



Government of **Western Australia**  
East Metropolitan Health Service



Royal Perth  
Hospital



# Looking after yourself and your urinary catheter drainage system

Patient information





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## Supplies and storage of equipment

The nurse in the hospital will give you some equipment to take home with you. However, after this it is your responsibility to obtain further supplies of catheters, drainage bags or catheter valves as needed. You will receive a list of suppliers from whom you can buy your equipment.

Ask your nurse if you are eligible for funding to assist with your equipment.

1. All equipment should be stored together in a clean, dry box, drawer or cupboard.
2. Your catheter should be stored flat.

## Equipment and contact details

Catheter: Type ..... Size.....

Leg drainage bag: Type..... Vol.....

Overnight drainage bag: Type .....

Vol ..... Date of next catheter change .....

Where?.....

Silver Chain referral? Yes / No

If you have any problems or questions about your catheter drainage system, please contact the Continence Nurse Advisor.



### **Royal Perth Hospital**

Monday-Friday 8am – 4pm

Tel: 9224 2244 and ask for page 2309

After hours (not urgent)

Tel: 9224 2836, or 9224 2653 and leave a message

or

### **Bentley Hospital**

Monday-Friday 8am-4pm

Tel: 9416 3770 - please leave a message if call not answered

Tel: 9416 3666 and ask for page 222

or

### **Health Direct (24 hours)**

Tel: 1800 022 222



## Introduction

It is **important** that you read through this information pack. It enables you, your partner or carer, to understand how to look after yourself while you are using a catheter.

You have had a tube known as a catheter inserted into your bladder to allow the urine to be drained out. The catheter can stay in place for a short time, for a few days or weeks, or it may be used to manage your bladder over a longer period of time.

The most common reasons for using a catheter are:

- › to rest the bladder because you were unable to pass urine or you experienced a bladder distension (i.e. urinary retention)
- › after surgery, most commonly prostate, bladder or urinary tract surgery
- › to allow drainage of urine when your bladder can no longer empty by itself (e.g. as a complication of diabetes, following a stroke or spinal cord injury.)

If you don't fully understand why you have a catheter, discuss these concerns with your doctor or nurse.

The drainage system used may be:

- › a leg bag on continual drainage which is connected to a larger volume drainage bag at night time
- or
- › a catheter valve which is emptied every 2–3 hours during the day and can be attached to a drainage bag at night time.

Don't be afraid to ask your nurse questions about your catheter and the drainage system being used.



It is important that you let your doctor or nurse know if you have a **latex allergy** (rubber products - e.g. rubber bands, gloves, or condoms.) Catheters are made from both rubber and non rubber materials such as silicone. Therefore, it is important to use the correct type of catheter and a non rubber catheter is used if you are allergic to latex.

It is also important that you let your doctor or nurse know if you are taking blood-thinning medications such as **Aspirin** (Astrix, Cartia, Cardiprin, Solprin, Aspro or Disprin), **Warfarin** (Coumadin or Marevan) or **Clopidogrel** (Iscover or Plavix).

## How a catheter works

### Urethral catheter

Your catheter is a hollow tube that is inserted into your bladder to drain urine. It has been inserted into the bladder through the urethra (the tube you normally urinate through) and is known as **urethral catheterisation** (see Figures 1 and 2).

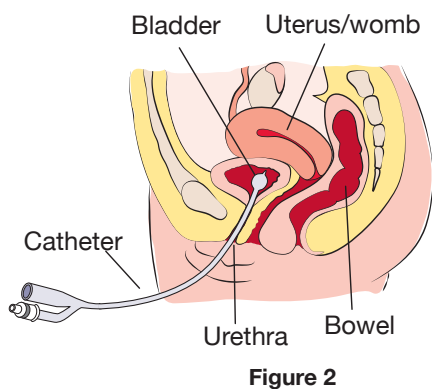


Figure 1 – Female catheter

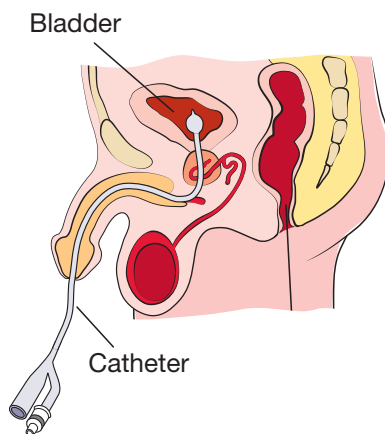
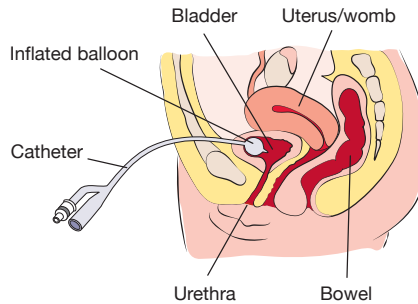


