



URINARY TRACT INFECTIONS IN WOMEN

By Joseph Gauta, MD, FACOG

Urinary tract infections (UTIs) are responsible for approximately 8.5 million visits to physicians' offices per year and about five percent of all visits to primary care physicians. Approximately 50 percent of women will experience at least one symptomatic urinary tract infection during their lifetime. One in five women experience recurring UTIs. How do you know if you have one? What is the best treatment?

What are the symptoms of a urinary tract infection?

When you have a urinary tract infection (UTI), the lining of the bladder and urethra become red and irritated just as your throat does when you have a cold. The irritation can cause pain in your abdomen and pelvic area and may make you feel like emptying your bladder more often. You may even try to urinate but only produce a few drops and/or feel some burning as your urine comes out. At times, you may lose control of your urine. You may also find that your urine smells unpleasant or is cloudy.

Kidney infections often cause fevers and back pain. These infections need to be treated promptly because a kidney infection can quickly spread into the bloodstream and cause a life-threatening condition.

UTIs are often categorized as simple (uncomplicated) or complicated. Simple UTIs are infections that occur in normal urinary tracts. Complicated UTIs occur in abnormal urinary tracts or when the bacterium causing the infection is resistant to many antibiotic medications.

What causes urinary tract infections?

Large numbers of bacteria live in the rectal area and also on your skin. Bacteria may get into the urine from the urethra and travel into the bladder. It may even travel up to the kidney. But no matter how far it goes, bacteria in the urinary tract can cause problems.

Just as some people are more prone to colds, some people are more prone to UTIs. Women who have gone through menopause have a change in the lining of the vagina and lose the protective effects of estrogen that decrease the likelihood of UTIs.

Postmenopausal women with UTIs may benefit from hormone replacement. Some women are genetically predisposed to UTIs and have urinary tracts that allow bacteria to adhere to it more readily. Sexual intercourse also increases the frequency of UTIs.

Women who use diaphragms have also been found to have an increased risk when compared to those using other forms of birth control. Using condoms with spermicidal foam is also known to be associated with an increase in UTIs in women.

Women are more prone to UTIs because they have shorter urethras than men so bacteria have a shorter distance to travel to reach the bladder.

You are more likely to get a UTI if your urinary tract has an abnormality or has recently been instrumented (for example, had a catheter in place). If you are unable to urinate normally because of some type of obstruction, you will also have a higher chance of a UTI.

Disorders such as diabetes also put people at higher risk for UTIs because of the body's decrease in immune function and thus a reduced ability to fight off infections such as UTIs.

Anatomical abnormalities in the urinary tract may also lead to UTIs. These abnormalities are often found in children at an early age but can still be found in adults. There may be structural abnormalities, such as out-pouchings called diverticula, that harbor bacteria in the bladder or urethra or even blockages, such as an enlarged bladder, that reduce the body's ability to completely remove all urine from the bladder.

How are urinary tract infections treated?

A simple UTI can be treated with a short course of oral antibiotics. A three-day course of antibiotics will usually treat most uncomplicated UTIs. However, some infections may need to be treated for several weeks. Depending on the type of antibiotic used, you may take a single dose of medication a day or up to four daily doses. A few doses of medication may relieve you of the pain or urge to urinate frequently but you should still complete the full course of medication prescribed for you even if all symptoms have been relieved. Unless UTIs are fully treated, they can frequently return. You should also remember to drink plenty of liquids, especially around the time of a UTI.

Contact your health care provider if you have symptoms of a UTI. Call right away if have signs of a possible kidney infection such as: back or side pain, chills, fever, and vomiting.

How do I avoid UTIs?

There are some simple steps women can use to avoid UTIs.

- Women who have gone through menopause and have lost the normal estrogen output have a change in the lining of the vagina. Estrogen replacement under the guidance of a gynecologist and/or primary care doctor can be a simple solution. Since certain patients cannot take estrogen replacement, you should contact your doctor prior to beginning any regimen.
- Urination after sexual intercourse may also decrease the risk of UTI because it can flush out any bacteria that were introduced during intercourse. Sometimes a dose of antibiotics after intercourse can help prevent recurrence of UTIs.
- Certain forms of birth control, such as spermicidal foam and diaphragms, are known to increase the risk of UTIs in women who use these as their form of contraception.
- You should also drink plenty of fluids, especially water, to keep well hydrated.
- You should not delay urinating and should not rush when urinating. Also, holding in urine and not emptying your bladder completely can increase your risk of UTIs.
- You should wipe from front to back to prevent bacteria around the anus from entering the vagina or urethra.
- Take showers instead of warm baths, and avoid bubble baths at all times.
- Choose cotton underwear because synthetic materials can trap and encourage bacteria growth.


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