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MARKINGS ON CATHETER ALLOW TO CIRCUMVENT OF URETHRAL PROBLEMS IN MALE SPINAL CORD INJURY PATIENTS ON INTERMITTENT CATHETERIZATION

Aimes of Study: Intermittent catheterization is the method of choice to drain bladder in the majority of spinal cord injury patients. This is occasionally associated with urethral trauma and bleeding. The two areas in the normal urethra where resistance is often encountered are the entrance into the membranous urethra (external urethral sphincter) and secondly at the bladder neck. Patients with spinal cod injury quire often have spastic urethral sphincter which makes catheterization difficult. Any attempted forceful catheterization results in urethral trauma and occasionally a false passage. (1) Similarly catheterization near the bladder could be due to bladder neck obstruction due to a ledge(2), stenosis or enlarged median lobe of the prostate

<u>Methods</u>: We used a plain catheter with two markings, the first one at 11 cm and the other one (two markings) at 17 cm from the tip of the catheter. Sphincter spasm was suspected when resistance was felt near the first marking and bladder neck pathology was diagnosed when there was resistance encountered near the second marking in a non erect penis.

Results: Over 300 catheterizing trays with markings on catheters\* were routinely used for intermittent catheterization. Nursing staff was instructed to instil urethral anasthetic jelly (Lidocaine) when resistance was encountered at the first marking. Following relaxation of the sphincter in about 5 minutes patients were easily catheterized. In case if resistance was experienced near the second marking, a simple curved (coudé) catheter was used successfully for intermittent catheterization. No urethral trauma was encountered after substitution of these marked catheters.

<u>Conclusion</u>: Markings on the catheter are useful to alert urethral pathology in male patients on I.C. and use either local anasthetic jelly and or curved catheter (coudé) to prevent unnecessary urethral trauma, bleeding and subsequent morbidity with UTI and or false passage.

<sup>\*</sup>Bard developed these catheter markings for our special intermittent catheterization trays.