

EVALUATION OF RISK OF URINARY TRACT INFECTION POST VIDEO URODYNAMICS.

Hypothesis / aims of study

A prospective study evaluating patient's pre and post Video Urodynamics (VCMG) regardless of their positive urine dipstick. Do the patients demographics increase the incidence of UTI post VCMG.

Study design, materials and methods

Patients informed consent to have VCMG performed was gained by the Clinical Nurse Specialist catheterising, evaluating and reporting the VCMG. They also discussed with patient the audit process and that the urine would be tested and if nitrates only or leucocytes and nitrates were present that a urine sample would be sent for MC&S to see what the sensitivities were and also whether any organisms were grown. They were also given a patient information leaflet about the audit.

The patients were also informed that we would telephone them after 7 days to see if they had developed a UTI symptomatic UTI in that time and needed antibiotic treatment. Alternatively if they were inpatients they were followed up on ward round. This information was gathered from March 2014 to March 2015.

To see the significance of leucocytes and nitrates being present in urine and what type of organisms are grown on CSU. Patient's demographics were documented at time of VCMG as well as urine dipstick and whether CSU was sent. This information was kept securely/confidentially on the hospital K drive and access was to the clinical Nurse Specialists and the Urology team only.

Results

In 1 year period- Out of the 410 patients who had VCMG

The Chi square test proved that there was no significant difference between patients with symptomatic urinary tract infection post VCMG whether they had a positive or negative Urine dipstick pre VCMG.

Demographics:

Out of 410 patients:

Voiding on urge - 106

Voids on urge and ISC- 33

ISC-141

SPC- 79

IUDC- 31

Sheath drainage -7

Sheath + ISC- 11

Incontinent – 2

Symptomatic UTI post VCMG - 20 patients

Mixed growth- 41, Ecoli- 35, other organisms-24

Inpatients 58 in total- 7 mixed growth and 14 had organisms

Interpretation of results

That there is no significant need to perform urine dipstick pre urodynamics.

Some of the results are still being analysed but provisionally there is 33% of patients that developed symptomatic UTI with Suprapubic catheters were inpatients.

Out of 141 patients who perform ISC 26 patients developed on CSU organisms but only 7 patients complained of symptomatic UTI. There was higher incidence of Ecoli infections 20 patients as opposed to 6 other organisms found on CSU. There is no significant difference between patients with leucocytes and nitrates then developing a symptomatic UTI post VCMG.

There are higher numbers of patients who are on intermittent catheterisation that develop symptomatic urinary tract infections post VCMG compared to the other demographic groups. Ecoli is the highest organism found in the group that performs ISC.

Concluding message

We conclude that pre Video urodynamic positive urine dipstick do not correlate with post Video Urodynamic incidence of symptomatic Urinary tract infections in this cohort of patients.

Disclosures

Funding: None **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** It was an audit and it was registered as an audit. The patients pathway and treatment was not affected by this audit. **Helsinki:** Yes **Informed Consent:** Yes