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Title (type in
CAPITAL
LETTERS)EFFECT OF BLADDER MANAGEMENT ON URINARY TRACT
COMPLICATIONS IN SPINAL CORD INJURY PATIENTS

Aims of Study: The optimal method of bladder management for spinal cord injury (SCI) patients remains controversial. Some studies report similar incidences of urological complications in SCI patients with or without chronic indwelling catheters (1). This study investigates the relationship between type of bladder management and urinary tract complications in these patients.

Methods: A retrospective review of the charts of 316 post traumatic SCI patients was performed. We categorized patients according to the predominant method of bladder management since injury: 92 patients used clean intermittent catheterization (CIC), 150 patients used chronic Foley catheterization, and 74 patients spontaneously voided. Complications were grouped by organ system.

Results: Urinary tract infections were treated with oral antibiotics in virtually all patients (94%) regardless of bladder management.

Number of patients (Percentage of patients per bladder management method)

	CIC	Foley	Voiding	Subtotal
Epididymoorchitis	3 (3)	42 (28)	6 (8)	51
Pyelonephritis/ Urosepsis	6 (7)	9 (6)	3 (4)	18
Upper tract Stones	14 (15)	75 (50)	22 (30)	111
Bladder Stones	2 (2)	40 (27)	4 (5)	46

Conclusions: This series reveals a statistically significant advantage of CIC over Foley catheterization in the prevention of epididymoorchitis ($p < 0.001$), upper tract stones ($p < 0.001$), and bladder stones ($p < 0.001$). No statistically significant difference in urinary tract complications was identified between CIC and spontaneous voiding.

Reference: 1. J. Urol., 147: 1069, 1991.