Clean Intermittent Catheterization for Girls

If your daughter cannot empty her bladder completely, or has a problem with urine leakage, a catheterization program may need to be started. These problems are commonly seen in children with spina bifida, spinal cord injuries, or some urinary tract defects.

Here is information from the American Academy of Pediatrics that will help you understand the basics of clean intermittent catherization (CIC). This information does not take the place of one-to-one teaching. Contact your child's doctor or other health care professional if you have any questions.

What is clean intermittent catherization (CIC)?

Clean intermittent catheterization (CIC) is a technique used to remove urine from the bladder. This is done most often by placing a thin, flexible tube (catheter) through the urethra into the bladder to drain the urine. Some patients drain their bladder through a surgically constructed channel from their abdomen to their bladder, bypassing their urethra.

Why is CIC important?

Urine is the waste product produced by the kidneys. The bladder is the container in the body that holds the urine until it is emptied. The human body needs to empty its bladder of urine several times a day. The bladder can be drained by urinating or by using a catheter.

If your child needs CIC, your child's doctor will tell you how often your child's bladder should be emptied. It can be emptied as often as every 2 to 4 hours, depending on your child's condition.

CIC is especially important because it

- Reduces accidents (wetting). It lets your child empty her bladder so that she has fewer accidents. Older children may no longer need to wear diapers. It also helps stop the odor and skin problems that come from being wet with urine.
- Reduces the risk of urinary tract infections. Regularly emptying the bladder reduces the risk of urinary tract infections caused by bacteria that stay in the bladder too long. (See "Signs and Symptoms of a Urinary Tract Infection" box.)
- Reduces the risk of reflux and potentially of back pressure on the kidneys. Reflux is a condition where urine from the bladder goes back up to the kidneys. This can cause serious kidney damage.

What supplies are needed?

It is best to have all your supplies organized and ready when you need them. Keep the following items in a clean, dry container such as a plastic shoebox or cosmetic case:

- Catheters. Your child's doctor will prescribe the appropriate catheter size for your child.
- Disposable wipes or a washcloth. Your child's genitalia will need to be cleaned before CIC.
- **Lubricant.** Use only a water-soluble (able to be dissolved in water) lubricant. You can buy the lubricant at pharmacies or drugstores. Do not use oil-based lubricants, such as petroleum jelly, because they do not dissolve in water.

- **Container.** You may need a container to drain your child's urine into, if you are not doing her CICs on the toilet or if you need to record how much she drains.
- · Syringe. You will need a syringe for cleaning the catheter.

How is CIC done?

Before you begin, have your box of supplies within reach. Next, wash your hands with soap and water, then dry them. You can also use a waterless cleaner, such as an antibacterial hand cleanser that does not require water. Then

- Place your daughter onto her back or position her on the toilet (Figure 1) or in her wheelchair. Practice CIC with her in the position you will be using most often. If she is on the toilet, separate her legs wide enough to be able to clearly see her urethra. If she is doing her CICs herself, she will practice finding her urethra by touch. When your daughter is learning to catheterize herself, she can use a mirror to see where her urethra is located.
- Clean your daughter's genitalia with a washcloth or disposable wipe. Separate her labia and wipe the area thoroughly from front to back.
- Figure 1. Girl seated on a

toilet and using a catheter.

- One end of the catheter has holes. Place a generous amount of the water-soluble lubricant onto the end with the holes.
- Place the other end of the catheter into a container or let it drain into the toilet.
- Find your daughter's urethra (Figure 2). Gently insert the lubricated end of the catheter into her urethra about 2 to 3 inches. It may become slightly more difficult to insert just before entering her bladder. Pushback is possible because a muscle called the *sphincter* sits at the opening of the bladder and is naturally tightly contracted. Your daughter's *sphincter* will relax as you continue to gently insert the catheter until you reach her bladder and see urine flow.

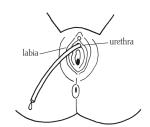


Figure 2. Location of the urethra in a girl.

- Once the catheter is in your daughter's bladder, hold it there until the urine flow stops. Then move the catheter slightly, or insert it a little more, to see whether the flow continues. Gently press onto your daughter's lower abdomen with your hand, or ask your daughter to lean forward, to be certain there is no more urine in her bladder.
- Slowly remove the catheter, holding your finger at the tip or pinching the catheter end before removing the final portion. Pull the catheter out in a downward movement to prevent backflow of urine.
- Wash your hands. Clean and store your catheter as your daughter's doctor has directed.

Signs and Symptoms of a Urinary Tract Infection

Call your child's doctor if your child has any of the following signs and symptoms of a urinary tract infection:

- · Fever greater than 101°F
- · Abdominal or back pain
- · Pain or burning during CIC
- · Less urine than usual from CIC
- · Frequent need to urinate or catheterize
- · Leaking of urine between CICs (more than usual)
- · Cloudy or hazy urine with a strong odor
- · Bloody urine

How do I clean CIC supplies?

- It is very important that you keep your child's CIC supplies clean. Make sure you wash your hands often and well whenever you perform CIC. If you are using disposable catheters, throw the catheters away after each use.
- If you have reusable (metal or latex-free) catheters, you should wash them with soap and water after each use. You can use a syringe to squirt soapy water and plain water through the catheters. Rinse them completely and allow them to dry. After they are dry, store them inside a plastic bag, traveling toothbrush holder, or any other clean container.
- Throw catheters away as soon as they become brittle or lose their flexibility or as soon as their holes become rough.

Remember

It may take a while to get used to doing CIC, but keep in mind that as you and your child become more used to this process, it will become easier. Talk with your child to explain exactly what you are doing. If your child is not doing CIC on her own, explain that when she is old enough, she should be able to do CIC without your help. Encourage your child to be independent. And remember, it is natural for you or your child to have questions. Feel free to talk with your child's doctor about any questions or problems that you or your child is having with CIC. Eventually, CIC can help make daily life easier and better for you and your child.





The American Academy of Pediatrics (AAP) is an organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

