

**Measures for patients to take which may reduce the risk of recurrent urinary tract infections (especially for women)**

1. Ensure a good fluid intake (ideally water as well as tea and coffee).
2. Wash and dry your hands thoroughly after going to the toilet.

When going to the toilet, use separate toilet paper to clean the front (vaginal) area and the back/bottom area. Wash these areas daily.

Be careful **not** to bring soiled toilet paper forward into the front (vaginal) area.

3. Ensure regular, unhurried and frequent passing of urine throughout the day, before and after sexual intercourse and before going to bed.
4. Have a good varied diet including fruit and vegetables.  
Treat constipation if it occurs - your doctor or practice nurse can advise.  
Use soft, absorbent toilet tissue.
5. Avoid tight underclothes or tight trousers. Preferably use loose cotton pants.
6. After a bath or shower, wash off all soap or gel and dry yourself thoroughly.

When in a bath, minimise or avoid the following:-

- Use of bubble baths.
- Adding disinfectant or detergent liquid to baths.
- Washing hair while in a bath.
- Allowing bars of soap to soak in the bath for long lengths of time
- Use of heavily scented soap.
- Soaking in an oily bath unless this has been medically advised (eg for eczema).

If clothes are washed or soaked in the bath, make sure the bath is thoroughly rinsed with running water afterwards to remove all traces of washing powder, cleaning solutions, detergents or creams, as these may be irritant.

7. Wash and dry underclothes regularly and ensure detergents are well washed out of them.
8. Avoid vaginal douches and use of disinfectants and deodorants on the vaginal area.

NB Talcum powder can sometimes irritate the skin and clog pores. Preferably use in small amounts.

9. Use of cranberry juice may be considered (though its value is controversial).

**For the elderly**, investigation and treatment for urine infections are usually only indicated if some of the following are present:-

- discomfort or burning on passing urine, frequency of passing urine, new incontinence, abdominal and/or back or loin pain, raised temperature.

If the above are not present and you are well, antibiotics may not be required (even if dipstick or laboratory results are 'positive') Discuss with your doctor.

**For patients with dementia**, it may be difficult to be sure whether some of the above signs and symptoms are present. If the patient is more confused than normal (or he/she has a raised temperature), discuss with their doctor.

**Following a course of antibiotics**, you may develop a yeast (Candida) vaginal infection. If this occurs, you can apply an anti-candida cream or pessary. Where necessary, anti-candida treatment may also be taken by mouth. Discuss with your local chemist or your doctor/practice nurse.

You may also consider taking a bio-yogurt daily during antibiotic treatment and for several days afterwards. There is some evidence that it may help prevent diarrhoea, though this is controversial

### **For close contacts of children**

Consider whether threadworms are possible and need treatment -- they can give pus cells in urine samples which can cause confusion with urinary infections.