

Practice Nurse IPC Forum

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Agenda

- Frimley Lab -Minimising sample rejection in Primary Care
- HCAI data (England) 2021-2023 trends
- Urinary Tract Infections – Surrey perspective
- UTI treatment – NICE guidelines
- UTI prevention – what can you do
- Topics for next Forum

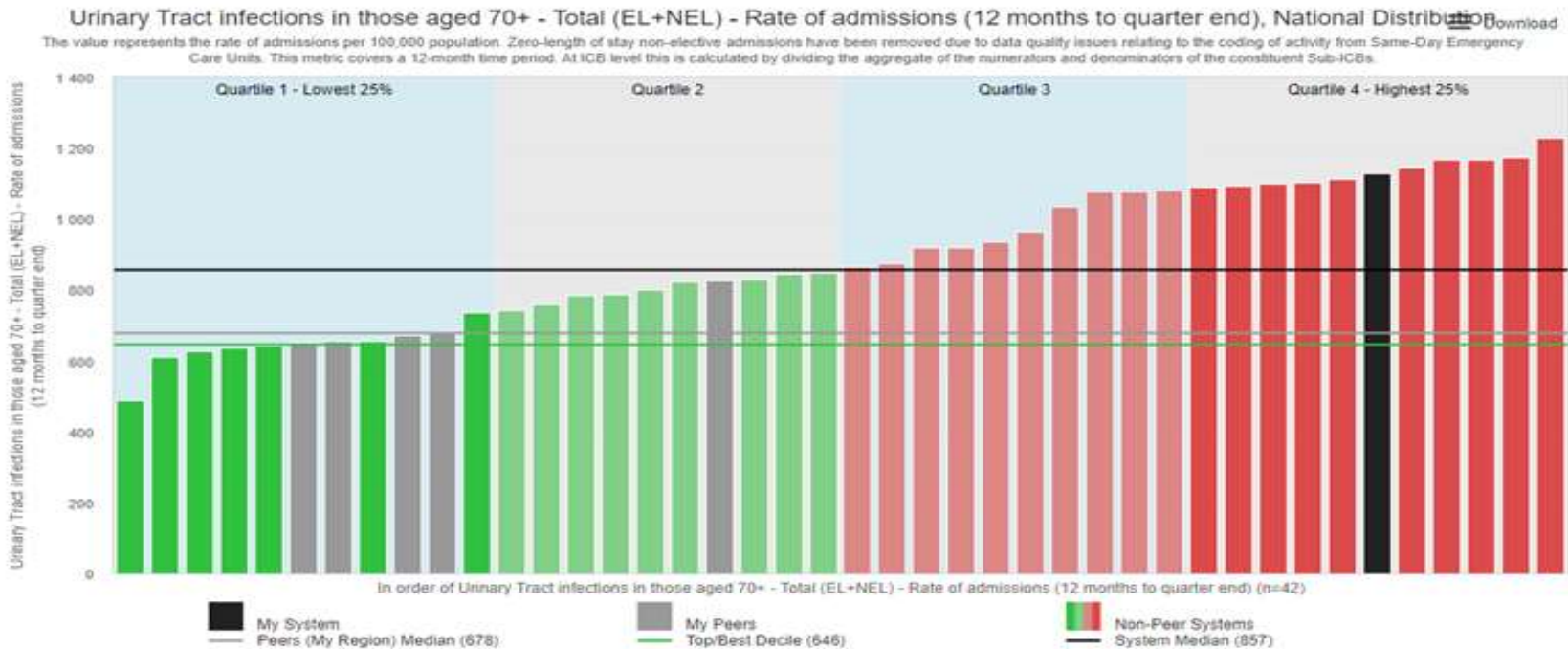






Urinary Tract Infections - UTI

- Did you know – Surrey Heartlands ICS has higher hospital admissions for UTI's in the over 70's than other ICB's
- These patients are mostly admitted from their own home
- Why might this be?





UTI Prevention & Education – What can you do?

- Be aware of patients you see who might be at risk – consider patient information as per below – consider displaying in waiting room or discussing with Patient Participation Group?