Figure 2 – Male catheter

## Suprapubic catheter

Your catheter is a hollow tube that has been inserted through your lower abdomen into your bladder to drain it of urine. This is known as ***suprapubic catheterisation***.



The catheter will not fall out because it is held in place by a small balloon which is inflated with sterile water after the catheter is inserted into the bladder.

**Never** try to remove your catheter without medical or nursing advice. You may cause an injury to yourself.

Most catheters can be left in place for up to 12 weeks, but this may vary under different circumstances. The catheter change will be done approximately six weeks after the first insertion and then a decision will be made by the nurse when the next change will be. This will be reassessed if you have any problems.

Your catheter can be changed by your doctor or nurse at home, at your hostel/nursing home or in the hospital outpatient department. Your doctor or nurse will advise you of the arrangements for changing your catheter.

The catheter should be comfortable to wear and should not pull. Positioning your catheter correctly will help make it comfortable (see page 7).





## Your drainage system

The catheter and drainage bag when joined together form a **closed system**.

The **link system** consists of a leg bag, held in place with leg straps or a bag holder, concealed under the clothing. This collects urine during the day and is emptied at regular intervals. The leg bag is sterile when it is attached and usually worn until the catheter is changed and a new sterile leg bag is attached. This should remain attached to your leg at all times.

At night, a larger capacity bag is connected to the open drainage tap of the leg bag allowing urine to collect for a longer period. It is important that you always ensure this urine bag is kept below the level of the bladder.

There are many types of drainage bags available with different opening/closing taps. If the one you are using is causing you problems, ask your doctor or nurse for advice.

Leg bags can be secured to your thigh, knee or calf area, depending on the length of drainage tubing on the leg bag. The leg bag is best left secured to your leg during the night to prevent trauma.

Your nurse will show you the correct position to wear your leg bag, how to secure it using either a bag holder or straps and how to connect your overnight drainage bag/bottle.

To avoid your leg bag becoming too full and heavy, which may pull on your catheter, empty it at regular intervals every two to three hours or until the bag is about half to three quarters full.

Ensure the catheter is attached to your inner leg (thigh or calf) using an adhesive or strap type of fixation device (see Figure 3 and 4). Correct positioning will ensure that the catheter is comfortable and, in males with a urethral catheter, will not cause



pressure or discomfort at the tip of the penis. It is recommended that you change the position of the bag from one leg to the other every second day.

If you are prone to reflex erections your nurse may advise you to attach the urethral catheter to your abdomen to prevent pressure on the tip of the penis if an erection occurs.

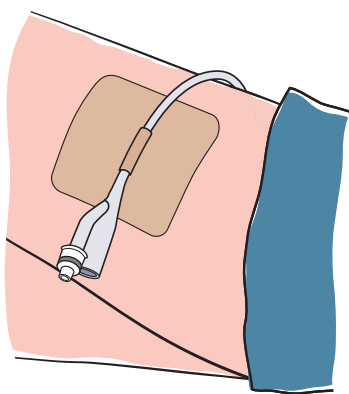


Figure 3

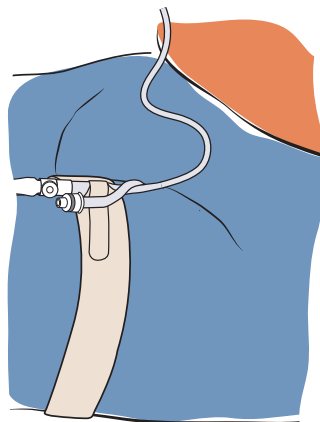


Figure 4

## Changing your leg drainage bag

It is important that you know how to correctly change your leg drainage bag.

The leg bag can stay in place until the catheter is changed. However, sometimes the bag may need to be changed more frequently because of damage or odour. Therefore it is important to make sure you always have a spare bag at home.

