

Recurrent Urinary Tract Infections (UTIs)

Recurrent bladder infections often occur in men and women as we age. Most urinary tract infections are caused by E. Coli and due to bacteria entering the bladder through the urethra. Hence, women tend to get more infections simply because the urethra is shorter and it is closer to the rectum.

The most common symptoms of recurrent infections include increased urgency and frequency of urination or burning with urination. Some people have fevers and pain in their side with the infection, and this can be a sign of spread to the kidneys.

A recurrent urinary tract infection is defined as more than 3 infections in 1 year. It can result from a persistent bacteria or a reinfection by another organism.

How do we diagnose a UTI?

A UTI is diagnosed by sending the urine sample to the lab for a culture. It is important to get a clean, midstream sample as bacteria from the vaginal area can contaminate the test. The culture results can take 2-3 days to return.

How do we treat UTIs?

The most common way to manage the infections is with the use of antibiotics. We try to tailor the antibiotics to the results of the urine culture. Sometimes, we may give antibiotics that are most likely to work prior to getting the results of the test. The most common antibiotics used include cephalexin, nitrofurantoin, sulfa and ciprofloxacin. Each antibiotic has its own risks so it is important to read about the medication before starting it.

How do we treat recurrent infections?

Behavioral and Dietary changes

You can lower the likelihood of infection by following these tips, most importantly, **drinking more fluids, especially water** and urinate often. If you are a woman, wipe from front to back after going to the toilet. Do not douche or use other home remedies. These can upset the natural chemical balance of the vagina, and make you more prone to bacterial overgrowth. Do not use vaginal hygiene products, such as deodorants. Wash the genital area once a day with plain water. Rinse well and dry thoroughly.

If you have frequent urinary infections, pee right after having sex. Drinking extra water after sex may also help prevent infection. Drink as much water as you can in the first 24 hours after symptoms appear. This will help get the bacteria out of the bladder.

At times of an infection, avoid alcohol and caffeine. A hot bath may help reduce pain and itching. Fever may be a sign of a more serious infection. Avoid intercourse until symptoms get better.

Medications and Interventions:

When people have recurrent infections, it is important to try to determine whether the infection is due to a persistent bacteria or a reinfection. If it is due to persistent bacteria, we may need to obtain an ultrasound and/or other x-rays to evaluate for a source of the infection. Some possible causes could be a kidney stone, anatomic abnormality of the urinary tract or abnormal connection between the bladder and rectum. Often these infections can be treated by removing the infected source.

If reinfection is the cause, often management involves a low-dose continuous antibiotic. This can reduce the rate of reinfection by about 95% and is safe. Some people elect to use self-start antibiotics. Here, patients start a short course of antibiotics (usually about 3 days) when they feel the onset of symptoms. Some women get recurrent infections after intercourse, so they take an antibiotic just prior or after intercourse to prevent an infection.

Some women with recurrent infections take a medication, methenamine. This medication in combination with vitamin C makes the urine hostile to bacterial growth. It is not an antibiotic, is safe, and has minimal side effects.

Lastly, cranberry pill extract may help reduce the number of infections.

For more information about the management of urinary symptoms, please visit the following websites:

<http://www.permanente.net/homepage/kaiser/pdf/22464.pdf>

<http://www.permanente.net/homepage/kaiser/pages/f65626.html>