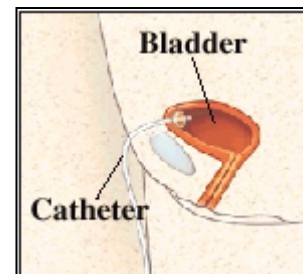


Insertion of Supra Pubic Urinary Catheter

What is a supra pubic urinary catheter?

A supra pubic urinary catheter is a hollow tube inserted through the lower abdomen into the bladder to drain urine. It is inserted through a small incision (cut) in the abdominal wall just above the pubic bone. To hold it in place a small balloon at the tip of the catheter is inflated with sterile water within the bladder. Urine drains through the catheter into a drainage bag. Alternatively, some patients can use a catheter valve (like a tap), your doctor will advise you if this may be appropriate.



This procedure is undertaken by a fully trained doctor.

Why would I need this procedure?

It may not be possible to pass a catheter through the urethra (water pipe) to allow urine to drain. If a bladder is not emptying well there can be back pressure causing damage to the kidneys.

A supra pubic catheter can be inserted as a short- or long-term measure to drain urine from the bladder.

You may have had a long-term urethral catheter which is being replaced with a supra pubic catheter.

Patients may have a supra pubic catheter inserted to manage their bladder whilst waiting for a surgical procedure or to allow healing after a surgical procedure to the bladder or urethra.

What are the alternatives?

Patients already catheterised can continue to be managed with a urethral catheter if appropriate. For some patients learning to pass an intermittent catheter urethrally (via the water pipe) to drain the bladder is a good option.

This information sheet describes supra pubic catheterisation under local anaesthetic performed as an outpatient. For some patients the procedure is done in theatre under general anaesthetic.

What are the potential risks and side effects?

The doctor will make a full assessment prior to the procedure and discuss the risks of supra pubic catheter insertion with you before you consent to the procedure. The principal risks are infection and bleeding. There is a small risk of bowel perforation which can result in death.

What are the expected benefits of treatment?

Supra pubic catheters can be more comfortable and be easier to manage. For women there is less discomfort from sitting on a urethral catheter. Urethral catheters can cause erosion (damage) at the meatus (opening at the tip of the penis).

Supra pubic catheters are a good option for people who want to be sexually active.

What should I do before I come into hospital?

If you are taking Warfarin, Aspirin, Dipyridamole or Clopidogrel please contact the Urology Investigation Suite when you receive this information.

You can eat and drink normally on the day of the procedure.

Where will the procedure take place?

If the procedure is to be done under local anaesthetic, you will be seen in a clinic room. The doctor will need to be able to see your bladder on an ultrasound scan; it may be necessary to fill your bladder with water via a urethral catheter (if you do not have one a urethral catheter may be inserted temporarily). The sensation of a full bladder may be uncomfortable if the bladder has become used to being empty all the time due to having a urethral catheter.

Will I have an anaesthetic?

If the doctor decides it is safe to proceed, in clinic environment, local anaesthetic will be injected at the site of the incision. If the bladder cannot be visualised or there is another reason not to proceed you may be booked to have the supra pubic catheter inserted in theatre under a general anaesthetic on another day.

How will I feel afterwards?

You may feel some discomfort at the time of insertion; if this continues you should take your normal pain relief. You may experience the sensation of needing to pass urine, this is normal and due to mild bladder irritation.

Bladder spasm or cramps may occur from time to time; this can cause a small amount of urine to leak around the supra pubic catheter site or via the urethra. There may be blood in your urine for a few days, a small amount is normal. All of these should settle within a few days.

How long will I be in hospital?

You should expect to be in hospital for around 1 to 2 hours.

What should I do when I go home?

Drink an additional 3 to 4 cups of water daily, aim to keep the urine a pale-yellow colour. If it becomes golden you should increase your fluid intake to make it pale again.

You will be taught how to manage your catheter and a small stock of drainage bags will be provided. Further supplies will be arranged; this can be via a home delivery service or GP prescription.

The Community Nursing Team will be made aware you have had the procedure and will be able to offer support once you are home.

If the catheter should fall out, you must ensure another is inserted within 30 minutes as the tract will begin to close up very quickly. Unless you can be seen by your GP or Community Nurse within this time you must come to the Accident and Emergency Department.

Will I have to come back to hospital?

Most patients return to hospital around 10 weeks after the supra pubic catheter insertion for the first change of catheter. At this appointment you will usually be seen by a nurse. When the catheter is changed the first time it is usual to increase the size slightly. Sometimes the first change is performed at home by the Community Nurses. Subsequent changes are managed at home by the Community Nursing Team. If you live at a nursing home, then the nursing staff will undertake routine catheter changes.

Sources of information

If you require additional information, please contact:

Urology Investigation Suite - (Eastbourne DGH) – Tel: 0300 131 4500 Ext: 770640

Please also see:-

How to manage your supra pubic catheter site.
Managing your catheter and drainage bag.
Managing a urinary catheter valve.

These patient information leaflets are available on the East Sussex Healthcare website and in a printed version from the Urology Department. You will be provided with the appropriate additional information sheets at the time the supra pubic catheter is inserted.

Consent

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

Sources of information

E.g. specialist nurse, ward, consultant secretary, self-help group, national bodies or Web site addresses.

Important information

The information in this leaflet 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:

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The directorate group that have agreed this patient information leaflet:
Diagnostic, Anaesthetic and Surgery - Urology

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