

Clean intermittent self-catheterisation (CISC) for females

Other formats

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What is clean intermittent self-catheterisation?

Clean intermittent self-catheterisation (CISC) is the procedure of inserting a catheter to drain the urine from your bladder when it is unable to do this naturally – this is called urinary retention. A catheter is a thin plastic tube specifically designed to empty the bladder. Unlike a permanent catheter which stays in your bladder for longer periods of time, the intermittent catheters are removed as soon as the bladder is empty.

CISC is easy to learn and is safe to do at home, work or when travelling. The catheters are single use and need to be disposed of after use.

Why do I have to self-catheterise?

There are many reasons why people are unable to naturally empty their bladders and need to use a catheter. These include:

- neurological conditions
- poor bladder tone (weak bladder muscle)
- bladder hypertrophy (overstretched bladder)
- atonic bladder (bladder muscle lacking ability to contract and push urine out)
- pelvic surgery
- urethral obstruction (vaginal or bladder prolapse)

To determine the cause of urinary retention, tests will have to be done. Once it is confirmed, a treatment plan will be made for you. This could include learning CISC.

Alternative to CISC

If CISC does not seem like something you can do, there are alternative solutions. You may have an indwelling urethral catheter (a catheter held in your bladder by a balloon) to drain your urine for you or a long term supra-pubic catheter (a catheter inserted into your bladder through the abdomen). Both of which will either be draining into a bag attached to your leg or if you are suitable, have a tap attached to the end of the catheter with which you will drain your bladder when needed. These catheters will need changing every three months by the community nurses or the bladder and bowel specialist nurses.

How do I know when I need to catheterise?

The frequency of performing CISC will depend on what your residual is (how much urine is left in your bladder). Your nurse will give you information regarding this. However, on occasion you may have to perform extra catheterisations.

How do I perform clean intermittent self-catheterisation?

To learn how to perform CISC, you will have an appointment with the urology clinical nurse specialist or the bladder and bowel specialist nurses. In this appointment the nurse will help you to identify your urethra (the hole through which urine passes) and teach you the technique for inserting a catheter and successfully draining your bladder of residual urine. After which you will perform self-catheterisation with the supervision of the nurse. This is to ensure you are able to do this when you go home.

In addition to learning how to identify your urethra, the technique and performing CISC, your nurse will discuss with you how to adjust the frequency of CISC by the residuals you drain. The frequency can range from once a day to four times a day depending on your individual situation.

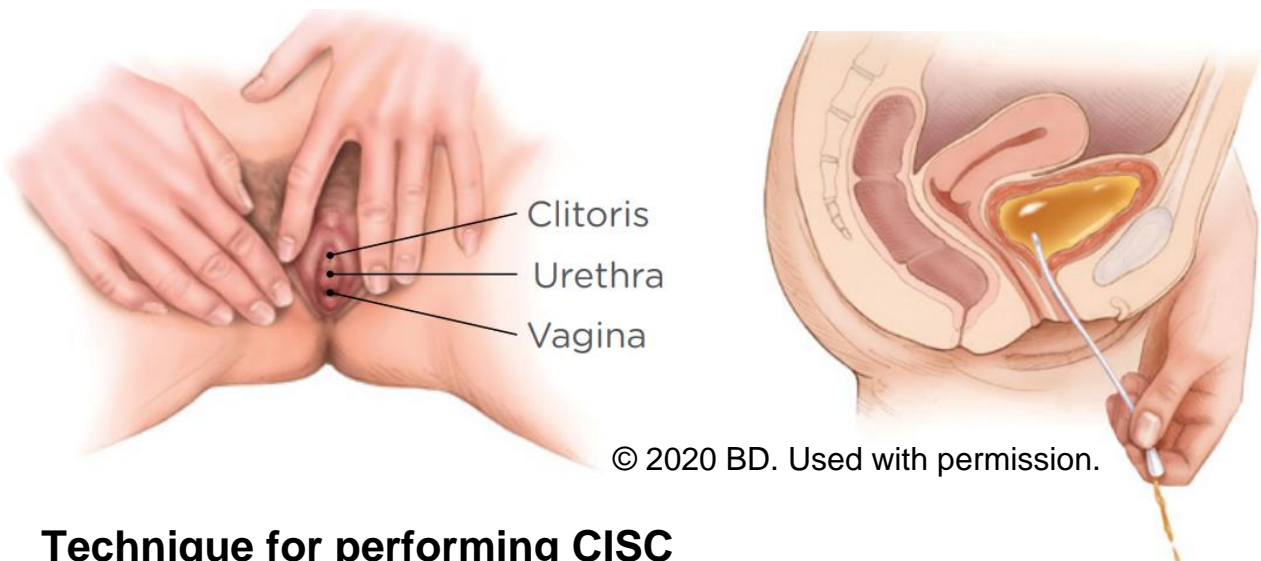
Advantages of performing CISC

- not having a permanent catheter
- giving you control back
- protecting your kidneys
- reducing the risk of urinary tract infections (UTI's)
- improving your quality of life and comfort
- reducing the risk of complications and diseases
- improving your continence
- improving bladder health
- reducing residual urine
- no interference in your sex life

