

OLDER PEOPLES' EXPERIENCES OF LIVING WITH A LONG-TERM URINARY CATHETER

Hypothesis / aims of study

The aims of this study were to explore the individual experiences and perceptions of older people living with a long-term urinary catheter and to develop a grounded theory which conceptualises these experiences and informs the development and delivery of improved care. User involvement in the planning and development of health services is an important theme in UK health policy initiatives yet despite being fundamental to the development of effective continence services older people's voices have been neglected. Most studies on long-term catheterisation have examined physical complications and have investigated ways to minimise complications such as urinary tract infection, encrustation, and blockage (1). The catheter users' perceptions of the complexities of living with a long-term catheter remain largely unknown (2). Older people with long-term catheters possess unique knowledge and experience; understanding the user perspective is a prerequisite for involving older people as full partners in a therapeutic relationship and to improving care delivery that is more effectively built around their needs and wishes.

Study design, materials and methods

Patients aged over 60 years were invited from one primary care trust to explore their experiences and perceptions of using urinary catheters and the effect of long-term catheterisation on their lives during in-depth interviews. A grounded theory approach was used in which theory is derived from data that is systematically gathered and analysed using a set of analytic procedures (3). Two phases of interviews were conducted with data collection and analysis taking place concurrently using the constant comparative method (3). Purposive sampling was employed in the first phase to recruit participants with long-term urinary or supra-pubic catheters and theoretical sampling was used in the second phase. Participants with contrasting experiences were re-interviewed in the second phase to obtain further data to help refine ideas and develop the emerging theory. The interviews were digitally recorded and transcribed by the researcher verbatim. Coding, analysis and theorising occurred concurrently using grounded theory methods (3). The qualitative data analysis programme NVivo7 was used for handling data and coding.

Results

Thirteen older people were interviewed (9 males, 4 females, age-range 66-92 years) including 9 patients using a urethral catheter and 4 using a supra-pubic catheter for between 1-7 years. Saturation was achieved with 20 interviews, each lasting between 20-120 minutes. Codes identified in the transcripts were grouped into categories and sub-categories based on shared characteristics. The core category, representing the central theme of the research 'all about acceptance' conveys the central experience of older people living with an indwelling catheter and encompasses the variation characterised by being 'at ease' or 'uneasy'.

At ease

"...it's nature now it's my way of life you might say this is what I do."

Uneasy

"I was frightened to death of it..."

A further six categories were developed which conceptualise the experiences and perceptions of older people living with a catheter.

Trying to understand it

"...I mean couldn't understand why I had to have one and it was a battle against it all the time..."

Judging catheter performance

"I'm glad I had one but at the moment I'm getting a lot of trouble with it..."

Being aware of physical manifestations

"I think I'd say foreign body I think 'cos I'm aware of it all the time."

Interacting with others

"...they've taught me all about it and they've shown me pictures and I talked to this woman...she made me feel at ease."

Engaging actively

"...it's not too bad really it's just a case of getting on with it really..."

Downbeat sentiments

"I was really frightened to go anywhere out because you know what if it blocks..."

Interpretation of results

The substantive theory developed in this study is grounded in the realities and experiences of older people living with a catheter. Older people's acceptance of life with a long-term catheter is shaped by a number of interrelated factors and varies along a continuum between being 'at ease' or 'uneasy'. The three categories 'trying to understand', 'judging catheter performance' and 'being aware of physical manifestations' shaped the older person's relationship with their catheter and this was mediated by the quality of their interaction with others. 'Engaging actively' made it more likely for the older person to be 'at ease' whilst enduring 'downbeat sentiments' facilitated an 'uneasy' acceptance of life with an indwelling catheter (Figure 1).

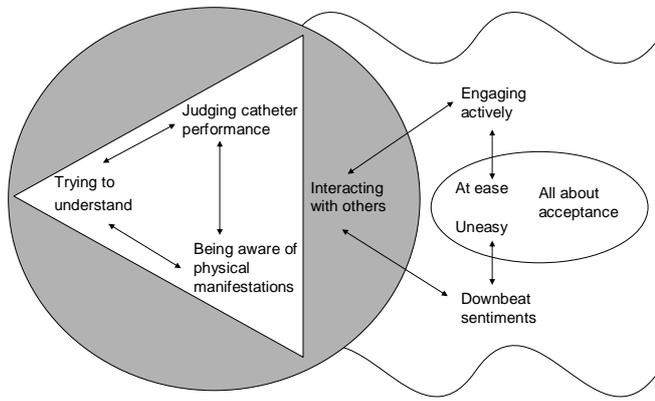


Figure 1: The processes by which older people adjust to living with an indwelling-catheter

Concluding message

The substantive theory proposes that older people’s experience and adjustment to life with an indwelling catheter is complex and not simply related to catheter performance or complications such as blockage. The challenge for healthcare professionals is to attend to what is important for older people living with a catheter and this requires a change in focus from catheter performance and complications to older people’s life situations.

References

1. Qualitative Health Research (2003) 13(9); 1189-1204
2. Journal of Wound, Ostomy, and Continence Nursing (2003) 30(1); 33-43
3. Basics of qualitative research: Techniques and Procedures for Developing Grounded Theory (Second Edition); California, Sage Publications, 1998

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Is this a clinical trial?	No
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Specify Name of Ethics Committee	Southmead Research Ethics Committee, Bristol, UK
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Was informed consent obtained from the patients?	Yes