional immediately if:

- No or very little urine drains and you feel that your bladder is full.
- A lot of urine is leaking from the insertion area.
- The catheter has come out.
- You are experiencing pain in your lower tummy, groin area or lower back.
- Urine has changed colour (despite drinking plenty of water), has blood or blood clots in it.
- The insertion area is sore, swollen, red or tender.
- Your urine has a particularly unpleasant smell.
- You feel unwell, have nausea, are vomiting or have a temperature (fever).

If you are unable to see your healthcare professional or access the out of hour's service within four hours, dial the NHS 111 service, contact your hospital team, or go to A&E.

My notes

Why am I having a catheter?

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What sort of catheter is it?

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When will my catheter be changed?

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When/where is my catheter removal/follow up appointment?

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When will my catheter be removed?

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How do I get supplies of equipment, drainage bags etc?

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My healthcare contacts

Practice Nurse

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District Nurse

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Clinical Nurse Specialist

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GP

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Hospital team

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Bladder & Bowel Service

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Emergency/out of hours contact

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This information guide has been developed by Age UK and the Health Innovation Network South London.

It should not be relied on as a basis for any decision or action and cannot be used as a substitute for professional medical advice. Neither Age UK nor the Health Innovation Network accepts any liability arising from its use and it is the reader's sole responsibility to ensure any information is up to date and accurate. Please note that the inclusion of named agencies, websites, companies, products, services or publications in this information guide does not constitute a recommendation or endorsement.

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