urology associates

Information for Patients

Intermittent Self-Catheterisation for Women

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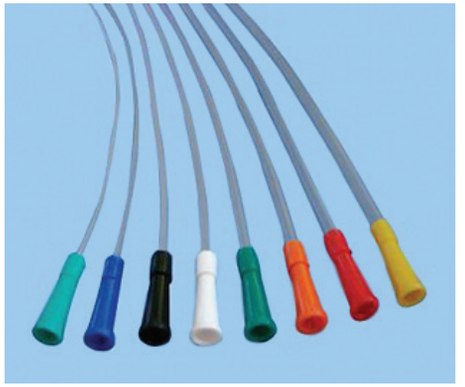
Intermittent Self Catheterisation (ISC) is a simple way to empty the bladder.

It involves passing a small tube called a catheter through the urethra (the opening where urine normally drains) into the bladder to allow the urine to empty.

The type of catheter commonly used is called a Nelaton Catheter.

ISC may be used for a short- or long-term basis.

This booklet is designed to give you an overview of the technique, what to watch for, and other helpful information.



Why is ISC necessary?

When you pass urine, the bladder usually empties most of the urine it contains. In some situations, the bladder may not empty completely. This can happen for several reasons, including:

- Bladder muscles that do not contract effectively
- The effect of bladder surgery.
- Injury or damage to the spinal nerves.
- Blockage of the urethra.

Intermittent Self-Catheterisation helps to empty the bladder when it cannot do so fully on its own.

How often should the bladder be emptied?

You should catheterise whenever you feel that your bladder is full.

If you cannot feel if your bladder is full, catheterise:

- when you wake in the morning
- 2-3 times during the day
- just before you go to bed at night.

Occasionally measure the amounts of urine drained. This helps to ensure your bladder is not holding more than 300-400 ml.

If the amount is more than this, you need to catheterise more often.

Your Urologist, Continence Advisor or Specialist Nurse will work with you to determine the frequency of catheterisation.

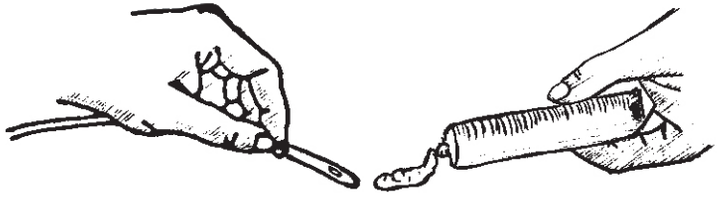
Does ISC lead to infection?

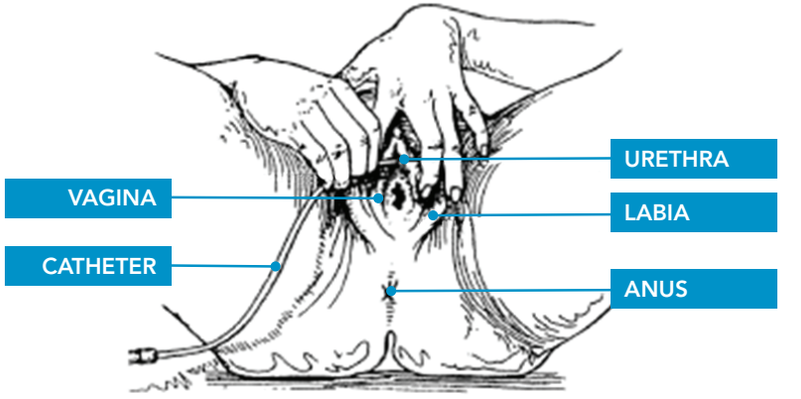
There is always a risk of infection when using a catheter. However, as you become more skilled with the technique the chances of developing an infection reduce.

Catheterisation is not a sterile procedure, but good hand hygiene is important to reduce risk of infection. Always wash your hands before and after catheterisation

Getting started

- Collect the necessary equipment
  - Nelaton Catheter
  - Water soluble lubricant
  - Container for the urine (if not using the toilet)
- Wash your hands, using soap and water or antibacterial hand sanitiser.
- Setup your equipment on a clean, easily accessible surface - ensure the Catheter is within reach - apply lubricant onto a tissue.
- Get into a comfortable position. This may be lying on your bed, sitting on the toilet or wheelchair or standing over the toilet.
- If needed, set up a mirror to see your urethra.
- Remove the catheter from the packet or clean container. Try not to touch the catheter tip.
- Dip or roll the catheter tip into the lubricant.





Part the labia with one hand and then holding the catheter in the other hand gently insert the Catheter into the urethra. Direct the Catheter upward until urine flows.

- Pass urine into toilet or container.
- When urine stops flowing, slowly withdraw the catheter. If more urine starts to drain, stop removing the catheter, allowing the bladder to empty. When there is no urine draining, remove the catheter.
- Clean the Catheter by rinsing it under clean running water, tip end upward.
- Shake dry and store in a clean, dry, sealed container ready for the next use.
- Wash your hands.

Troubleshooting

Blood in the Catheter or urine

Occasionally, you may see blood in the urine or catheter. This is not uncommon, particularly when you are learning this technique.

- Try using more lubricant.
- Check for signs of infection.

A small amount of blood is usually not a concern. However, seek medical advice if bleeding continues or becomes heavy.

Difficulty introducing or removing the Catheter

This may occur because of an awkward technique or spasm of the sphincter muscles.

- Check that you are in a comfortable position.
- Take some deep breaths, relax as you slowly exhale and gently but firmly introduce or remove the catheter.
- Try using more lubricant.
- Take a break and walk away for several minutes before attempting to insert the catheter again.

No urine is draining

- Ensure that the catheter has been inserted far enough to reach the bladder.
- Gently try pulling the catheter back a short distance. Sometimes the lubricant can delay the urine from flowing out the small drainage holes at the catheter tip.

Urinary tract infection

Signs of a possible infection include:

- Cloudy or strong-smelling urine
- Increased pain or burning when inserting the catheter

If you suspect that you have a urinary infection it is important to seek advice from your GP or Urology Associates promptly. Do not wait until you get sick.

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