SHOULD URINALYSIS BE ROUTINELY PERFORMED PRIOR TO URODYNAMIC STUDIES?

Hypothesis / aims of study

Urodynamic studies is an invasive investigation associated with risk of urinary tract infection. We aimed to establish whether routine testing of urine is universally indicated in all patients prior to undergoing urodynamics.

Study design, materials and methods

All patients referred to the urodynamics unit in our department completed a questionnaire prior to the procedure. This included questions regarding the presence of an infection, antibiotic therapy and presence of symptoms suggestive of urine infection. Dipstick urinalysis was performed in all patients immediately before undergoing urodynamics. Specimens which were positive on dipstick urinalysis were sent for microbiology, culture and sensitivity and the results recorded. None of the patients had prophylactic antibiotics.

Results

Data was collected from 70 patients (34 males and 36 females). 9 (13%) patients responded that they thought they had a urine infection. 20 (28.5%) reported symptoms of dysuria and/or frequency, urgency, haematuria and foul-smelling urine. Dipstick was positive in 23 (33%) patients, although only 8 (35%) had a proven infection on urine microscopy, culture and sensitivity. Out of these, 2 (8.6%) patients had symptoms of infection and were taking antibiotics, whilst the remainder 6 (26%) were asymptomatic.

Interpretation of results

Symptomatic urinary tract infection is present in a minority of patients prior to urodynamics and routine screening with dipstick is unnecessary.

Concluding message

Patients should be appropriately investigated in out-patient clinics to rule out infection as a cause of sensory urgency before being referred for urodynamics studies. At the time of urodynamics, urinalysis should be considered in patients who are suspected to have a urine infection but are untreated.

Specify source of funding or grant

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