Possible side effects of treatment

Whilst CISC has many benefits, there are risks and side effects from doing so. They include:

- urinary tract infections (UTIs) whilst uncommon with good personal hygiene – UTIs are still possible you may need antibiotics from your GP
- spots of blood on catheter removal – this is not usually serious and is temporary. If the bleeding is heavy, persists or has clots, contact your specialist nurse for advice. If you are taking blood thinning medications, this risk may be higher.
- slight discomfort – performing CISC should not be painful; at first it may feel unusual and leave a slight sensation, but this should improve with time and practice



Technique for performing CISC

1. Follow the preparation for the catheter you have chosen.
2. Wash your hands – hand hygiene is vital.
3. Make yourself comfortable – could be sitting, standing or lying down, just ensure you have a receptacle for the urine.
4. Remove your underwear and any clothes in the way.
5. Identify your urethra, you will be taught this in your appointment with the CNS (see picture above)
 - use a light and/or mirror to help identify your urethra
 - if you are struggling to identify your urethra, pull gently upwards on your labia (inner and outer coverings aka “lips”) and it will make it easier to identify, this will be taught in your appointment.
6. Pull your labia back and clean the area with water or an unscented baby wipe – always wipe from **top to bottom** to reduce the risk of infection.
7. Hold the catheter in your **dominant** hand and in a way that does not touch the tube – **do not touch the tube**. This will be covered further in your appointment.

8. Slowly insert the catheter into your urethra – if you do not get any urine, you are most likely in the vagina. This is fine, just remove it and use a new catheter to insert into the urethra.
9. When the urine slows to a finish, **slowly** pull the catheter out, stopping if urine drains again.
10. Dispose of catheter and urine if needed and **wash your hands**.

What is the prognosis or expected outcome of treatment?

Performing CISC can be either a short-term solution whilst waiting for your bladder to recover or a long-term solution for when your bladder condition is irreversible.

You may find that the residuals you are draining are increasing or reducing over time. If this occurs, refer to the information given on residuals and frequency of CISC. This will allow you to adjust the frequency yourself.

If you have any questions, please contact your specialist nurse.

Are there any possible complications?

- Trauma – when first catheterising, some trauma may occur to your urethra. The risk reduces if you take your time, take deep breaths and insert the catheter gently.
- Difficulty removing the catheter – this is uncommon but can occur if the muscles are tense. Try to relax for 5-10 minutes and try again. If you are still having problems, coughing can help relax the muscles. **Never force the catheter and do not cut the catheter.**

Follow up

When you start CISC at home for the first time, your specialist nurse will follow you up over the telephone. They will want to know the frequency of which you are self-catheterising, the residual volume you are draining, how you are managing with self-catheterisation and if you would like any further follow-ups.

If you are happy with the procedure and the follow up you have had, you will not have another one. Throughout the entirety of your care, should you require any help, you will have the telephone number of your specialist nurses who will be available to answer your questions at any time.

Depending on which catheter you choose, we may register you with the home delivery service at your appointment. They will deliver the catheters to your home and will require a repeat prescription from your GP. This could be arranged between the delivery company and your GP on instruction from your specialist nurse. Your consent for the delivery company may be required which will be explained in more detail at your appointment.

Further information

Urology Specialist Nurses – 01271 311 877

Useful websites:

www.bladderandbowel.org

www.cobfoundation.org

www.patients-association.com

ww.bladderandbowelfoundation.org

References

<https://www.bladderandbowel.org/bladder/bladder-conditions-and-symptoms/urinary-retention/>

<https://www.niddk.nih.gov/health-information/urologic-diseases/urinary-retention>

<https://www.wellspect.us/bladder/the-urinary-system/common-urinary-issues/retention>

<https://www.ncbi.nlm.nih.gov/pubmed/12235537>

<https://www.nursingtimes.net/clinical-archive/continence/common-problems-with-intermittent-self-catheterisation-12-10-2010/>

www.coloplastcharter.co.uk – Coloplast Catheters

www.wellspect.com – Lofric Catheters

www.hollister.co.uk – VaPro Catheters

www.bardmedical.co.uk – Hydrosil Catheters

PALS

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