

Patient information from Gordon Muir, Consultant Urological Surgeon

Please do not rely on this information unless you have been specifically sent this by Mr Muir

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Recurrent Cystitis

This is a miserable condition which can take over a woman's life. It is rare in men, probably due to the length of the urethra (urine tube) which makes getting into the bladder difficult for germs from the outside.

Apart from the advice contained in the many books and leaflets available on the subject (it really is a question of experimenting to find out what is right for you), there are a number of points I emphasise. Adequate fluid intake is vitally important, as is emptying your bladder when it is full. In general you should aim for an intake of at least four pints of fluid a day and more if the weather is hot or your urine smells or looks strong. Ideally your urine should be no darker than a pale straw colour.

Cranberry juice (or cranberry capsules) may be of benefit: this seems to reduce the ability of certain bacteria to stick to the bladder wall and cause an infection. You can buy cranberry juice at most supermarket and health food shops and should aim at drinking a tumbler (300ml) each day. This is a preventive treatment so it should be regular. In addition to the benefits for the bladder it is a good source of vitamins! Taking live yoghurts such as Yakult or acidophilus bacteria supplements, can also be helpful in restoring the natural bacterial balance in the bowel and vulval region and this is also recommended as a trial for a few months to see if it will help you.

As it is thought that many bouts of cystitis begin by damage to the skin of the genital region during intercourse, be sure that you are not too dry when having sex. This is difficult to be sure of as most women do not know how well lubricated others are and therefore may not realise they are a bit dry. Using some K-Y jelly or another soluble lubricant (not Vaseline) may help and you may wish to try this. Also try to empty your bladder after intercourse as this may wash away any germs trying to climb up the urethra

Lastly, should your symptoms not respond to the conservative measures you try to remember that recurrent cystitis nearly always settles down with time.

In the interim however there are two antibiotic strategies we recommend which can be discussed with your doctor if necessary.

The first is to try a long course of a low dose of an antibiotic and the one I usually recommend is Nitrofurantoin, 100mg once a day for two months. This may act by sterilising the glands inside the urethra and bladder although there is no scientific proof for this. Nitrofurantoin is an antibiotic which in this long term dosage tends not to cause thrush unlike many others.

The second possibility recognises that cystitis usually seems to start on a Saturday morning and women then do not see a doctor until Monday when things are far advanced! This involves keeping a small stock of an antibiotic at home (usually an antibiotic shown to be effective by the last urine sample; Trimethoprim or Ampicillin are usually effective).

When you feel cystitis symptoms coming on, pass a urine sample into a clean urine container (deliver it to your doctor as soon as possible,) then immediately start the antibiotic and continue until you have had no symptoms for 24 hours.

This will usually mean only a two to three day course of treatment but seems to work very well. If the cystitis continues for more than four days you should consult your doctor to check the results of the urine test to make sure there are no resistant germs present.

