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The information contained in this leaflet has been developed by Prostate Scotland and reviewed by its Advisory Group of doctors, nurses and patients. This leaflet is not intended to replace medical advice or seeing a doctor for specific illnesses or symptoms.

Prostate Scotland would like to thank the Scottish Government and Sir Tom Farmer through the Farmer Foundation, for their kind funding of the Information and Advice Project. Prostate Scotland would like to express thanks to the 'Baw Bag Baw Buster Challenge' for their kind donation towards the printing of this leaflet.

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Date: August 2013 © Prostate Scotland

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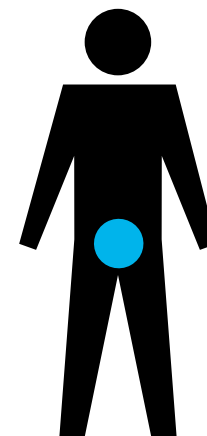
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PROSTATE INFORMATION ●

SPOTLIGHT ON

Caring for your indwelling catheter at home



Introduction

There are several reasons why some men need an indwelling catheter (indwelling means inside your body) to drain urine from their bladder out of their body. Sometimes a catheter is needed for just a short time whilst for other men, depending on the reason for having a catheter, it may be needed slightly longer. When you are ready to go home, your doctor or clinical nurse specialist (CNS) will let you know how long you might need to have the catheter. The nurses on the ward or in the clinic will most likely show you how to look after your catheter before you get home. Usually, a nurse in the community will be organised to check on you when you get home if you need this.

Although you and your family may feel a bit anxious to hear that you are going home with a catheter and it may even sound a bit frightening at first, there are many people that you can contact for help and advice such as your community or practice nurse or your specialist nurse at the hospital. The district nurse may be involved in helping you care for your catheter when you are discharged from hospital.

Throughout the leaflet, information is given as a guide on how things might be done. However, as there may be more than one approach to caring for your catheter, if you are given specific information by your GP, consultant, CNS, district nurse or from the hospital you are attending then it is important you follow their instructions and guidance.

What is a catheter?

A catheter is a long, thin, flexible, soft hollow tube that is used to drain urine out of your bladder into a drainage bag outside your body.



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How is urine normally made and passed?

The kidneys constantly filter waste products from the blood and mix these with water. This mixture is called urine. Urine passes out of the kidneys, down two thin tubes called the ureters that empty into the bladder which stores urine. When the bladder is about half full this triggers a need to pass urine. Urine then passes out of the bladder, down the urethra and out of the body. If there is a difficulty with passing urine, then a catheter may be needed.

Why might I need a catheter at home?

Catheters may be used when:

- You can't pass urine into the toilet or urinal in the normal way. This can be for a number of reasons;
- Sometimes during an operation to keep the bladder empty;
- If your doctor wants to rest your bladder and give it time to heal after an operation;
- Sometimes after an operation such as a trans urethral resection of the prostate (TURP) or radical prostatectomy to allow the area to heal.

How is a catheter put into the bladder?

Before a catheter is put in place your doctor or nurse on the ward will talk through with you; why you need a catheter and how long you may need to have it in place. Then it's just a case of letting the medical staff know that you agree to have the catheter. (You might hear this called catheterisation or being catheterised)

There are two ways catheters can be put into your bladder:

1. The tube can be passed through your penis into your urethra (water pipe). This is called a urethral catheter.
2. Under local anaesthetic, a small cut is made in the lower part of your tummy just above the pubic bone and the tube is passed through this. This is called a supra-pubic catheter and is fitted when a urethral catheter can't be used or if you are having a catheter for a long time.

No matter which kind of catheter you have (urethral or supra-pubic), caring for your catheter will be the same.

A catheter may be passed into your bladder under local anaesthetic by a nurse or doctor on the ward or if you are having an operation it may be put in place during the procedure. When the end of the catheter is inside your bladder a small balloon near the tip of the catheter is inflated with sterile water to keep the catheter in place and stop it from slipping out.

Urine can be drained from your catheter either using a drainage bag or by using a catheter valve.

If you are using a drainage bag, as the bladder fills with urine, it drains down through the catheter into a drainage bag.

With a catheter valve the urine will stay in the bladder until you open the valve, so you will probably have the sensation of having a full bladder as normal and then drain the bladder into the toilet or a container via the catheter using the catheter valve.

Because the small balloon is inflated inside your bladder, it needs to be deflated before taking the catheter out, so you should **never** try to take or pull the catheter out yourself (unless you have been shown how to do this by the nurse or doctor). In some instances you may be given antibiotics.

At home, it is a good idea to check over the tube every day to make sure that it doesn't have any kinks in it, make sure the bag is emptied and held in a comfortable position.

There is a catheter retainer device that prevents pull on the catheter as this pull can be very uncomfortable.