1. Wash and dry your hands thoroughly.
2. Release the bag from your leg by undoing the straps or removing it from the bag holder. Wash and dry your hands.
3. Open the packet of your new drainage bag ready to be connected.



4. Using soapy water wipe around the area where the catheter connects to the bag.
5. Pinch the end of the catheter with your fingers, so that no urine can drain out, and gently disconnect the bag.
6. Put this bag aside. Remove the plastic cover from the tip of the new bag and immediately connect it to the drainage port of your catheter. **Always take the bag to the catheter not the catheter to the bag.**
7. Re-secure your new leg bag to your leg using straps or your leg bag holder.
8. Empty the urine from your old leg bag into the toilet and rinse it out. Wrap it in newspaper, place in a plastic bag, secure and place in the dustbin.
9. Wash and dry your hands thoroughly.

## Overnight drainage bag

Your overnight drainage bag is bigger in volume two litres and tubing than your leg bag. Night bags are connected to either your leg bag or catheter valve at bedtime. This enables you to sleep during the night without having to wake up to empty your leg bag or catheter valve.

It is important that you use the overnight drainage bag. Should your leg bag become full and you do not wake up, there is a chance that your bladder will become full and the urine may reflux back to your kidneys. This may cause infection which can make you very unwell.



## Attaching overnight drainage bag

(see Figure 5)

1. Wash and dry your hands thoroughly.
2. Empty the urine from your leg bag or bladder if using a catheter valve.
3. Wash and dry your hands thoroughly.
4. Remove the plastic cover from the top of the night bag and put it into a clean, dry container until morning.
5. Connect the white tip of the night bag into the drainage tap at the base of your leg bag or catheter valve.
6. Check that the drainage tap on your night bag is closed.
7. Open the drainage tap on your leg bag or catheter valve. This will allow urine to drain directly into your night bag.
8. Place your night bag on its stand (if used) or into a clean bucket, kept for this purpose only.
9. Position the night bag below the level of your bladder. This will enable you to move in bed without the risk of pulling on your catheter (see Figure 5).
10. Make sure the night bag drainage tap is off the floor.
11. Wash and dry your hands thoroughly.

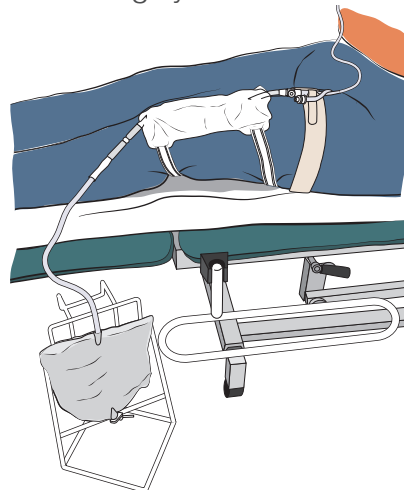


Figure 5



## Removal and cleaning of overnight drainage bag

The night bag is reusable and therefore needs to be cleaned after each use.

1. Wash and dry your hands thoroughly.
2. Close the drainage tap of your leg bag or catheter valve.
3. Gently disconnect your night bag from your leg bag or catheter valve.
4. Empty the contents of your night bag into the toilet.
5. Place the white tip under running water and wash your night bag using a gentle liquid hand soap. Use warm (not hot) water to reduce the risk of scalding and do not use detergent such as washing up liquid.
6. Rinse the bag with clean water and then rinse again with a vinegar solution – one part vinegar to eight parts water – to reduce odour.
7. Put the plastic cover back onto the white tip of your night bag tubing and leave the bag to dry in a clean place, such as over the shower rail, until required again.  
Ensure that the drainage tap is open and not touching the floor.
8. Wash and dry your hands thoroughly.
9. Prior to re-using your night bag, lay it on a flat surface. Flatten the bag from the end of the tubing and towards the drainage tap. This removes any air inside the night bag which may cause an air lock. Close the drainage tap.



## Catheter valves

Evidence suggests that some people who have a catheter inserted into their bladder to drain it of urine are better suited using a catheter valve.

A catheter valve is a tap which is inserted into the drainage port of your catheter. Using a catheter valve helps promote bladder health. It allows your bladder to fill with urine, thus giving you the sensation of having a full bladder (if you have feeling) and needing to urinate.

To empty the bladder, the catheter valve tap is opened and urine is allowed to drain. There is no need to try and pass urine in the normal way; you may cause bypassing of urine down the outside of the catheter.