General Advice:

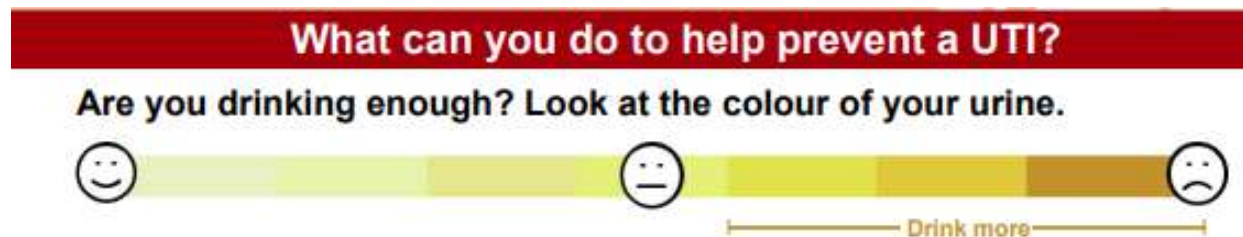
- [TARGET UTI Leaflet All Ages V1.1 DOC UKHSA.pdf \(rcgp.org.uk\)](#)

General Advice for older adults and carers:

- [TARGET UTI leaflet for older adults V2.4 COVID-19 advice UKHSA.pdf \(rcgp.org.uk\)](#)

For issue and use by a clinician in a patient consultation to explain diagnosis, treatment, self care advice and follow up advice:

- [TARGET TYI-UTI leaflet V23.5.pdf \(rcgp.org.uk\)](#)





UTI Information Leaflet for Older Adults and Carers

TARGET
URINARY TRACT INFECTIONS
A leaflet for older adults and carers

WHAT IS A URINE INFECTION?
A urine infection occurs when bacteria in any part of the urine system cause symptoms.

If a urine test finds bacteria but you are otherwise well, do not worry, this is common, and antibiotics are not usually needed. However, severe urine infections can be life threatening.

WHAT YOU CAN DO TO HELP PREVENT A URINE INFECTION?
Are you drinking enough? Look at the colour of your urine.

Drink more

- Drink enough fluid (6-8 glasses) so that you pass pale coloured urine regularly during the day, and to avoid feeling thirsty, especially during hot weather
- Avoid drinking too many fizzy drinks or alcohol
- There is no proven benefit of cranberry products
- Prevent constipation; ask for advice if needed
- Maintain good control of diabetes

Stop bacteria spreading from your bowel into you

- Wipe genitals from front to back after using the toilet
- Change pads and clean genitals if soiled
- Keep the genital area clean and dry; avoid scented products
- Wash genital area with water before and after sex

Speak to your pharmacist about referral to a GP or other treatments.

WHAT SIGNS AND SYMPTOMS SHOULD YOU LOOK OUT FOR?
Consider these symptoms if you have a urinary catheter:

- Shivering or shaking
- High or low temperature
- Kidney pain in your back just under the ribs

New or worsening signs of urine infection in all people:

- Pain or burning when passing urine
- High or low temperature (also a sign of COVID-19 – see below)
- Shivering or shaking
- Urgency (feeling the need to urinate immediately)
- Pain in your lower tummy above pubic area
- Incontinence (wetting yourself more often than usual)
- Passing urine more often than usual
- Cloudy urine, or visible blood in your urine
- Confusion, change in behaviour, or unsteadiness on feet

CONSIDER OTHER THINGS THAT MAY ALSO CAUSE CONFUSION

- Pain
- Constipation
- Poor sleep
- Low mood
- Not drinking enough
- Side effects of medicine
- Other infection
- Change in your routine or home environment
- Poor diet

ALWAYS CONSIDER COVID-19

If you think you may have COVID-19 then please visit <http://www.gov.uk/coronavirus> or <http://www.nhs.uk> for the latest guidance and information

WHEN SHOULD YOU GET HELP?
The following symptoms are possible signs of serious infection and should be assessed urgently

Contact your GP Practice or contact NHS 111 (England), NHS 24 (Scotland dial 111), NHS direct (Wales dial 0845 4647), or GP practice (NI)

Shivering, chills and muscle pain		Feeling very confused, drowsy or slurred speech	
Not passing urine all day		Temperature is above 38°C* or less than 36°C	
Trouble breathing		Kidney pain in your back just under the ribs	
Visible blood in your urine		Very cold skin	

Symptoms are getting a lot worse, or not starting to improve within 2 days of starting antibiotics.

Trust your instincts, ask for advice if you are not sure how urgent the symptoms are.

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WHAT CAN YOU DO TO HELP FEEL BETTER?

