

Patient information

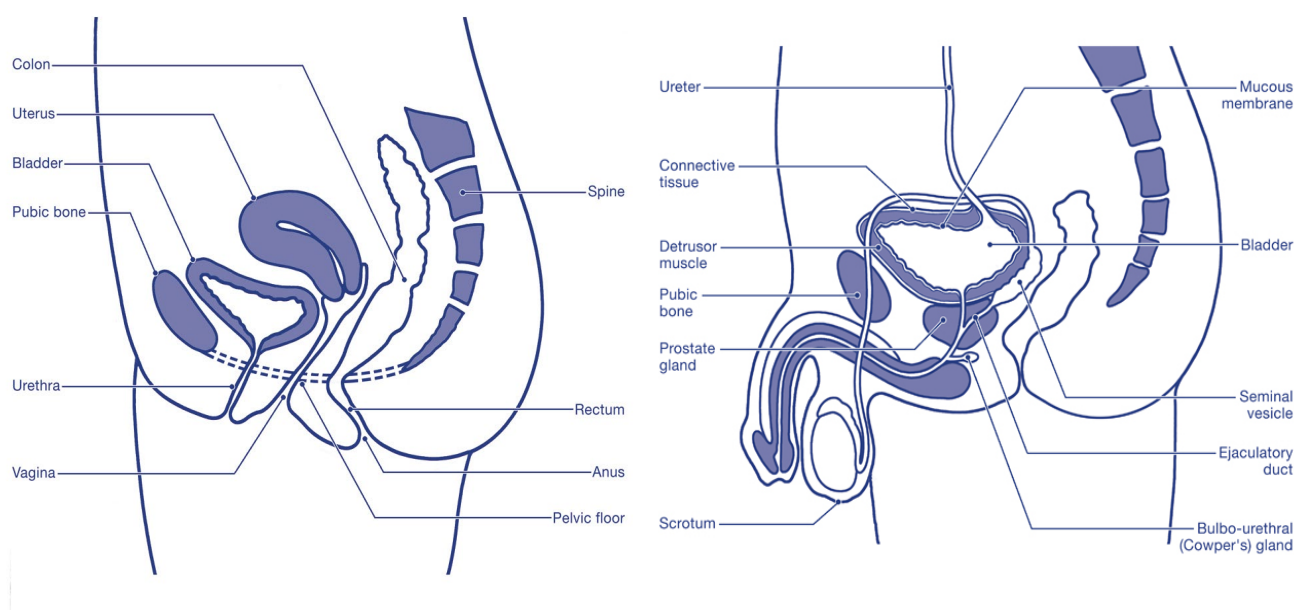
Urodynamics procedure

What is Urodynamics?

Urodynamics is a group of tests which allow your consultant to look at how your lower urinary tract is functioning.

Your urinary tract comprises:

- Your bladder which stores urine.
- The urethra which carries the urine from your bladder to the outside. (See below)



Why do I need the test?

The results of your test will guide your consultant in their decision on which types of treatment to offer you. The procedure is normally carried out in a clinic room within the Urology Investigation Suite, but may be carried out in the Radiology Department if your consultant requests this.

What happens when I arrive for the test?

All patients should bring a mid-stream sample of urine in a sterile container to the appointment, (sterile containers available from your GP, pharmacy or Urology Clinic).

The sample will be checked to ensure you are free of urinary infection. If you do have an infection the procedure will not go ahead that day and you may require some antibiotics.

The procedure

You will be asked to change into a gown. You will have a bladder ultrasound first and then two fine catheters will be inserted; one into the bladder via the urethra and the other into your rectum (bottom). The catheters allow the pressures within the bladder and abdominal cavity (belly) to be measured and from this, the detrusor (bladder muscle) activity can be calculated. Fluid, either sterile water or an x-ray contrast medium will be used to slowly fill the bladder.

During the filling of your bladder a number of recordings will be made, and you will be asked to tell us how your bladder feels. You may also be asked to cough, push down or jog on the spot to check for leaks.

When your bladder is full you may be asked to perform some more exercises or cough to try to make the bladder leak. You will then be asked to pass water into a special urinal or commode. A final bladder ultrasound will be carried out at the end of the test to establish how well you have emptied the bladder.

What are the potential risks and side effects?

There is a risk of a urinary tract infection. If you develop the following symptoms a day or two after the procedure:

- Burning on passing water
- Shivers
- Temperature of 37°C or above

You will need to contact your General Practitioner (GP) or out of hours GP service and explain that you have had this procedure.

Although you will consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

What are the alternatives?

Without this test it may be difficult for your consultant to decide on your course of treatment. Other tests are available but are less specific and the results may not give a complete picture of how your lower urinary tract is functioning.

What are the expected benefits of treatment?

To help establish a diagnosis of your urinary problem and devise a plan of care accordingly.

What should I do before I come into hospital?

No specific preparation is required. You may be asked to stop certain medication for up to two weeks prior to your appointment. This is to ensure that the results accurately reflect the bladder's natural function.

Will I have an anaesthetic?

No. However a local anaesthetic jelly is required to pass the catheter into your bladder.

How will I feel afterwards?

The procedure will not make you feel unwell or unable to carry out normal activities.

How long will I be in hospital?

Approximately one hour.

What should I do when I go home?

Drink plenty of water to flush out your urinary tract. You may feel a little sore in your urethra, but this can be relieved with simple pain killers like Paracetamol.

Will I have to come back to hospital?

You should receive an appointment to see your consultant to discuss the results of the test.

Conquest patients: If you do not receive an appointment through the post, please contact your consultant's secretary via the Conquest Hospital Switchboard 0300 131 4500

Eastbourne patients: You may hear from the consultant directly, by phone or letter, instead of attending an outpatient's appointment. If you do not hear anything within two weeks, please contact the consultant's secretary via the Eastbourne switchboard: 0300 131 4500

When can I return to work?

You will be able to return to work straight away after the procedure.

Sources of information

Simon Tyler-Murphy, Lead Nurse - Urology and Acute Continence.

Urology Secretaries, Conquest Hospital – Tel: 0300 131 4500, Ext 8468 or 8344

Susan Crosby-Jones, Matron

Urology Investigations Suite, Eastbourne District General Hospital – Tel: 0300 131 4500

Ext: 770640

Consultant secretaries - Tel 0300 131 4500 Conquest Hospital

Tel 0300 131 4500 Eastbourne DGH

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

Matron Susan Crosby-Jones, Urology Investigation Suite

Sister Gemma Ingram-Adams, Urology Investigation Suite

The Clinical Specialty/Unit that have agreed this patient information leaflet:

Diagnostic, Anaesthetic and Surgery - Urology

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Responsible clinician/author: Susan Crosby-Jones, Matron – Urology Investigation Suite

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