

Information for Patients

Recurrent Urinary Tract Infection (UTI)

You have been referred to our service for evaluation of UTI's. Unfortunately, 5-10% of the population have frequent UTI's. Most of the time (> 95%) there is no urological (surgically correctable) cause for your infections. Recurrent UTI's can be difficult to cure or completely resolve.

What causes recurrent UTI's?

Different things can cause recurrent UTIs.

- UTI caused by an atypical or antibiotic-resistant bacteria or a fungus
- underlying kidney stones
- anatomy
- having sexual intercourse, having a new sexual partner
- being pregnant
- having a mother who had UTIs
- having UTIs as a child
- weak muscles around your bladder and walls of your vagina (cystocele)
- not being able to empty your bladder properly when you pee
- having urinary incontinence

If you've reached menopause, and your periods have stopped, the causes include:

- having a history of UTIs before you reached menopause
- changes to your vagina, bladder and sexual feelings because of menopause

How are recurrent UTI's Treated?

One of the best ways to manage recurrent UTI's is to do what you can to prevent them from coming back.

CONSERVATIVE LIFESTYLE CHANGES

- Look after yourself and stay as healthy as you can. This means managing any health conditions (eg, diabetes), eating and drinking sensibly, being physically active and getting plenty of rest.
- Drink plenty of water (aim for 2 litres a day if possible) to stay hydrated. This is especially important if you're an older person.
- Try to avoid getting constipated. Being constipated can put pressure on your bladder and stop it emptying fully when you pass urine. Drinking plenty of water and eating foods high in fibre, such as fruit and vegetables and wholegrain breads and cereals, will help with this. Aim for one bowel motion per day.
- Decrease alcohol and processed foods. Decrease meat intake.
- Pass urine when you need to, don't 'hold on'.
- If you use tampons, change them after a bowel movement.
- Pass urine before and after having sex.
- Wash underwear at a high enough temperature to kill bacteria and fungi.
- Use a lubricant when having sexual intercourse. We recommend, Überlube, Skyn, Nu Intimate Balm or Olive and Bee
- Take any antibiotics you've been prescribed and make sure you finish the course.
- Don't let perfumed products, including soaps that come in contact with your genital area. Use gentle soaps on the vulval genitalia such as Dove Beauty Bar or Aqueous Cream
- Consider changing washing liquid or powders for your intimate garments, underwear to a sensitive wash product.
- Do not undertake vaginal douching! It removes good bacteria and flora that are normally within the vagina. Instead of protecting you from infection, douching can do the opposite.
- Do pelvic floor exercises to help control symptoms. Urology Associates has a continence nurse specialist who can teach these exercises. Your Urologist may also refer you to a Pelvic Floor Physio.

MEDICINES

These are designed to reduce your frequency of infections

D-mannose

Your cells produce a sugar called mannose which covers the lining of your urinary tract. When you have a UTI, the bacteria stick to the mannose. D-mannose is another type of sugar that's naturally created by your body and is also found in foods such as apples, grapes, watermelon and cranberries. It sticks to the bacteria and stops them from attaching themselves to the inside of your urinary tract. This makes them easier to flush out when you pee.

Cranberries

There's evidence to suggest consuming cranberries (juice, tablets or capsules) can reduce the number of recurrent UTIs experienced. Products containing a higher concentration of cranberry will work better.

Probiotics

Probiotics are live bacteria and yeasts that can help your digestive system. Probiotics containing lactobacillus may be helpful for urinary and vaginal health as they help to change the level of acidity in your vagina. This makes it harder for bacteria to grow and then travel into your urinary system.

Antibiotics

- These are prescribed as a treatment course or as a preventative course for weeks or even months to try and get rid of the bacteria and prevent it coming back. Taking antibiotics for a long time isn't appropriate for everyone (e.g., if you're pregnant/hapū) and can add to the antibiotic resistance problem.

If you have recurrent UTIs that are linked to a known trigger (e.g., sexual intercourse or menstruation), a single or short dose of antibiotics may be prescribed for you to take at specific times.

Hiprex

This is a medication which makes your urine more acidic and discourages the growth of bacteria. It may work as well as low dose antibiotics for preventing UTIs. It is available with a prescription from your Urologist. It's not suitable if you're taking some types of antibiotics as it can make you more likely to form kidney stones.

Uromune

A vaccination that is not currently approved or funded, which means you'd have to pay for it yourself. Uromune can be prescribed by your urologist and is administered as a spray under your tongue once a day for 3 months.

Ovestin cream

This restores oestrogen to vaginal tissues, lowers vaginal pH and improves tissue health. This reduces harmful bacteria and eases urinary frequency, urgency and burning.

MANAGING UTI'S MOVING FORWARD

- It is our policy not to prescribe antibiotics for patients unless we have a urine culture.
- The prescription charge for antibiotics via Urology Associates is \$100 (plus a pharmacy fee of \$15). We encourage patients to primarily seek out GP or urgent care review as it is likely that we will only be able to provide a script some days after symptom onset, urine analysis and culture are available and this may delay your care.

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