

BLADDER INFECTION/ URINARY TRACT INFECTION (UTI)

Bladder infection, also called “UTI” or cystitis is a bacterial infection of the urinary bladder. It occurs when bacteria contaminates the urethral opening (the tube that connects the bladder to the outside of the body) and travels upwards into the bladder. Normally, bacteria does not live in the bladder or urethra. When a bladder infection occurs, common symptoms include burning with urination, frequency and urgency of urination and sometimes blood in the urine. If the infection travels upward beyond the bladder into the kidneys, it is called a kidney infection or “pyelonephritis”. A kidney infection can cause urinary symptoms, but also fever, back pain and vomiting.

Both bladder and kidney infections are more common in women than men because of anatomical difference. The proximity of the vaginal and urethral openings to the anal area where E. Coli bacteria is normally found puts women at more risk of bacteria moving forward into the urethral opening.

What are some of the factors that increase the risk of developing a bladder infection?

- Vaginal Sex, frequent sex, new sexual partner
- Use of Spermicides
- Diabetes
- History of past bladder infections
- There may be a genetic predisposition
- Kidney stones
- Unprotected insertive anal sex (in men)

What else could it be?

Burning with urination can also occur with vaginal or vulvar infections (such as yeast or herpes) or in people with urethritis (inflammation of urethra) or sexually transmitted infections (such as Chlamydia). In men, prostatitis (infection of the prostate gland) may cause similar symptoms.

Diagnosis – Laboratory Tests

Simple bladder infections can be diagnosed based upon symptoms alone, or microscopic examination of “clean catch urine” for presence of white cells and bacteria. Sometimes, a culture of urine is done to identify a specific bacteria when symptoms are not typical, you have had resistant or frequent infections, you have symptoms of kidney infection, you are not getting better with antibiotics, or you are pregnant. A urine culture may take 2-3 days for a result.

Complications

- Chronic or recurrent infection which may become resistant to treatment.
- Kidney infection or pyelonephritis – infection ascends from bladder to kidneys and is associated with fever, midback pain and nausea or vomiting.

Treatment

- 3-7 days of an antibiotic as determined by clinician and limited by any medication allergies.
- **It is critical you finish the entire prescription of the antibiotic even if you feel better after a few days.**
- Phenazopyridine (Azo, Pyridium, or Uristat available without a prescription) numbs the bladder and urethra to reduce pain. It changes the color of urine to blue or orange and should NOT be used for more than 48 hours. **It does not treat the infection.**
- Avoid caffeine and alcohol because they increase urinary frequency and bladder irritation.
- Increase water intake- eight 10 oz. glasses daily
- Follow your clinician’s instructions for follow-up and **call the clinic if your symptoms do not improve within 2 days** or get worse despite following instructions. Return to clinic if your symptoms are not entirely resolved when you finish your medication.
- **Seek care right away if you develop fever, back pain and/or vomiting.**

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Prevention

- Cleanliness; always wipe rectal area from the front toward the back.
- Urinate soon after intercourse
- Use adequate amounts of lubrication with intercourse. Astro Glide is a lubricant available at the UHS pharmacy.
- Drink adequate water, six to eight glasses per day until urine looks light in color.
- Empty bladder as soon as possible after impulse; do not hold urine for a long time.
- If you use spermicides especially with a diaphragm and have recurrent infections, consider an alternate method of birth control.
- Sexually transmitted diseases cause symptoms similar to urethritis. Your clinician may recommend further testing based on your history, lab results, symptoms and/or your response to medications.
- Taking cranberry juice or cranberry tablets has been promoted as a way to help prevent frequent bladder infections. This has not been proved in clinical studies.
- In men, avoiding unprotected anal insertive sex.
- Preventive antibiotics may be helpful in people who have frequently recurring UTI's. Make an appointment with a clinician to discuss.

www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment www.uhs.berkeley.edu or call **510-642-2000** Clinic Nurse **510-643-7197** for advice