

Patient Diagnosis Resource for CHRONIC CYSTITIS

Your Diagnosis

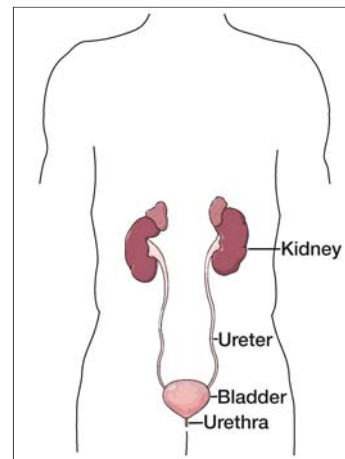
Your doctor has determined that you have chronic cystitis, a repeated or prolonged form of urinary tract infection (UTI) that causes inflammation of the bladder.

About the Condition

The bladder is a stretchable oval chamber in the lower abdomen that is part of the urinary tract, which also includes the kidneys, ureters and urethra. Its main purpose is to store urine. The kidneys remove extra water and wastes from the blood and convert them to urine. The ureters are narrow tubes that transport urine from the kidneys to the bladder. Urine is emptied out of the body from the bladder through the urethra.

Cystitis is an infection caused by bacteria that enter the opening of the urethra and spread to the bladder. Chronic, or persistent, cystitis occurs when a patient does not respond to the usual treatment for cystitis, has a case that lasts longer than 2 weeks, or has repeated cases of infection more than twice in a 6-month span. In non-chronic, or acute, cases of cystitis, symptoms normally improve within 2 days after treatment begins.

The bacteria that cause cystitis enter the urethral opening from the skin around the anus or genitals in various ways, such as wiping from back to front after using the toilet or having a urinary catheter, or tube, placed in the bladder to drain urine from the body. Sexual intercourse can trigger UTIs in some women, as can the use of a diaphragm for birth control. Being pregnant or having certain diseases such as diabetes, HIV, cancer and sickle cell anemia also increases the risk of developing cystitis, as does having urinary tract abnormalities or blockages or prostate enlargement (benign prostatic hyperplasia).



The most common symptoms of chronic cystitis include burning or pain when urinating; a feeling of pressure in the lower abdomen; cloudy, bloody or odd-smelling urine; frequent and sometimes intense urges to urinate; fever and general discomfort; lower back or abdominal pain and an inability to urinate despite the urge to go. Other symptoms may include incontinence (involuntary loss of urine), nausea and vomiting, and mental changes or confusion in the elderly.

Treatment Options

Chronic cystitis should be treated thoroughly because it can progress to a kidney infection if left untreated. Kidney infection is a serious condition that requires immediate treatment and can cause reduced kidney function or even death. Chronic cystitis can also cause sepsis, a severe and often life-threatening illness marked by a bacterial infection of the bloodstream.

Antibiotics are used to kill the bacteria that cause cystitis. The type of drug prescribed and the length of treatment depend on the type of bacteria and other factors such as your age, sex and general health condition. Medications used include amoxicillin, trimethoprim-sulfamethoxazole, fluoroquinolones, tetracycline, nitrofurantoin and doxycycline. Frequently, low-dose antibiotics may be prescribed for 6 months to 2 years to prevent repeat infections. In some cases, physicians recommend single antibiotic doses to be taken after sexual intercourse as a preventive measure.

To make sure your infection clears up completely and prevent a kidney infection, you should take your medication as directed and finish the entire supply, even though you may feel better before you have completed your prescription.

If a urinary tract abnormality is causing the chronic cystitis, corrective surgery may also be needed.

Your doctor may schedule a follow-up exam to test your urine after treatment is finished to confirm that the bacterial infection is gone. Be sure to call your doctor if your symptoms worsen or you develop additional symptoms.

What You Can Do

To help reduce symptoms of chronic cystitis, you should drink plenty of water and avoid coffee and other caffeinated drinks, citrus juices, spicy foods, alcohol and smoking. You can use a heating pad on your lower abdomen and take an over-the-counter (OTC) pain medication containing ibuprofen or acetaminophen to ease the pain, as well as sit in a shallow tub of hot water to help with burning of the urethral opening.

In addition, you may want to take the OTC medication phenazopyridine for pain relief. Although you will feel a masking of symptoms with this drug, it is important to remember that is not an antibiotic and it will not cure your infection. Be sure to follow the package instructions carefully, and talk with your doctor about what prescription and OTC medications are best for your individual situation.

Steps you can take to prevent future UTIs include:

- ◆ Drinking at least 6 to 8 glasses of liquids each day, preferably water
- ◆ Urinating frequently and going when you first feel the urge
- ◆ Taking showers instead of baths and avoiding bubble bath during a tub bath
- ◆ Wiping from front to back after using the toilet, especially after bowel movements
- ◆ Drinking cranberry or blueberry juice sweetened with fruit juice (rather than sugar)
- ◆ Avoiding scented toilet paper and feminine products
- ◆ Wearing cotton underwear and avoiding tight-fitting jeans and nylon underwear
- ◆ Cleansing the genital area before sexual intercourse and urinating afterward
- ◆ Making sure your urinary catheter is changed or cleaned often if you use one

Additional Resources

American Foundation for Urologic Disease, 800.828.7866, www.afud.org
Urology Channel, www.urologychannel.com

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