- Drink enough fluid so that you pass urine regularly during the day, especially during hot weather
- Take paracetamol regularly, up to 4 times daily to relieve fever and pain
- There is no proven benefit of cranberry products or cystitis sachets
- If you're worried about wetting yourself, see your doctor or nurse for advice
- Ask for advice from your pharmacist/carer
- Drink enough fluids to avoid feeling thirsty and to keep your urine pale

WHAT MIGHT YOUR PHARMACIST / NURSE / DOCTOR DO?

- If your symptoms are likely to get better on their own you may receive self-care advice and pain relief
- Ask you to drink more fluids
- Ask you for a urine sample
- You may be given an antibiotic that you can use if your symptoms don't improve or you start to feel worse

ADVICE ABOUT ANTIBIOTICS

- Antibiotics can be life saving for serious urine infections, but antibiotics are not always needed for all urinary symptoms
- Antibiotics may make the bacteria in your bowel resistant to antibiotics making UTIs difficult to treat in the future
- Common side effects of taking antibiotics include thrush, rashes, vomiting and diarrhoea; ask for advice if you are worried
- Keep antibiotics working, only take them when your healthcare professional advises them

Download at
[Leaflets to discuss with patients: UTI Leaflet - Older Adults \(rcgp.org.uk\)](http://rcgp.org.uk)

Available in multiple languages

Developed by RCGP TARGET Antibiotics





In Consultation Patient Leaflet on UTIs in women <65 years

Developed by RCGP
TARGET Antibiotics

Self Care
Advice

UTI Prevention
Advice

TARGET **NHS**
TREATING YOUR INFECTION – URINARY TRACT INFECTION (UTI)
 For women under 65 years with suspected lower urinary tract infections (UTIs) or lower recurrent UTIs (cystitis or urethritis)

Possible urinary signs & symptoms	The outcome	Recommended care	Types of urinary tract infection
<p>Key signs/symptoms: Dysuria: Burning pain when passing urine (wee) New nocturia: Needing to pass urine in the night Cloudy urine: Visible cloudy colour when passing urine</p> <p>Other signs/symptoms to consider: Frequency: Passing urine more often than usual Urgency: Feeling the need to pass urine immediately Haematuria: Blood in your urine Suprapubic pain: Pain in your lower tummy</p> <p>Other things to consider: Recent sexual history • Inflammation due to sexual activity can feel similar to the symptoms of a UTI • Some sexually transmitted infections (STIs) can have symptoms similar to those of a UTI Changes during menopause • Some changes during the menopause can have symptoms similar to those of a UTI</p>	<p>Non-pregnant women: <input type="checkbox"/> If none or only one of: dysuria, new nocturia, cloudy urine; AND/OR vaginal discharge • UTI much less likely • You may need a urine test to check for a UTI • Antibiotics less likely to help • Usually lasts 5 to 7 days</p> <p><input type="checkbox"/> If 2 or more of: dysuria, new nocturia, cloudy urine; OR bacteria detected in urine; AND NO vaginal discharge • UTI more likely; antibiotics should help • You should start to improve within 48 hours • Symptoms usually last 3 days</p> <p>Pregnant women: Always request urine culture <input type="checkbox"/> If suspected UTI</p>	<p><input type="checkbox"/> Self-care and pain relief. • Symptoms may get better on their own <input type="checkbox"/> Delayed or backup prescription with self-care and pain relief Start antibiotics if symptoms: • Get worse • Do not get a little better with self-care within 48 hours</p> <p><input type="checkbox"/> Immediate antibiotic prescription plus self-care</p> <p><input type="checkbox"/> If mild symptoms, delayed or back-up antibiotic prescription plus self-care</p> <p><input type="checkbox"/> Immediate antibiotic prescription plus self-care</p>	<p>UTIs are caused by bacteria getting into your urethra or bladder, usually from your gut. Infections may occur in different parts of the urinary tract.</p> <p>Kidneys (make urine) Infection in the upper urinary tract • Pyelonephritis (pie-lo-nef-right-is). Not covered in this leaflet and always needs antibiotics</p> <p>Bladder (stores urine) Infection in the lower urinary tract • Cystitis (sis-tight-is).</p> <p>Urethra (takes urine out of the body) Infection or inflammation in the urethra • Urethritis (your-ith-right-is)</p>
<p>If you think you may have COVID-19 then please visit http://www.gov.uk/coronavirus or http://www.nhs.uk for the latest guidance and information</p>			
Self-care to help yourself get better more quickly	Options to help prevent a UTI	Antibiotic resistance	When should you get help? Contact your GP practice or contact NHS
<ul style="list-style-type: none"> • Drink enough fluids to stop you feeling thirsty. Aim to drink 6 to 8 glasses • Avoid too much alcohol, fizzy drinks or caffeine that can irritate your bladder • Take paracetamol or ibuprofen at regular intervals for pain relief, if you have had no previous side effects • There is currently no evidence to support taking cranberry products or cystitis sachets to improve your symptoms • Consider the risk factors in the 'Options to help prevent UTI' column to reduce future UTIs 	<p>It may help you to consider these risk factors:</p> <ul style="list-style-type: none"> • Stop bacteria spreading from your bowel into your bladder. Wipe from front (vagina) to back (bottom) after using the toilet. • Avoid waiting to pass urine. Pass urine as soon as you need to. • Go for a wee after having sex to flush out any bacteria that may be near the opening to the urethra. • Wash the external vagina area with water before and after sex to wash away any bacteria that may be near the opening to the urethra. • Drink enough fluids to make sure you wee regularly throughout the day, especially during hot weather. <p>If you have a recurrent UTI, the following may help</p> <ul style="list-style-type: none"> • Cranberry products and D-mannose: There is some evidence to say that these work to help prevent recurrent UTI • After the menopause: Topical hormonal treatment may help; for example, vaginal pessaries. • Antibiotics at night or after sex may be considered 	<p>Antibiotics can be lifesaving. But antibiotics are not always needed for urinary symptoms.</p> <p>Antibiotics taken by mouth, for any reason, affect our gut bacteria making some resistant.</p> <p>This may make future UTI more difficult to treat</p> <p>Common side effects to taking antibiotics include thrush, rashes, vomiting and diarrhoea. Seek medical advice if you are worried.</p> <p>Keep antibiotics working; only take them when advised by a health professional. This way they are more likely to work for a future UTI.</p>	<p>The following symptoms are possible signs of serious infection and should be assessed urgently.</p> <p>Phone for advice if you are not sure how urgent the symptoms are.</p> <ol style="list-style-type: none"> 1. You have shivering, chills and muscle pain 2. You feel confused, or are very drowsy 3. You have not passed urine all day 4. You are vomiting 5. You see blood in your urine 6. Your temperature is above 38°C or less than 36°C. 7. You have kidney pain in your back just under the ribs 8. Your symptoms get worse 9. Your symptoms are not starting to improve within 48 hours of taking antibiotics

