

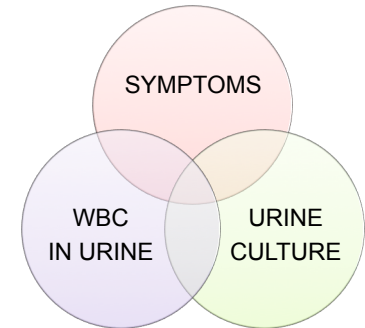
## Recurrent Bladder Infections in Females

Information  
for Patients

### Definitions

Urinary Tract Infection (**UTI**) = infection of bladder +/- kidney  
 Acute bacterial cystitis (**ABC**) = bladder infection  
 Pyelonephritis = kidney infection

### Diagnosis: Need 3 Things



### Fast Facts

- 1 in 2 women have a UTI in their lifetime
- 1 in 5 women with UTI have more than 2 per year
- Almost always ascending – bacteria enter via the urethra
- ABC not harmful unless they lead to a kidney infection
- Risks: very young age, menopause, intercourse
- UTI's rarely result from a tight urethra ('urethral stenosis')
- 'Sticky' vaginal and bladder mucosa is a major risk – e.g. Type O blood group

Maintaining a healthy vaginal 'ecosystem' is critical to preventing recurrences – this means carefully choosing antibiotics, taking probiotics and using vaginal estrogen in some cases. Antibiotics destroy both the bad and the good bacteria – probiotics and vaginal estrogen (in select cases) may help re-establish the flora.

**Infections can be treated but recurrences are common. While recurrences can't always be prevented, the frequency and severity of infections can be reduced significantly**

PREVENTION	TREATMENT
<p><b>PROBIOTICS:</b> <i>Lactobacillus rhamnosus</i> GR1, <i>L. reuteri</i> RC14, <i>L. crispatus</i></p> <ul style="list-style-type: none"> <li>• take by mouth AND place in vagina - for vaginal use, you can cut off the end of a gel-cap and insert the capsule with lubricant or purchase <b>Purfem</b> which is designed for vaginal use</li> <li>• take 1-2 per day while on antibiotics for any reason and for 5 days after completion of the antibiotics</li> </ul> <p><b>Cranberry extract*</b>: proanthocyanidins – <b>Ellura</b> (<a href="http://www.myellura.com">www.myellura.com</a>)</p> <p><b>D-mannose*</b></p> <p><b>Vaginal Estrogen:</b> Premarin, Vagifem</p> <p><b>Avoid constipation^:</b> bran buds, fruits and vegetables, Restoralax</p> <p><b>Other*:</b> urinate after intercourse, wipe the anus front to back</p>	<p><b>Self-Start Antibiotics:</b> take if symptoms of infection occur</p> <ul style="list-style-type: none"> <li>• who: women with recurrent UTI that have identifiable symptoms</li> <li>• take as directed when you have symptoms – usually 3 days of treatment</li> <li>• always see a doctor if you have fever or symptoms don't improve after 3 days</li> </ul> <p><b>Prophylactic Antibiotics:</b> 2 options</p> <ul style="list-style-type: none"> <li>• pericoital: take a single dose before or after intercourse</li> <li>• regularly: take daily or every couple days</li> </ul> <p><b>Anti-inflammatories:</b> Ibuprofen/Advil</p>

\* evidence for intervention weak but not harmful and may be helpful; ^ bran buds + 1/3 cup of water; beans, whole grains, apples, pears, prunes and berries