

Parents' guide to intermittent self-catheterization - Boys

What is intermittent catheterization?

Intermittent catheterization is a way to completely empty the bladder throughout the day and is an option for people with medical conditions that prevent them from draining the bladder on their own. To perform intermittent catheterization, a catheter (hollow plastic tube) is inserted into the urethra (opening where urine comes out of the body), past the urinary sphincter muscles and into the bladder. Once the catheter is in the bladder, urine will flow out, and the bladder will empty. Intermittent catheterization mimics how the bladder normally functions and must be done on a regular schedule as prescribed by your healthcare provider. Letting the bladder fill and then empty completely throughout the day increases the child's chances of maintaining a healthy urinary tract system. An overfilled bladder may stretch, which can sometimes contribute to urinary tract infections, urine leakage, and kidney damage.



Why should my child catheterize?

Children may need to perform self-catheterization for a number of reasons, which can include:

- Spinal cord injury
- Certain neurological conditions including spina bifida
- A complication following a surgical procedure
- Side effect of medication
- Problems with urinary retention (being unable to empty the bladder completely)
- Urinary incontinence (urine leakage or inability to control when urination occurs)

Intermittent catheterization has several health benefits compared with other bladder management options. Completely emptying the bladder several times a day through intermittent catheterization prevents urine from sitting in the bladder for prolonged periods of time and should help your child stay dry. Allowing the bladder to refill after voiding also keeps the bladder wall active, which is another benefit of intermittent catheterization. Studies show that intermittent catheter users experienced lower infection rates compared with foley or indwelling catheter users and was linked to improved independence¹.

1. Newman DK, Willson MM. Review of intermittent catheterization and current best practices. Urologic nursing. 2011 Jan-Feb 2011;31(1):12-28, 48; quiz 29.

How often should my child catheterize?

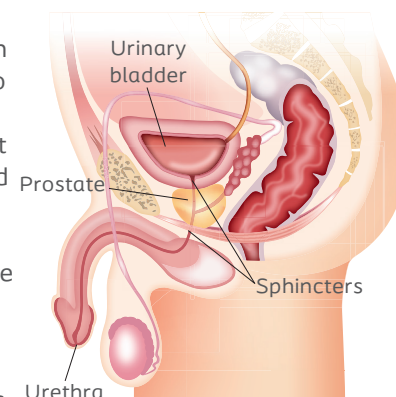
Frequency of catheterization will be prescribed by your physician or healthcare provider. For school-age children, it is very important that the prescribed catheterization schedule be continued throughout the school day. The school nurse should be informed about your child's bladder management schedule so that assistance is available if necessary. Intermittent catheterization supplies, like hand sanitizer, moist towelettes, or a leg mirror, along with a change of clothing, should be kept at school.

Medications

There are two types of medication that are sometimes prescribed to help stay dry between catheterizations. The first kind of medication helps hold in urine by tightening the bladder neck. The second kind of medication prevents bladder spasms and contractions to help reduce leakage between catheterizations. It is important that these medications be taken as prescribed. Any questions regarding medications should be discussed with your healthcare provider.

Can my child self-catheterize?

If your child has good dexterity, coordination, and an understanding of the procedure, he may be ready to self-catheterize. Children as young as four years old have been taught self-catheterization. It is important to note that readiness is determined by the child and should not be forced too early. Your child will be evaluated by a healthcare professional, and if your child is ready to learn the procedure, your healthcare provider can help you and your child learn intermittent catheterization.



Boys may struggle with inserting the catheter past a tight sphincter. It will take practice for you or your child to learn how to catheterize. However, it is important to remember that you are not alone. While it may take practice, many children learn how to self-catheterize, which can help them feel more confident and independent.



Caring for a child with spina bifida?

Scan the QR code with your smartphone camera to hear inspiring stories, advice, and encouragement from other families affected by spina bifida and neurogenic bladder and bowel, or visit coloplastcareus.buzzsprout.com

Intermittent catheterization instructions for boys

Please refer to product labeling for complete product instructions for use, contraindications, warnings, precautions and adverse events.

Step 1

Inspect catheter before use. Do not use product if device or packaging is damaged. Don't touch any part of the catheter that enters the body, since this can contaminate the catheter.

Step 2

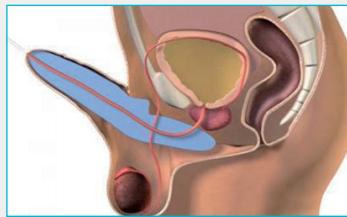
Wash hands with soap and water, or use an alcohol-based hand sanitizer.

Step 3

With the guidance of your healthcare provider, determine which catheterization position will be best (sitting, standing, lying down).

Step 4

If using a SpeediCath® hydrophilic-coated catheter, no additional lubricant is needed. If using an uncoated catheter, a water-soluble lubricant is recommended. If using an uncoated product, lubricate the entire length of the catheter and avoid touching any part of the catheter that enters the body (to reduce transferring bacteria).



Step 5

Hold the penis upright so that the urethral opening is pointing towards the sky and is visible to both the caregiver and/or child if they are catheterizing themselves. This helps the urethra form a U-shape, making catheterization easier.



Step 6

Retract the foreskin of the penis if it is uncircumcised. Wash the penis from the opening (tip) to the base of the glans (the round part forming the end of the penis) with a moist towelette, swab or baby wipe. Wash in a circular motion starting at the tip and working outward. Use each towelette or swab only once. Reuse of the same towelette, wipe or swab can spread germs. Never wash back and forth over the urethral opening.

Step 7

While holding the penis upright, insert the catheter gently. The child may feel some resistance just before reaching the bladder. Do not push the catheter in and out if resistance is met. Rather, hold the catheter and continue to advance it slowly, using gentle but firm pressure, until the sphincter relaxes.



Step 8

Sometimes having your child take a deep breath and slowly let it out helps. Continue to insert the catheter until urine begins to flow, and insert the catheter approximately ½ inch farther. Once urine is flowing, point the penis down toward the toilet or urine receptacle.



Step 9

Begin to withdraw the catheter slowly while slightly rotating it. Stop briefly each time more urine drains out.

Step 10

Throw away the catheter after using it and wash your hands.

For video guidance, watch instructional SpeediCath® videos at:
[BladderGuides.ColoplastCare.us](https://www.coloplast.com/coloplastcare/bladderguides)



Scan the QR code with your phone's camera for instructional how-to-use videos for children

These are general guidelines meant to help you with typical questions. Each person's situation is unique, and risks, outcomes, experience, and results may vary. You should follow the specific instructions by your healthcare team for you and the product you are using.

Coloplast does not practice medicine. The recommendations and information in this material are not medical advice. Contact your healthcare professional for personal medical advice or diagnosis.

SpeediCath® catheters are prescribed for use by pediatric patients (neonates to age 21) and adults who require bladder drainage due to chronic urine retention or post void residual volume (PVR). Before use, carefully read all of the instructions. Call your doctor if you think you have a UTI or can't pass the catheter into the bladder. For more information regarding risks, potential complications and product support, call Coloplast Corp. at 1-866-226-6362 and/or consult the company website at www.coloplast.us.

IF YOU THINK YOU HAVE A MEDICAL EMERGENCY, CALL 911.

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