TARGET is operated by the UK Health Security Agency. Developed in collaboration with professional medical bodies. Version 23.5. Published: October 2017. Review October 2021. KAW18-07 © Crown copyright 2018. Keep Antibiotics Working

Outcomes and recommended care explained

Available in multiple languages

Safety netting advice

Key messages on Antibiotics

Download at [Leaflets to discuss with patients: UTI <65 Leaflet \(rcgp.org.uk\)](http://rcgp.org.uk)





Did you Know?

Flowchart for suspected UTI in catheterised adults or those over 65 years

Urinary signs/symptoms, abnormal temperature, non-specific signs of infection ^{1B+, 2B+, 3D, 4B-}

Yes ↓

Do not perform urine dipsticks: Dipsticks become more unreliable with increasing age over 65 years. By 80 years half of older adults in care, and **most** with a urinary catheter, will have bacteria present in the bladder/urine without an infection. This "asymptomatic bacteriuria" is not harmful, and although it causes a positive urine dipstick, antibiotics are not beneficial and may cause harm ^{5B+, 6A-, 7B+, 8C, 9A+}

[Diagnosis of urinary tract infections - quick reference tool for primary care \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)





Reference Flowcharts for UTI treatment

- Flowchart for women under 65 with suspected UTI
- Diagnostic points for men under 65 years
- Flow chart for suspected UTI in catheterised adults and those over 65 years
- When to send urine for culture and interpreting results
- Flowchart for children under 16 years with suspected UTI

[Diagnosis of urinary tract infections - quick reference tool for primary care \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

[BNF hosts antimicrobial summary guidance on behalf of NICE and PHE - BNF Publications](#)