How long might I have the catheter?

This will really depend on the reason why you have the catheter. The doctor or nurse will most likely chat this over with you and give you an idea when the catheter is likely to be taken out. Some catheters are more suitable for only a short time whilst others can be left in place for anything up to 12 weeks.

What might be some of the early side-effects of having the catheter put in place?

It's quite common to feel a bit uncomfortable or be a bit sore when the catheter is first put in place and you may still feel that you need to pass urine but these shouldn't go on for too long.

Sometimes you might get strong contractions of the bladder muscles (called bladder spasms) that can be quite painful making you feel you need to go to the toilet and may cause a little urine to leak out alongside the catheter. Tell the doctor or nurse about this as they can give you some medication to help and may also prescribe painkillers.

You may be asked for a sample of urine to check for a urine infection.

It's not unusual to see a milky coloured discharge around the catheter.

What is a drainage bag?

The outer end of the catheter is usually attached to a drainage bag to collect urine. There are two types of drainage bag:

- A leg bag. This might be worn on your thigh or lower down your leg on your calf. Some men prefer to have a longer length drainage tube that can be worn on the calf so it's not noticeable and the bag can be emptied easily;
- Overnight bag. These are larger bags that hold more urine so that you don't need to get up during the night to empty the bag. They are attached to your leg bag. Once you've attached the overnight bag to your leg bag, don't forget to leave the leg bag tap open so urine can drain into the overnight bag. Always make sure that the connections are quite tight so you avoid any leaks or the connections coming undone during the night. Before going home the nurse will show you how to join the two bags together.

You will be given a strap or special net bag to hold the drainage bag in place so that the weight of the bag doesn't pull on the catheter which can be very uncomfortable.

Catheter valves

You may be offered the choice of having a catheter valve. Having a catheter valve means that urine will stay in the bladder until you open the valve. This means that you will probably have the sensation of having a full bladder as normal. Your doctor will decide if this is an option for you as it's not one that's suitable for all men. It means a valve is fitted at the outer end of your catheter and it's held in place with leg straps. It acts like a tap that can be turned on or opened to drain urine from the bladder and can be turned off or closed to stop urine flowing out of the tube. When the valve is turned on or opened, urine can be drained into the toilet, a container or into a drainage bag.

So the possible benefits of having a valve are:

- It may allow you get around more easily;
- It's not as noticeable and may be more comfortable;
- It copies the normal filling and emptying of the bladder so helps keep the bladder in good condition and maintains bladder tone.

Like the drainage bags, the valve needs changed once a week. To help prevent infection it's best to follow the steps given in the section on how to empty the leg bag.

How often should I empty the bag?

The leg bag should be emptied when it is about half to a maximum of three quarters full so it doesn't become too heavy and pull on the catheter.

The overnight bag just needs emptied in the morning.

If you are using a catheter valve then open the valve every few hours or when you feel your bladder is full.

What position should the drainage bag be in?

The leg bag should be attached to the leg below the bladder whether you are lying, sitting, standing or walking.

How are drainage bags attached to my leg?

It's important that the bags are well supported so they don't pull on your catheter as this can be uncomfortable and may cause some problems. You will usually be given either elastic straps or a net sleeve to hold the bag in place.

When you connect the overnight bag to the leg bag then you can either loosen the elastic straps or take them off completely.

How do I empty the leg bag?

The nurses will probably show you how to do this before you leave the ward. Because the catheter goes directly into your bladder it can be a route of introducing infection (germs) into your bladder. Preventing an infection is important so it's best if you follow these simple steps:

- Before touching your leg bag always wash your hands thoroughly with an un-perfumed soap. It might in fact be best to use an anti-bacterial hand-wash from a pump dispenser and an alcohol based hand-gel. Pay particular attention to cleansing the tips of the fingers, between the fingers and the thumbs as these seem to be the areas most commonly missed. Don't forget to rinse your hands well under running water. Dry well with a clean towel;
- Open the tap at the bottom of the bag and drain the urine into the toilet bowl ;
- Close the tap;
- Wash and dry your hands.

Some men may be asked to keep a record of how much urine they pass. This can be done by opening the tap on the leg bag or catheter valve and passing the urine into a measuring jug before flushing down the toilet.

What should I do with the overnight drainage bag?

Again it's important that you (or if someone is doing this for you) follow the simple hand-washing steps. You may even be advised to wear disposable gloves – the nurses on the ward will most likely explain all this to you before you go home. The overnight bag is attached to the leg bag and should be kept lower than the bladder. Don't allow the bag to lie on the floor, always support it on a stand or support hanger.

In the morning, disconnect the overnight bag, empty and dispose of the bag. Some bags can only be used once whilst others can be used for more than a week, so some hospitals may ask you to use the overnight bag again. If this is the case, empty the overnight bag, and store in a safe clean place. Ask the nurse at your hospital what you should do with your overnight bag.

