

Patient information

Having a urinary catheter: information for post-natal women

You have been advised to have a catheter inserted (or have one already). This leaflet will help you to understand what a catheter is, why you need one inserted and how you should look after it. If you have any further questions, please contact your midwife or GP.

What is a catheter?

A catheter is a hollow, flexible tube that drains urine from your bladder. The catheter passes through your urethra (the tube through which urine passes) into your bladder.

Why do I need to have a catheter?

There are many reasons why people need a catheter: your bladder may not be able to contract on its own to empty itself or you may need it for other health-related problems. You need a catheter for a short period to allow the bladder to rest. Your doctor should explain to you in detail why you need to have a catheter and how long you may need it for. They will also ask you to give your verbal consent (agreement) to have a catheter. Please make sure you ask any questions you have at this time.

Having a catheter inserted

Once the catheter is in place, a balloon is inflated inside your bladder to prevent it from falling out. Your catheter will be attached to a leg bag.

A leg bag is a simple drainage bag strapped to your leg, collecting your urine. It needs emptying at regular intervals, usually when the bag is $\frac{3}{4}$ full.

The bag needs changing every five to seven days. It is important that you do not change them more often, because this raises the risk of infection.

When you go to bed at night, you should attach the leg bag to a larger bag, which will drain freely overnight to collect the urine. In the morning, disconnect the night bag, empty it into the toilet, wash it though with warm water and store it in a clean place until you reconnect it. This bag should also be changed every five to seven days.

You will be given supplies when you leave the hospital and told how to get further products if you are likely to need them.

Will I have any pain?

The catheter may feel uncomfortable at first. You could experience spasms (sudden contractions of your muscles) which can be painful, make you feel like you need to pass urine and cause some urine to bypass the catheter and leak out. This is your body's way of trying to expel the catheter from your body. If you have spasms:

- try repositioning the catheter so that it is not pulling on your bladder
- try to relax
- do not strain or try to push the catheter out and
- drink as advised on page three

If this feeling lasts, take the painkillers you have been prescribed and contact your GP or community midwife.

You may find it uncomfortable when the catheter is removed, but it should not be painful.

Are there any risks with having a catheter?

You may have a slightly increased risk of developing a urinary tract infection. It is important that you try to drink 1.5 - 2 litres of fluid every 24 hours to keep the bladder and catheter flushed though.

Looking after your catheter

Hygiene

Before and after touching your catheter you must make sure that you always wash your hands thoroughly.

You can bath or shower as normal with a catheter. **If you have a leg bag, do not disconnect it**, as this could introduce an infection. If you are not able to have a bath or shower, wash the area where the catheter enters your body twice a day. Wash the area using downward strokes from where it enters the body; again, this is to help prevent infection. Do not apply talc or cream to the area as this may also increase the risk of infection.

Your diet and fluids

It is important to eat a balanced diet of fruit, vegetables and fibre to avoid constipation (difficulty or pain emptying your bowels). If your bowel is full, which happens when you are constipated, it can press on your bladder and reduce urine drainage and may block the catheter. It may also make it more difficult for you to pass urine once the catheter is removed.

Drinking is very important when you have a catheter. Try to drink at least one and a half to two litres per day (six to eight large glasses of fluid). This will help prevent infections.

Drinking alcohol will not affect your catheter. However, if you are taking certain medicines or recovering from surgery, your doctor may advise against drinking alcohol. This depends on your individual circumstances; please ask your doctor or midwife if you are uncertain. It is thought that cranberry juice helps to reduce the risk of infection. Drinking two glasses per day is enough. However, do not drink cranberry juice if you have arthritis, heartburn, irritable bowel syndrome or hiatus hernia, as it could make your symptoms of these conditions worse. It can also interfere with the way warfarin works, so please do not drink cranberry juice if you take warfarin tablets.

What if I have problems?

Blood in your urine

When the catheter is first inserted, your urine may be blood stained. If this continues after drinking extra fluids to flush it the blood out, you should contact your midwife or GP for advice.

If the catheter is accidentally pulled (out) it may cause bleeding. To prevent this, please make sure that it is secured properly. If this does happen, contact your community midwife or GP.

Cloudy, smelly, thick urine

Your urine should be light yellow in colour (although some medicines may discolour urine) and should flow freely. If your urine becomes cloudy, smelly or thick, check that you are drinking enough and increase your fluid intake accordingly. If you develop a high temperature with these symptoms, please contact your GP or district nurse, as this could indicate that you have a urine infection.

Leaking catheters

Sometimes the catheter can leak around the entry site. If this happens, make sure the tubing is not blocked or kinked (bent). Move the drainage bag below the level of your bladder and make sure you are not constipated. Do not apply tape to keep the bag attached to the catheter. If you are experiencing leakage, you may need to change the bag you are using to a different type with a different connection. Your district nurse can advise you on this.

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) <https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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