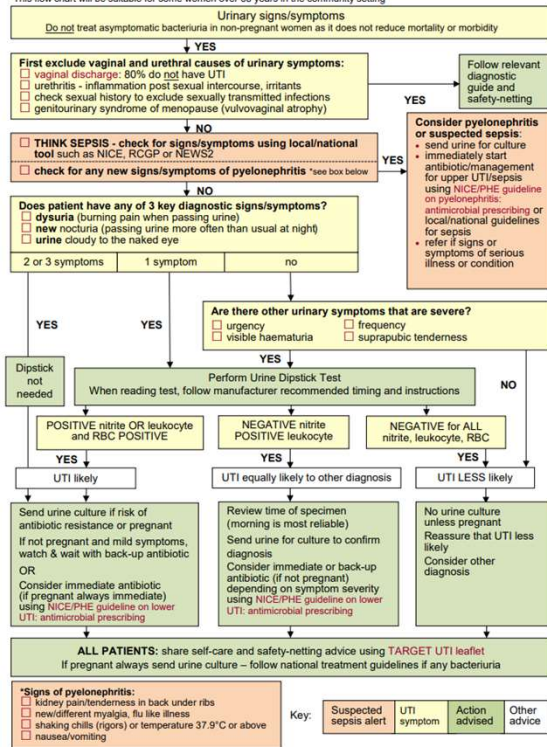


UTI Diagnosis and Treatment Flowcharts

Diagnosis of urinary tract infections: quick reference tool for primary care.

Flowchart for women (under 65 years) with suspected UTI

Excludes women with recurrent UTI (2 episodes in last 6 months, or 3 episodes in last 12 months) or urinary catheter
This flow chart will be suitable for some women over 65 years in the community setting



Available for:
Over 65 years
Under 65 years
Under 16s

Download at

[Antibiotic and diagnostic quick reference tools: Urinary Tract Infections \(rcgp.org.uk\)](#)