How often should I change the leg bag?

The leg bag and/or catheter valve needs changing every 5-7 days. If you do this anymore frequently then you may run the risk of introducing an infection into the bladder.

What do I do with the empty bags or catheter valves?

Ask your nurse about how you should dispose of the bags and valves in your area as this can differ from area to area. Usually the bags are emptied, then the bag or valve can be wrapped in several sheets of newspaper or put inside 2 plastic bags, sealed and put into the household rubbish bin. You shouldn't try to burn these.

How often might the catheter be changed?

To a large extent this depends on the reason for having the catheter. Depending on the type of catheter this can stay in place for between 2-12 weeks before needing changed. If your catheter needs to be changed then usually a community nurse will do this for you.

Looking after your catheter

The most important thing that you can do is to keep your catheter, and area around the catheter, very clean as this helps cut down the risk of introducing any bacteria (germs) that may lead to you developing an infection:

Take the following steps to cut down your risk:

- Always wash your hands thoroughly before and after handling your catheter;
- Wash the area where the catheter enters your body and wash down the catheter tube about twice a day. It may be a good idea to keep a cloth just for this. If you have one, wash underneath the foreskin and make sure you

replace the foreskin back over the tip of the penis, as if you don't it may become swollen and painful. Make sure you rinse well and dry thoroughly ;

- You can take a daily shower or bath as normal, although some people recommend a shower may be slightly better. Before showering or bathing always empty your drainage bag, but don't disconnect it, then take off the support you use to hold your bag. Afterwards dry the drainage bag and attach again with straps or sleeve;
- Don't use any ointments, perfumed soap or talcum powder around the catheter area as this could cause an irritation or increase the risk of infection. In fact, some ointments may actually damage the catheter.

Is there any special advice on drinking fluids?

It's recommended that you drink enough fluid to make sure that the urine remains clear and your catheter drains properly. Having enough fluid helps to flush out the bladder and means that urine is more dilute and this may help reduce the risk of infection.

It's recommended that you drink about 1½- 2 litres of fluid each day and water is best. This is about 6-8 large glasses of fluid each day. If, for any reason, you are on fluid restriction, then please ask your doctor or nurse for more advice.

It's thought that cranberry juice may have a beneficial effect in helping reduce the risk of infection, but you shouldn't drink more than 2 small glasses spread out during the day. There are cranberry supplements that can be bought which are very concentrated. Before taking cranberry in any form it would be best to check with your doctor if these are suitable for you to take. This is because cranberry can affect the way that medicines such as warfarin work, therefore you should avoid cranberry if you take warfarin. Cranberry is best avoided if you are diabetic as it contains natural fruit sugar or if you suffer from irritable bowel.

Whilst drinking alcohol shouldn't affect your catheter there may be other reasons that you should avoid alcohol eg if you are taking certain medication. Ask your doctor or nurse for more advice about alcohol in your particular circumstances.

If constipation is a difficulty....

When you are constipated or having problems opening your bowels this can cause difficulties for you in two ways:

1. If your bowel is full, it can press on your bladder so stopping urine draining and this may block your catheter
2. If you strain or push to open your bowel then this can put pressure on your bladder so affecting your catheter

Avoid constipation by having a healthy well-balanced diet that includes at least 5 portions of fruit and vegetable each day. Having enough fibre in your diet helps too so try to have wholegrain cereals and wholemeal bread as part of your diet. If constipation is a problem let your doctor or nurse know as they may be able to prescribe something to help.

What if I find I'm in pain?

If you find that you are in pain from your catheter, then let the doctor, clinical nurse specialist or community nurse know and they may be able to prescribe a pain-killer for you.

Is there anything else that I can do?

When you feel able you may be advised to try some gentle exercise such as walking as this may encourage the catheter to drain better. Always check with your doctor before beginning to exercise.

If you notice any discharge around your catheter, let the doctor, nurse or district nurse know about this.

Check around the catheter area regularly for any signs of irritation or redness.

What if my catheter leaks?

- This may be caused by strong tightenings or contractions in your bladder called bladder spasms. Let the doctor or nurse know as they may be able to give you a medicine or a pain-killing medicine to help;
- A sample of your urine may be checked for any signs of infection;

- There may be a temporary blockage causing the leakage;
- You may like to be prepared for those 'just in case' situations if your catheter happens to leak by having a waterproof sheet or pad on your bed. There are different types of pads that you can buy that will soak up leaks although these may not be specifically designed to help with leakage of your catheter;
- Before going to bed check that all the connections are tight. Check that the connection between the leg bag and night bag is open.

What about intimacy if I have a catheter?

If you were having intercourse before you had your catheter fitted then it's usually possible to have intercourse with one in place especially if you have a supra-pubic catheter.