To allow urine drainage overnight, a night bag/bottle is attached to the catheter valve (see page 9).

A catheter valve is not suitable for everyone, therefore your doctor or nurse will advise you about whether a valve is the right management for you.

## Changing the catheter valve

The catheter valve is sterile when it is attached to the catheter after insertion. Ideally it should remain in place until the next catheter change when a new sterile valve should be placed.

1. Wash and dry your hands thoroughly.
2. Using soapy water, wipe around the area where the catheter connects to the valve.
3. Open the packet containing the new catheter valve and check the tap is in the closed position. Avoid touching the white end which goes into your catheter.



4. Pinch the ends of your catheter together to prevent urine leakage and remove the old catheter valve from your catheter.
5. Put this to one side and insert the new catheter valve into the catheter.
6. Wrap the old catheter valve in newspaper and place it in the rubbish bin.
7. Wash and dry your hands thoroughly.
8. To attach or remove the night bag see page 10.
9. Catheter valves are changed when your catheter is replaced. However, it is important that you always have a spare catheter valve in case of emergency.

## General tips to help you care for your catheter

The following hints may help you keep your catheter working properly. If you have any problems, ask your doctor or nurse for advice.

It is important to maintain a good standard of hygiene to reduce the risk of infection.

1. **Always wash your hands before and after handling your catheter.**
2. Wash the visible part of the catheter and the area where it enters your body with warm, soapy water once daily during your shower.  

Men – you may notice a slight discharge around your urethral catheter where it enters your penis. In most cases this is a normal bodily discharge from the urethra. Gently clean this off when you wash.



3. Avoid scented soap, perfume, talcum powder, antiperspirants, bubble bath, bath salts or creams in the genital area.
4. Men – ensure you wash under your foreskin.
  - a) If you are not circumcised, pull back your foreskin and clean the area underneath to avoid a smegma ring forming which can cause irritation and soreness.
  - b) Remember to return your foreskin to its normal position afterwards. If you don't, you may develop a painful swelling called paraphimosis. If this happens don't leave it. Seek medical advice immediately.
5. Women – always wash from front to back particularly after a bowel movement.
6. A shower is preferable to a bath. Leave your bag or valve attached to the catheter while showering.
7. If you have a leg bag, keep it below the level of your bladder at all times.

## Is diet important?

If you have an indwelling catheter, it is important to avoid constipation. Your bowel lies close to your bladder and pressure from a full bowel may stop the flow of urine down the catheter (see Figure 1 and 2). Likewise, if you strain to have your bowels open, you may cause urine to bypass around the catheter. This can occur with both drainage bags and catheter valves.

A diet with plenty of fibre (e.g. wholemeal foods, fresh fruit and vegetables) will help prevent constipation. If you are prone to constipation and you have your own methods of prevention, please discuss these with your nurse. We can advise according to your needs. Please let your nurse know if you are taking medication for constipation.





## Fluid intake

In order to keep your urine clear and flowing, as well as help prevent infection and constipation, it is important to drink at least 1.5L–2L of fluid per day, unless advised otherwise by your doctor or nurse. The best way to achieve this is to have a drink every hour from getting up to going to bed.

Avoid strong coffee, strong tea, fizzy drinks and excessive alcohol intake.

Evidence has shown that cranberry juice may reduce certain urinary tract infections (cystitis). However, cranberry may cause you problems if you take certain tablets or medications. Therefore **it is very important** that you do not start to take cranberry juice or tablets until you have discussed this with your doctor.

**If you take Warfarin do not take cranberry juice or tablets until you have discussed this with your doctor.**

If you notice your urine becoming dark (concentrated) it can be a warning that you are not drinking enough fluids. Your urine should be a clear lemon colour. However, there are certain medications, such as multivitamins, and foods, such as beetroot, that can discolour urine.

If you notice your urine is blood stained, increase your fluid intake and seek medical advice immediately.

## Lifestyle

When you are using a catheter you can still lead a normal lifestyle including going on holiday, socialising in clubs or visiting family and friends. If planning a holiday, you may wish to seek advice from your nurse or doctor about what equipment you may need to take with you especially if going overseas.



Drainage bags can sometimes be damaged so if you have a 'spare' with you it's easy to change the bag in the nearest toilet and avoid any leakage problems.

