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Title: PRE-LUBRICATED CATHETER USE AND THE MITROFANOFF PATIENT

Aim Of Study:

The Mitrofanoff principle[1], first described in 1980, is a method of providing urinary continence by using the appendix to form a continent catheterizable stoma. The procedure involves anastomosing the appendix to the bladder and then bringing the base of the appendix to the skin. Since it was first described, the Mitrofanoff principle has undergone numerous developments and has been applied in a variety of ways, but its basic principle remains the same: develop or maintain a reservoir to contain urine, and provide an anti-reflux conduit to conduct the urine to the outside. Clean intermittent self-catheterization (CISC) provides the key to the proper function of this method of urinary diversion. Several issues confront the individual using CISC, namely, urinary tract infection due to unsatisfactory emptying of the bladder, mucus discharge interfering with bladder emptying, comfort of the procedure, and convenience. One of the more common catheters available to those that have undergone the Mitrofanoff procedure is the hydrophilic catheter; a catheter requiring immersion in water (preferably sterile) to activate the hydrophilic surface of the catheter with the intent to reduce the discomfort of friction present during insertion and removal. Another catheter type available to this procedure group is the pre-lubricated catheter: the lubrication being provided by a water soluble gel that the catheter passes through prior to insertion. An advantage of the pre-lubricated catheter is that it is not necessary to have access to a clean or sterile water supply, and it reduces preparation time. The aim of the study presented here is to evaluate the experience of those that have undergone a Mitrofanoff procedure, and are currently using a hydrophilic catheter, when introduced to a pre-lubricated catheter.

Methods:

Twenty-four individuals having undergone a Mitrofanoff procedure, in the U.K., and who are currently undergoing CISC with a hydrophilic catheter participated in a study assessing the effectiveness and patient satisfaction with a pre-lubricated catheter. The study group has an average age of 30 years, and has been performing CISC for an average of 33 months. Each participant was required to use the pre-lubricated catheters for a period of 5 catheterizations and then complete a survey of their satisfaction with the catheter compared with their experience with their current hydrophilic style catheter.

Results:

Slightly more than seventy-nine percent of the CISC participants currently using a hydrophilic style catheter stated that the pre-lubricated catheter was a benefit to them. Ninety-one percent stated that the pre-lubricated catheter was easier to prepare. Eighty-three percent stated that they found it more effective in bladder drainage, while 60 percent stated the procedure took less time than their current hydrophilic

catheter. Seventy-four percent of the sample stated that the use of the pre-lubricated catheter provided greater comfort than the hydrophilic catheter. Eighty-seven percent stated that the pre-lubricated catheter was easier to remove. Ninety-one percent stated that the use of the pre-lubricated catheter was more convenient than the hydrophilic catheter.

Conclusions:

The results of this study indicate that for individuals that have undergone a Mitrofanoff procedure the use of a pre-lubricated catheter would be of benefit, not only as a matter of convenience, but also of comfort and effectiveness in its intended purpose.

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References:

1. Mitrofanoff P. Cystostomie continente transappendiculaire dans le traitement des vessie neurologiques. Chir Pediatr 1980, 21: 297-305