Before intercourse you should empty the drainage bag. In certain circumstances, it may be possible to disconnect the drainage bag and use a valve to stop urine draining. Remember to attach the bag again afterwards so urine can start draining again.

Once you have an erection, fold the tube along the shaft of your penis, tape out of the way then roll a condom over your penis and the catheter together. You can use lubricating jelly if you need to, it won't affect the catheter. Make sure you wash around your catheter after having intercourse.

If this is something that you want to find out more about, don't be embarrassed to ask for advice from the nurses or medical staff.

What should I do if urine stops draining into the bag?

- Check the tube to make sure it is not blocked or twisted;
- Check that any drainage bag (leg or overnight bag) is below the level of your bladder whether you lying, standing or sitting;
- Check you are having enough fluid to drink about 6-8 glasses or 8-10 cups fluid every day;
- Check your drainage bag doesn't need emptied.

What if my catheter is painful?

- Check that your catheter is held in place as it should be;
- Check that the drainage bag is properly supported so that it is not pulling on the catheter tube;
- Check that the drainage bag is not too full;
- Don't tug or pull the catheter tube. Use a catheter retainer device to prevent any pulling on the catheter which can cause discomfort;
- Check that the foreskin is in the right position;
- Speak to your nurse who can provide some anaesthetic jelly to use around the catheter at the tip of the penis.

Are there some signs to look out for and who should I contact?

Sometimes you might need to contact your doctor or community nurse because of some difficulties that may arise. This can happen even if you've been following all the advice you've been given.

If you notice any of the following signs, contact your GP:

- No urine has drained into bag in the last few hours;
- Your catheter appears to be blocked;
- Your catheter falls out;
- You have a pain in your lower tummy area and you feel that your bladder is full;
- The entry area of the catheter becomes red, swollen or tender.

Urinary Tract Infection UTI

Because your catheter can provide a direct path for bacteria (germs) to get into your bladder, you may develop a UTI. If you notice the following signs it's important to get in touch with your doctor as a UTI needs to be treated:

- Your urine seems to be cloudy and has a strong smell;
- Your urine becomes very blood stained or you notice some clotted blood. This is different from your urine being very lightly stained with blood as this is quite common;
- Feeling feverish with a high temperature, above 38°C
- Chills;
- Feeling sick;
- Headache;
- Low back pain;
- Feeling unwell and very tired.

You will normally be given a course of antibiotics to take. It's very important to take all of the tablets, even if you feel better before you finish them.

Your catheter will most likely be changed too.

How do I get more bags?

Usually you will be given some supplies of these when you are discharged from the ward. If you need more, then your GP will give you a prescription and the District Nurse can help advise you on this. In some areas, you can ask for these to be delivered to your home from the pharmacy.

How should I store all the supplies for my catheter?

It's best to keep all the catheters, drainage bags and any other equipment in their original packaging and in a dry place. It's probably best to store any spare catheters flat rather than standing upright. An ideal place to store these would be in a cupboard or wardrobe out of direct sunlight.

Who should I contact for help or if I have any concerns or questions?

Please follow any advice you were given on who to contact when you left the ward or clinic and you may have been given a number to call. Your district or practice nurse, GP or clinical nurse specialist at the hospital will most likely be able to help with any difficulties or answer any questions.

There's no harm in asking if there is a continence advisory service in your area as they may be able to help you or answer any questions, although your GP may decide to refer you to this service for specialist advice right at the start. Alternatively, you can contact them yourself.

Some hospitals may give you a card to take home with you that includes all the details about your catheter so you can show this to whoever is helping you look after your catheter at home.

Trial without catheter - TWOC

When the doctor decides that you no longer need a catheter, you will be given an appointment to have this taken out. You may hear this called 'TWOC' or trial without catheter.

Details that hospital staff may like to complete before you go home

Reason for patient having catheter:	
Catheter in place on:	
Expected to be removed on:	
Details of any relevant allergies:	
GP informed of discharge on:	
District Nurse informed of discharge on:	

Useful information or contact details that you might need.

Health professional	Name	Contact number
GP		
District Nurse		
Practice nurse		
Consultant		
Clinical Nurse Specialist		
Ward		
NHS 24		111

Getting more information

If you have any questions about your catheter and looking after your catheter at home then it may be a good idea to write these down and speak to the doctor looking after you in hospital, the CNS, GP or nurse in the community who is looking after your catheter.

Additional resources that you may find helpful:

- 'Spotlight on Treatment for an enlarged prostate by TURP and laser treatments'
- 'Spotlight on Pelvic floor exercises for men'
- 'Spotlight on incontinence as a symptom of prostate problems'
- 'Early prostate cancer explained'

These can be downloaded from our website www.prostatescotland.org.uk or contact us on info@prostatescotland.org.uk or call us for a copy.