## Sexual activity

### Urethral catheter

Sexual activity may continue with a urinary catheter in place or you may prefer to discuss with your doctor the use of a suprapubic catheter. It is important to wash around the catheter prior to sexual intercourse.

Men should fold the catheter along the side of the erect penis and hold in place with a condom.

Women should tape the catheter up onto the stomach.

### Suprapubic catheter

Sexual activity may continue with a suprapubic catheter in place.

Only use water based lubricants to assist with sexual intercourse. Other lubricants may damage the catheter.

## Troubleshooting

This section covers the most common problems you may encounter. However if you have a problem with your catheter which is not covered here and/or you need advice please contact your doctor or nurse.

### There is no urine draining into the bag

This can happen because there are kinks in the catheter or the drainage bag tubing, or the catheter could be blocked.



**NB: catheter blockage is an emergency and needs to be fixed as soon as possible.**

Follow the checklist below.

1. Check for, and remove, any kinks in the catheter or the drainage bag tubing.
2. Firm fitting underwear can sometimes cause kinking therefore males are advised to wear loose fitting underwear.
3. Check the position of your catheter and drainage bag. Ensure the bag is positioned below your bladder when lying, sitting or standing
4. Check that the leg bag straps are fitted correctly and are not causing drainage bag obstruction
5. If you have abdominal discomfort, are feeling the need to pass urine and have done the above checks you will need to attend your local Emergency Department immediately, because your catheter may need to be changed.
6. If you are unable to feel bladder fullness and you have performed the above checks you should attend the Emergency Department immediately.
7. If you are not experiencing abdominal discomfort or the urge to urinate, increase your fluid intake. Drink two glasses of water immediately and if there is no urine drainage after 30 minutes contact your nurse or visit your local Emergency Department.

**There is urine leaking around the catheter**

This is called bypassing and happens when the urine cannot drain down the catheter causing it to leak around the outside of the catheter.

1. Check for and remove any kinks in the catheter or the drainage bag tubing.
2. Firm fitting underwear can sometimes cause kinking, therefore males are advised to wear loose fitting underwear.



3. Avoid constipation. Eat a balanced diet and drink 1.5L–2L per day unless otherwise advised by your doctor or nurse.
4. If you are having bladder spasms speak to your doctor or nurse for further advice (see below).
5. If your catheter is blocked attend your local Emergency Department immediately as the catheter may need to be changed.

### **If you have a suprapubic catheter and are leaking urine from the urethra**

This can sometimes happen as a result of a blocked/kinked catheter or drainage bag tubing. Follow the steps above but if the problem continues contact your doctor or nurse for further advice.

### **You are having stomach cramps**

Cramp type pains can happen as a result of the catheter irritating the bladder or as a result of pressure on the bladder from constipation. These are commonly referred to as ‘bladder spasms’.

Avoid constipation by eating a well balanced diet and make sure you drink 1.5 to 2 litres of fluid per day (unless advised otherwise by your doctor or nurse).

If you are experiencing bladder spasms due to irritation of the bladder, your doctor or nurse will be able to give you further advice. Some people need to take tablets to calm the bladder but this will be discussed with you at the time.

### **Cloudy, smelly, discoloured urine, pain and discomfort**

You may have a urinary tract infection (UTI). The signs and symptoms of a UTI are:

- cloudy, strongly offensive smelling urine
- burning sensation around the catheter



- bleeding
- itching and soreness
- high temperature
- feeling unwell
- discomfort in the lower back or loin areas.

If you have any of these symptoms you should see your doctor immediately. Your doctor may need to send a specimen of urine to the laboratory for testing and when the results are available you may need a course of antibiotics to treat the infection. When taking a urine specimen, the catheter should be changed and the sample taken from a new catheter.

Increasing your fluid intake (unless advised otherwise by your doctor or nurse) will help to flush the bacteria through the system quickly.

### **Your catheter has fallen out**

Your catheter should not fall out because it is held in place by a small balloon which is inflated with sterile water after the catheter is inserted into the bladder (see Figures 1 and 2 on page 5).

However on rare occasions the balloon might be faulty and deflate and your catheter will fall out. In this case you must contact your doctor or nurse **immediately** or visit your local Emergency Department.

If you accidentally pull out your catheter you must also follow the above advice.

### **There is blood in the urine**

There should not be any blood in the urine except following some surgical operations on the prostate or bladder.

**Any blood in the urine should be assessed immediately by your doctor or nurse.**







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