Developed by RCGP
TARGET Antibiotics



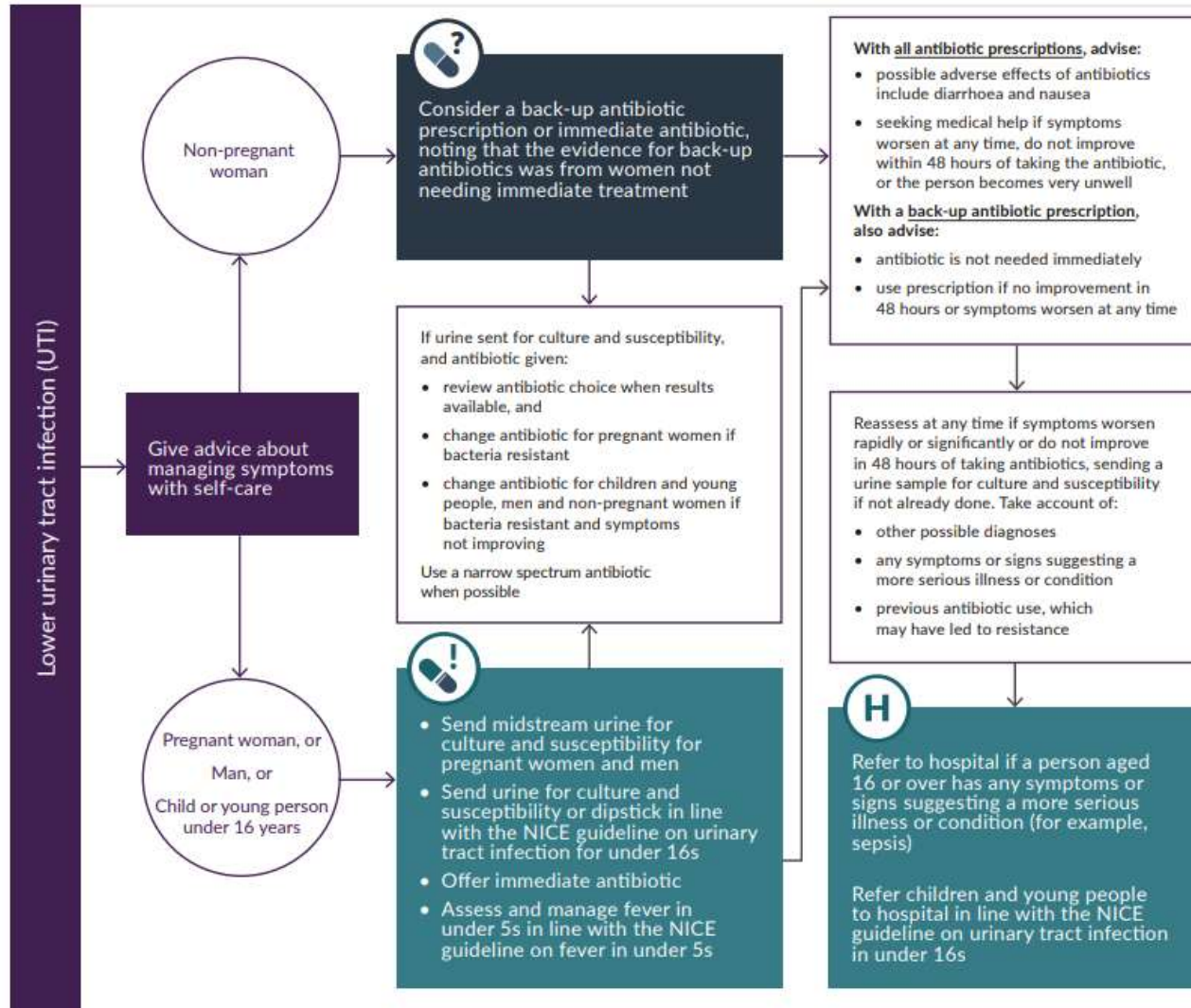


Infection	Key points	Medicine	Doses		Length
			Adult	Child	
		Alternative first choice (high severity in adults): levofloxacin (consider safety issues)	500mg BD	-	
IV antibiotics (<i>click on visual summary</i>)					
▼ Urinary tract infections					
Lower urinary tract infection NICE Public Health England Last updated: Oct 2018	<p>Advise paracetamol or ibuprofen for pain.</p> <p>Non-pregnant women: back up antibiotic (to use if no improvement in 48 hours or symptoms worsen at any time) or immediate antibiotic.</p> <p>Pregnant women, men, children or young people: immediate antibiotic.</p> <p>When considering antibiotics, take account of severity of symptoms, risk of complications, previous urine culture and susceptibility results, previous antibiotic use which may have led to resistant bacteria and local antimicrobial resistance data.</p> <p>If people have symptoms of pyelonephritis (such as fever) or a complicated UTI, see acute pyelonephritis (upper urinary tract infection) for antibiotic choices.</p> <p><i>For detailed information click on the visual summary. See also the NICE guideline on urinary tract infection in under 16s: diagnosis and management and the Public Health England urinary tract infection: diagnostic tools for primary care.</i></p>	Non-pregnant women first choice: nitrofurantoin (if eGFR ≥45 ml/minute) OR	100mg m/r BD (or if unavailable 50mg QDS)	-	3 days
		trimethoprim (if low risk of resistance)	200mg BD	-	3 days
		Non-pregnant women second choice: nitrofurantoin (if eGFR ≥45 ml/minute) OR	100mg m/r BD (or if unavailable 50mg QDS)	-	3 days
		pivmecillinam (a penicillin) OR	400mg initial dose, then 200mg TDS	-	3 days
		fosfomycin	3g single dose sachet	-	single dose
		Pregnant women first choice: nitrofurantoin (avoid at term) – if eGFR ≥45 ml/minute	100mg m/r BD (or if unavailable 50mg QDS)	-	7 days
		Pregnant women second choice: amoxicillin (only if culture results available and susceptible) OR	500mg TDS	-	7 days
		cefalexin	500mg BD	-	
		Treatment of asymptomatic bacteriuria in pregnant women: choose from nitrofurantoin (avoid at term), amoxicillin or cefalexin based on recent culture and susceptibility results			



UTI (lower): antimicrobial prescribing

NICE National Institute for Health and Care Excellence



i Background

- Lower UTI (cystitis) is a bladder infection usually caused by bacteria travelling up to the urethra from the gastrointestinal tract

i Self-care

- Advise paracetamol for pain or, if preferred and suitable, ibuprofen
- Advise drinking enough fluid to avoid dehydration
- No evidence found for cranberry products or urine alkalising agents to treat lower UTI

i Antibiotics

- When considering antibiotics, take account of severity of symptoms, risk of complications, previous urine culture and susceptibility results, previous antibiotic use which may have led to resistant bacteria and local antimicrobial resistance data

i Asymptomatic bacteriuria

- Asymptomatic bacteriuria is significant levels of bacteria in urine with no UTI symptoms
- Treated in pregnant women because risk factor for pyelonephritis and premature delivery
- Not screened for or treated in non-pregnant women, men, children or young people

May 2022

NICE uses 'offer' when there is more certainty of benefit and 'consider' when evidence of benefit is less clear.



Topics for next Forum?

- Please send suggestions to:
syheartlandsicb.shipc@nhs.net

Thankyou for your continued support to achieve continuous IPC improvements within the Primary Care setting

