

Glossary

There follows a list of words you may be unfamiliar with and how they relate to your Continence management.

Bladder	A muscular storage bag that holds Wee.
Catheter	A urinary catheter is a plastic tube used to drain Wee from the bladder.
Faeces or Poo	Waste left over after food has been digested.
Hydrophillic catheter	Catheter with a special slippery coating activated by a fluid - usually water or saline.
Intermittent self catheterisation or ISC	Sometimes called Clean Intermittent Catheterisation (CIC). It is the procedure of passing a special piece of plastic tubing into the bladder to ensure the bladder is completely empty. After the process the tube is removed.
Neurological Disease	A disorder of the nervous system.
Reflux	Raised pressures in the bladder force Wee back up the tubes linking the bladder to the kidneys (ureters). Potentially very dangerous as if unchecked this can actually damage the kidneys.
Retention	The bladder fills up and for a variety of reasons cannot be emptied without medical intervention - usually passing a catheter.
Retraction	Willie disappears into the body cavity often making it difficult to catheterise.
Sphincter	Usually a circular muscle that acts like a valve. Normally closed preventing leakage of Wee or Poo.
Stricture	A narrowing in the Wee-pipe which can be caused by some operations, and many other medical reasons.
Symptomatic	Showing symptoms of something like an infection.
Urethra	The Wee-pipe - tubing from bladder to the end of Willie.
Ureter	Tubing connecting kidneys to bladder.
Urodynamics	The investigation of functional disorders of the lower urinary tract, i.e. the bladder and Wee-pipes joining it to the Kidneys and Willie.
UTI	Urinary Tract Infection - a bacterial infection that affects any part of the urinary tract - kidney, ureters, bladder or Urethra.
Wee	Waste products filtered from the bloodstream by the kidneys and stored in the bladder. Wee contains a variety of fluids, salts, and waste products, it usually does not have bacteria in it. However, as ISC is not a sterile procedure it is likely that there will be bacteria in a person carrying out ISC. If there are no adverse symptoms (see page 22) this is not considered as a problem.

Useful things to know - some questions answered?

How do I get my catheters?

From your usual medical dispensing outlet, this could be any dispensing Chemist/Pharmacy, even some doctor's surgeries. You may already get your continence products delivered to your door by a home delivery service. They will be able to do the same with iQCath. If not, we can arrange for your iQCaths to be dispensed directly to your door via next day courier delivery at no cost to yourself, if you or your GP send the prescription directly to us in one of our Freepost envelopes.

Call our helpline on 0870 1904 150 or log onto our website www.manfredsauer.co.uk and request a Home Delivery pack.

How often should I catheterise?

Check to see what your healthcare professional has written specifically about you on page 1. Also see page 6 'How much should I drink and how often should I catheterise'. As a rough guideline, an adult male should try to keep the volume of Wee to a maximum of 400mls each time you empty your bladder.

Where can I catheterise?

With practice you will soon become confident to perform ISC just about anywhere you have privacy, it is even possible to catheterise in bed and away from a toilet and running water. However you need to be prepared for such occasions and ensure you have the correct equipment with you.

How much should I drink a day?

See Page 6 for more details.

How do I store my catheters?

Store them flat in a cool dry place away from direct sunlight.

How do I carry my iQCaths when away from home?

iQCaths can be rolled (not folded) and placed in a jacket pocket, belt pouch, bum bag or similar. Some people even thread them behind a waist belt. Tight fitting trousers and many jeans' pockets may be a little too tight to comfortably carry your iQCath depending on the cut of the garment. If you are using iQCath+ with integral activating fluid be careful not to burst the sachet until you are going to use the catheter. Many trousers have a stitched easy access pocket on the outside which make them ideal for carrying what you need. Some of our customers tell us that tucked into the top of a boot or Baseball cap works for them! Briefcases & Laptop cases, lunch boxes, partner's handbags, supermarket carrier bag and of course in the car and desk at work are all other options. Ensure you unroll any unused caths at end of the day and store them flat in a cool dry place.

Perhaps you have a novel idea how to discretely carry them about that you could tell us about - contact our Helpline and share your experiences!

How often do I need to wash?

Once a day ideally by taking a shower or bath. Some people find it helps prevent infections to clean the genital area after going for a 'Poo' using a Baby wipe or similar.

What if there is no Wee coming out of the catheter?

If you are sure the catheter has gone all the way into your bladder then check the following:

- 1) The catheter has not been folded or creased. If it has discard it and use another that has been stored flat or rolled.
- 2) Some people can produce a lot of debris in their Wee especially after some operations that can block the catheter's eyelets. Discard the catheter and try again. If the problem persists contact your Continence Specialist for advice.



NURSE SAYS

Tip: In the UK it should not take more than 2-3 days from giving your prescription to the dispenser to receiving your catheters. If you are told it will take longer, call our Helpline to get more information on how to get your catheters quickly. We can even arrange for them to be delivered discretely and at no cost to you, direct to your door!

