

URINARY TRACT INFECTION

DEFINITION

A urinary tract infection (UTI) is an infection of the bladder (cystitis) and sometimes the kidneys (pyelonephritis). It is important to treat UTIs so that the kidneys are not damaged.

DIAGNOSTIC FINDINGS

Various symptoms are possible:

- Painful urination
- Bladder frequency or urgency
- Daytime and nighttime wetting
- Dribbling
- Foul-smelling urine
- Fever
- Stomachaches
- Vomiting

CAUSE

Urinary tract infections are caused by bacteria. The bacteria enter the bladder by traveling up the urethra. In general, the urethra is protected, but if the opening of the urethra (or the vulva in girls) is irritated, bacteria can grow there. Common irritants are bubble bath, shampoo, or fecal soiling. A rare cause of UTIs (1% in girls and 5% in boys) is obstruction of the urinary tract that leads to incomplete emptying of the bladder.

HOME TREATMENT

Antibiotics. Your child's antibiotic is _____. Your child's dose is _____ given _____ times per day during waking hours for _____ days. This medicine will kill the bacteria that are causing the UTI.

If the medicine is liquid, store it in the refrigerator and shake the bottle well before measuring each dose. Use a measuring spoon to be sure that you give the right amount.

Try not to forget any of the doses. If your child goes to school or a babysitter, arrange for someone to give the afternoon dose. Give the medicine until all the pills are gone or the bottle is empty. Even though your child will feel better in a few days, give the antibiotic for the full 10 days to keep the UTI from flaring up.

Extra Fluids. Encourage your child to drink extra fluids to help clear the infection.

Fever and Pain Relief. Acetaminophen may be given if your child develops a fever over 101°F (38.4°C) or if urination is quite painful.

Medical Follow-up. Two days after your child begins antibiotics, it is important to contact us to find out the results of the urine culture and make

sure that your child's symptoms are responding to the antibiotic.

Two weeks after your initial visit we will want to see your child for another urine culture. Because the chances are high that your daughter will develop a second infection (occurs in 50% of cases), we would like to recheck the urine at the following times: 1, 4, and 12 months after the first infection is cleared up.

Instructions for Collecting a Midstream, Clean-Catch Urine Specimen at Home. If you are told to bring in a urine sample, try to collect the first one in the morning. Use a sterile jar.

Wash off the genital area several times with cotton balls and warm water. Have your child then sit on the toilet seat with her legs spread widely so that the labia (skin fold of the vagina) don't touch. Have her start to urinate into the toilet, and then place the clean container directly in line with the urine stream. Remove it after you have collected a few ounces but before she stops. The first or last ounce that comes out of the bladder may be contaminated.

Keep the urine in the refrigerator until you take it to the office. Bring it in chilled (for example, put the jar in a plastic bag with some ice).

PREVENTION OF UTIs

- Wash the genital area with water, not soap.
- Don't put bubble bath, shampoo, or other soaps into the bath water. Don't let a bar of soap float around the tub.
- Keep bath time less than 15 minutes. Have your child urinate after baths.
- Teach your daughter to wipe herself correctly from front to back, especially after a bowel movement.
- Try not to let your child become constipated.
- Encourage her to drink enough fluids each day to keep the urine light colored.
- Encourage her to urinate at least every 3 to 4 hours during the day and not "hold back."
- Have her wear loose cotton underpants. Discourage wearing underpants at night.

CALL OUR OFFICE

IMMEDIATELY if

- Fever or painful urination is not gone after your child has taken antibiotics for 48 hours.
- Your child is able to pass only very small amounts of urine.
- The urine becomes bloody.
- Your child starts acting very sick.

Within 24 hours if

- Your child refuses to take the antibiotic.
- Your child gets worse while taking the medicine.
- You have other concerns or questions.