

This literature is produced as an acknowledgement of the life and work of Desmond and Hildergard Atherton. Desmond worked as a GP in Coventry and Hildergard was a founder Trustee of Coventry Churches Housing Association (now Touchstone Housing Association) and The ExtraCare Charitable Trust. Desmond's strength and patience towards those in his care and Hildergard's commitment and support to our charity's work have influenced the development of well-being service that is now benefiting our residents.

Prevention

By far the best way is to learn how to reduce your chances of an infection.

- Drink at least 2 litres of water a day
- Cut down on alcohol and drinks which contain caffeine as they can irritate the bladder and leave you dehydrated.
- Always pass water when you feel the need.
- Try and empty your bladder completely - which should deprive the bacteria of somewhere to grow.
- Drink cranberry juice. It is believed to prevent the bacteria sticking to the bladder wall.
- Avoid bubble baths.



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Learn more about

cystitis

take extra care of your health

This can be a distressing and very uncomfortable problem that may mean you need the loo every 5 minutes; Cystitis is inflammation of the lining of the bladder as a result of infection, irritation or damage. Women are more likely to suffer from cystitis because they have a shorter tube going from the bladder out of the body (urethra) and therefore infection can occur more easily. The bacteria bind to the wall of the urethra and, as the female urethra is straight and only 2 inches long, it is easy for the bacteria to reach the bladder. Once the germs reach the bladder they multiply at an alarming rate which means they irritate the sensitive lining and cause the sensation of needing to pass water every few minutes.

The causes

Germs can easily be transmitted from skin around the urethral area or sometimes we don't drink enough, become dehydrated and then don't pass enough water to flush out any germs. Sometimes germs can also be transmitted from your bloodstream, and some very low levels of germs cause the bladder to be irritated yet don't show up when the urine is tested. This is called interstitial cystitis.

Urethral syndrome, which has very similar symptoms to cystitis, is caused by soaps, bubble baths or washing detergents.

Symptoms

- Burning and stinging when you pass water
- Needing to pass water all the time
- Only being able to pass a small amount of urine when you go
- Low stomach ache
- Blood in your urine
- Cloudy and smelly urine

By spotting the symptoms early and taking action, you can prevent it getting worse. By taking no action, you can allow the infection to spread from your bladder to your kidneys which cause the following:

- Fever
- Hot and cold shivers
- Feeling generally unwell and achy
- Pain in both or one loin

Prompt action is required if the infection spreads.

Diagnosis and treatment

If you spot the symptoms early, the following action can help get rid of it;

- Drink plenty of water and cranberry juice, in excess of 2 litres/day.
- Put a hot water bottle on your stomach, making sure you don't burn yourself.
- Drink a teaspoon of bicarbonate of soda dissolved in a glass of water; this makes your urine less acid and so should stop the burning and stinging when you pass urine.
- Over the counter painkillers like paracetamol can be taken to reduce discomfort (always read the directions on the label and check that you are not allergic to any painkillers before taking them).

Mild cystitis will usually go away by itself in two to four days. If it doesn't, you should go to see your doctor. Diagnosis is done by urine test, either using a dipstick in a urine sample, or by sending a sample to a hospital laboratory.

In some cases, a short course (three days) of antibiotics is given for cystitis. The symptoms should start to improve after the first day of treatment. Your doctor may also arrange laboratory tests to rule out other causes or to identify the bacteria causing the cystitis. Once the bacteria are known, the most appropriate antibiotic can be prescribed.

If you have re-occurring infections, more than six in a six-month period, you may need to see a specialist for a low-level, long-term antibiotic.

