



# Preventing lower urinary tract infections

(to be given following a urinary infection)

A urine infection is a bacterial infection affecting one or more parts of the urinary tract. Urinary tract infections can be painful and uncomfortable and can make people feel very unwell. Repeated lower urinary tract infections can be difficult to treat and if the infection develops in the upper part of the urinary tract this is more serious as there is a risk of kidney damage.

This patient information leaflet has been given to you by your GP/ health practitioner because you have recently had a urinary tract infection, and this will help you to understand what may have caused your infection and how you can reduce your risk of further infections.

The urinary tract consists of:

- the kidneys - two bean shaped organs that produce the urine
- the ureters - the tubes that run from the kidneys to the bladder
- the bladder - where urine is stored until we go to the toilet
- the urethra - the tube from your bladder that urine passes through when you empty it.

## What causes urine infections?

- Not drinking enough fluids including water.
- Poor personal hygiene e.g. not cleaning daily. In women around the vaginal/urethral/back passage, and in men around the penis and in particular under the foreskin.
- Over-washing of the urethral area and using perfumed products (talc, creams, shower gel, shampoo) around this area can destroy the healthy bacteria.
- Recurrent constipation and straining during bowel movement.
- Bacteria/bugs that cause infection in faeces/poo coming into contact with the urethra which can then travel up into the bladder. This can happen as a result of incorrect wiping after bowel movement, soiling/smearing of stool/poo from back passage, incorrect removal of continence pads and transferring stool/poo to urethra.
- Infections can also occur if the bladder does not completely empty when going to the toilet.
- Urine infections can occur after sexual intercourse. Some spermicidal lubricants in condoms and some contraceptive diaphragms.
- After menopause women's oestrogen levels fall which can lead to a condition called atrophic vaginitis, and this can increase the risk of urinary tract infection.

## Symptoms of a lower urinary tract infection

- Needing to pass urine more often during the day or night or both
- Pain or discomfort, burning, stinging whilst passing urine
- Cloudy urine
- An urgent need to go to the toilet
- Unpleasant smelling urine
- Blood in the urine

- Pain in the abdomen
- Discomfort in the lower abdomen or back
- A general sense of feeling unwell
- High temperature
- Uncontrollable shivering
- Sometimes nausea and vomiting
- Confusion and disorientation If you suspect you have a urine infection it is important you contact your GP/Health Practitioner

## Reducing the risk of urine infections

Discuss the following with your GP/health practitioner and identify actions you can try to help reduce the risk of further urine infections

- Aim to drink 1½ - 2 litres per day or 3-4 pints including water
- Consider high strength cranberry capsules, this may help, higher strength cranberry capsules are recommended for recurrent infections (from Pharmacists). Cranberry is not suitable if you take Warfarin. Diabetics need to be aware of the high sugar content in the juice.
- Consider fruit barley drinks, avoid blackcurrant juice
- Always wipe your bottom from front to back to prevent bacteria from the bowel coming into contact with the urethra
- Practice good hand hygiene, wash hands after using the toilet and after changing continence products
- In women and men wash the genital area daily with water or non perfumed soap and water
- Consider washing using a disposable dry wipe
- If you prefer to wash with a flannel use a clean flannel each time
- Don't over wash as this will reduce the normal bacteria which keep your skin healthy
- Avoid allowing perfumed products including shower gel, shampoo, conditioner and creams to come in contact with the genital area as these products can reduce the normal bacteria which keeps this area healthy
- Take time when emptying your bladder. Lean forward towards the end to encourage it to empty fully
- Do not use talcum powder, it can lead to soreness and thrush infections
- Change your underwear daily and if it gets soiled
- Preferably wear cotton underwear, avoid manmade fibres which may make you sweat
- Go to the toilet to pass urine before and after sex
- Always wash and dry the genital area before and after sex
- If urine infections are reoccurring after sex, discuss with your GP/health practitioner contraception options. Changing from a diaphragm to an alternative contraception and avoiding condoms with spermicidal lubricant may help
- See your GP/healthcare professional if you have gone through or are going through menopause and you feel dry, itchy or uncomfortable in the vulva or vaginal area. You may have atrophic vaginitis caused by low hormones which is easily treated
- Treat constipation promptly as constipation can increase your chance of developing a urinary tract infection.

Further useful information can be found at: [www.nhsinform.scot](http://www.nhsinform.scot)

## Further help and information

If you are experiencing continence issues, contact your GP or Community Nurse.

## We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website: [www.wihb.scot.nhs.uk/feedback](http://www.wihb.scot.nhs.uk/feedback) or share your story at: [www.careopinion.org.uk](http://www.careopinion.org.uk) or tel. 0800 122 31 35
- tel. 01851 708069 or 07814 071868 Monday-Friday between 9am-5.30pm.

Version: 2

Date of Review: August 2024

Produced by: Rosemary MacRitchie, Clinical Nurse Specialist Tissue Viability/Continence Advisor, NHS Western Isles

### Disclaimer

The content of this factsheet is intended to augment, not replace, information provided by your clinician. It is not intended nor implied to be a substitute for professional medical advice. Reading this information does not create or replace a doctor-patient relationship or consultation. If required, please contact your doctor or other health care provider to assist you to interpret any of this information, or in applying the information to your individual needs.