

## Going home with a catheter after a prolapse or incontinence operation

Department of Urogynaecology

**Patient Information** 

Many patients are not able to pass urine after a prolapse or continence operation. The nurses will teach you how to manage a catheter. This leaflet provides information about the care of your catheter at home.

#### What is a catheter?

A catheter is a small flexible tube that drains urine from your bladder. It is held in the bladder by a small water filled balloon that prevents it falling out. The urine drains from your bladder into a bag.

#### Why do I need to go home with a catheter?

After a prolapse or continence operation, up to one in three women may need to go home with a catheter still in the bladder. This may be due to swelling around the bladder from the operation, and sometimes the effect of the anesthesia slows down bladder function. The catheter will help to drain your urine until bladder function returns to normal. This is usually within one to two weeks.

#### How will I care for my catheter?

You will either be sent home with a free drainage leg bag or flip flow valve attached to your catheter. This will be discussed with you and will depend on both your procedure and your preference.

If you are sent home with a leg bag attached to your catheter this can be worn on your calf or thigh. You may be asked by nurse to empty your catheter intermittently (every 4 hours) by opening a tap at the end of leg bag. You can attach a bigger bag to use at night to avoid having to get up to empty it. You will need to change the bag weekly.

If you are sent home with a flip flow valve attached to your catheter then you would need to open the valve to empty the urine from your bladder. You would need to ensure that you empty it as regularly as you would go to the toilet to avoid overstretching your bladder. It is important to wash your hands before and after touching the catheter and when changing the bag or flow valve. You should shower daily and clean the area where your catheter enters your body with soap and water.

You should ensure that you have a good fluid intake with a catheter and aim to drink 1.5 - 2 litres of fluid a day. This will help prevent infection and constipation. A healthy diet with fibre is recommended to maintain a regular bowel pattern.

#### What supplies should I have before I go home?

You will be provided with enough catheter supplies to last you until you have it removed. **This will include:** 

- Spare leg bag or flip flow valve
- Leg straps
- Night bag
- Catheter stand.

# What problems can occur at home and what do I do if I have any?

On discharge from hospital you will be referred to your local community nurses, who should be able to help you if you have any problems with your catheter. You should be able to contact them through your GP.

- **Bladder spasms.** It is not uncommon to have bladder spasms with a catheter. This will feel like tummy cramps. If this bothers you, contact your GP.
- Leakage. You can sometimes experience leakage around catheter; this is also called by-passing. It can happen with bladder spasms or when you open your bowel. If this happens continuously, your catheter may be blocked.
- Blockage. This can cause pain and discomfort. Check that the drainage bag is below the level of your bladder and that the catheter tube is not twisted. If no urine is draining, contact your GP or Horsted Keynes ward.

- Blood in your urine. If you see blood coming through your catheter contact your GP or Horsted Keynes ward.
- Your catheter falls out. If your catheter falls out contact Horsted Keynes Ward.
- Infection. You are at more risk of urine infection with a catheter. Symptoms may include discomfort, smelly or cloudy urine. If you suspect you have an infection contact your GP who may prescribe you antibiotics.

#### When will my catheter be removed?

Your catheter will be removed at the Trial without catheter (TWOC) clinic at Lewes Victoria Hospital, usually around a week from discharge. Once we remove your catheter, you will be asked to drink and wait to fill your bladder. You will need to pass urine three times and we will check your bladder is emptying afterwards with a scanner. If you are passing urine and emptying your bladder adequately then you can be discharged home.

If you are unable to pass urine or continue to retain large amounts of urine then you will be given the option to have another catheter inserted to allow more time, or to learn how to self-catheterise.

Your TWOC appointment may take several hours so please be prepared for this and make sure you bring any medication or pain relief you may need.

### Further information and contact numbers

Victoria Hospital Outpatients 01273 402512 Horsted Keynes Ward (Monday - Friday Only) 01444 441881 Ext. 5685 / 5686

This Leaflet produced by: Shafia S Siddiqui Urogynecology Fellow and Rosheen Baker Urogynecology Nurse Specialist

 $\ensuremath{\mathbb{C}}$  Brighton and Sussex University Hospitals NHS Trust

Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

Reference no. 1095 Publish Date: November 2020 Review Date: November 2023