What if I cannot get the catheter in?

Compared to many catheters on the market this is unlikely to happen with iQCath as it goes places other catheters simply won't!

This problem is very rare and is usually caused by strictures or your Wee-pipe and/or sphincters going into spasm when the catheter is first introduced, possibly caused by you being anxious or tense. Try to relax, withdraw the catheter a little, some people find it helpful to give a little cough at the point the catheter is refusing to go past. If still no luck remove catheter, relax and leave it for 10 minutes and try again with a new catheter. If after several attempts it still won't go in contact a Healthcare Professional for advice before your bladder fills fully and you get too uncomfortable. Don't force the catheter in as there may be an underlying medical reason why the catheter will no longer go in.

What if I cannot get the catheter out?

Try not to worry, a little cough may help, wait a few minutes and try again. If still no luck then contact a healthcare professional for advice, but don't worry it's not going to cause any immediate damage. Many people have permanent catheters inserted 24/7. Don't force the catheter and don't cut it as this will just make it more difficult for the Healthcare Professional to remove.

What if I see blood on the catheter?

See 'Signs of infection' page 22. Occasional little spots of blood on the catheter or in the toilet are nothing to worry about particularly when first starting to catheterise. However, if there is a lot of blood draining into your Wee you should seek the advice of a healthcare professional.

What if I am ill, I may not be able to do my own catheterisations?

Some people are happy for someone close to them such as a relative or very close friend to learn the procedure. If this is not possible and you are too ill to do it yourself seek medical advice as they may decide to have an indwelling catheter put in until you are better. Keeping up your fluid intake is particularly important when ill for many reasons, let's face it the last thing you need is a urinary infection.

How do I know if I have an infection and what action should I take?

See Page 22 for more details.

I'm off on holiday what should I do?

It's always a good idea to carry more than enough supplies for your trip - remember in hot places you may drink more. Make sure you carry enough catheters in your hand luggage just in case of delays at the airport and to give you a chance to get others sent out if your luggage gets delayed or lost. A letter from your Doctor or even this booklet filled in by your Continence Specialist can save embarrassing moments with custom officials in foreign countries. We always recommend using iQCath+ as it has its own integral activating fluid sachet so the quality of local tap water is not an issue!

I know where I am travelling to has no accessible toilets, what are my options?

If you know it will be difficult finding an accessible toilet to perform ISC due to mobility problems, such as on a long haul flight or that special evening at the Theatre or restaurant where there are no accessible toilets. Rather than not drinking and getting dehydrated an option open to some people is to put an indwelling catheter and leg bag in-place for a short duration of time. You need to talk to your Continence Specialist before attempting this as it will depend on your personal circumstances and medical history. This is a clinical decision and the risks need to be understood before going any further. If you do use an indwelling catheter always ask for a catheter valve as well so rather than have your bladder on continuous drainage you can close the valve and let your bladder fill and empty as when you do ISC. If you don't do this, when the indwelling catheter is removed you will find getting back into your ISC routine difficult as your bladder readjusts to holding Wee again.

What about sex?

Yes Please! ISC is probably the least invasive way to manage your Continence problems and should not interfere with your sex life in any way. Passing a catheter with an erection is slightly more difficult but possible, and taking tablets to help with Erectile Dysfunction is also possible, but always discuss this first with your Healthcare Professional. It is advisable to empty your bladder before doing any activity and sex is no exception to this rule. Although it may be obvious it is still worth stressing at this point that as you are being intimate with another person even if there is no actual intercourse involved, it is vital that you are meticulous with personal hygiene before catheterising after any such activity.

What can go wrong & what to watch out for?

Signs of infection to look out for:

- ✗ **Leaking between catheterisations**
- ✗ **Needing to empty bladder more frequently than usual**
- ✗ **High temperature sweats & shivers (Flu like symptoms)**
- ✗ **Wee is stronger smelling than usual or cloudy**
- ✗ **Pain or burning when passing water**
- ✗ **Lower back ache**
- ✗ **More than a few spots of blood**

If you have one or more of these symptoms call a Healthcare Professional as soon as possible for advice, as if the infection really gets established it can make you seriously ill. You may be asked to provide a specimen of your Wee in a special container. To do this use a new iQCath and fill the bottle from the mid-stream flow of Wee, not the first or last part of your Wee. You may need a short course of Antibiotics to clear up the problem. Beware some have side effects such as turning your Wee a different colour which can be quite a shock when you are not expecting it. Always finish the course of tablets even after the symptoms have cleared up. Some Doctors may even prescribe you a course of antibiotics to keep in reserve so you can start taking them as soon as symptoms start, whilst you wait for the 'Wee' specimen provided to be analysed.



ANY QUESTIONS FOR NURSE?

Write them below before you forget.