

## 2 Bladder instillations and urological surgery

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#### Bladder infection

Various solutions are available as irrigations or washouts.

Aqueous chlorhexidine p. 727 can be used in the management of common infections of the bladder but it is ineffective against most *Pseudomonas spp.* Solutions containing chlorhexidine 1 in 5000 (0.02%) are used but they may irritate the mucosa and cause burning and haematuria (in which case they should be discontinued); sterile sodium chloride solution 0.9% p. 610 (physiological saline) is usually adequate and is preferred as a mechanical irrigant.

#### Dissolution of blood clots

Clot retention is usually treated by irrigation with sterile sodium chloride solution 0.9% but sterile sodium citrate solution for bladder irrigation 3% may also be helpful.

#### Maintenance of indwelling urinary catheters

The deposition which occurs in catheterised patients is usually chiefly composed of phosphate and to minimise this the catheter (if latex) should be changed at least as often as every 6 weeks. If the catheter is to be left for longer periods a silicone catheter should be used together with the appropriate use of catheter maintenance solutions. Repeated blockage usually indicates that the catheter needs to be changed.

## Catheter maintenance solutions

### ● CATHETER MAINTENANCE SOLUTIONS

#### OptiFlo G citric acid 3.23% catheter maintenance solution (Bard Ltd)

50 ml • NHS indicative price = £3.66 • Drug Tariff (Part IXa) 100 ml • NHS indicative price = £3.66 • Drug Tariff (Part IXa)

#### OptiFlo R citric acid 6% catheter maintenance solution (Bard Ltd)

50 ml • NHS indicative price = £3.66 • Drug Tariff (Part IXa) 100 ml • NHS indicative price = £3.66 • Drug Tariff (Part IXa)

#### Uro-Tainer PHMB polihexanide 0.02% catheter maintenance solution (B. Braun Medical Ltd)

100 ml • NHS indicative price = £3.46 • Drug Tariff (Part IXa)

#### Uro-Tainer Twin Solutio R citric acid 6% catheter maintenance solution (B. Braun Medical Ltd)

60 ml • NHS indicative price = £4.89 • Drug Tariff (Part IXa)

#### Uro-Tainer Twin Suby G citric acid 3.23% catheter maintenance solution (B. Braun Medical Ltd)

60 ml • NHS indicative price = £4.89 • Drug Tariff (Part IXa)

#### OptiFlo S saline 0.9% catheter maintenance solution (Bard Ltd)

Sodium chloride 9 mg per 1 ml 50 ml • NHS indicative price = £3.45 • Drug Tariff (Part IXa) 100 ml • NHS indicative price = £3.45 • Drug Tariff (Part IXa)

#### Uro-Tainer M sodium chloride 0.9% catheter maintenance solution (B. Braun Medical Ltd)

Sodium chloride 9 mg per 1 ml 50 ml • No NHS indicative price available • Drug Tariff (Part IXa) 100 ml • No NHS indicative price available • Drug Tariff (Part IXa)

#### Uro-Tainer sodium chloride 0.9% catheter maintenance solution (B. Braun Medical Ltd)

Sodium chloride 9 mg per 1 ml 50 ml • NHS indicative price = £3.57 • Drug Tariff (Part IXa) 100 ml • NHS indicative price = £3.57 • Drug Tariff (Part IXa)

## 3 Contraception

### Contraceptives, hormonal

#### Overview

The Fraser Guidelines (Department of Health Guidance (July 2004): Best practice guidance for doctors and other health professionals on the provision of advice and treatment to young people under 16 on contraception, sexual and reproductive health, available at [www.tinyurl.com/bpg16](http://www.tinyurl.com/bpg16)) should be followed when prescribing contraception for women under 16 years. The UK Medical Eligibility Criteria for Contraceptive Use (available at [www.fsrh.org](http://www.fsrh.org)) is published by the Faculty of Sexual and Reproductive Healthcare; it categorises the risks of using contraceptive methods with pre-existing medical conditions.

**Hormonal contraception** is the most effective method of fertility control, but can have major and minor side-effects, especially for certain groups of women. Hormonal contraception should only be used by adolescents after menarche.

**Intra-uterine devices** are a highly effective method of contraception but may produce undesirable local side-effects. They may be used in women of all ages irrespective of parity, but are less appropriate for those with an increased risk of pelvic inflammatory disease.

**Barrier methods** alone (condoms, diaphragms, and caps) are less effective but can be reliable for well-motivated couples if used in conjunction with a **spermicide**. Occasionally sensitivity reactions occur. A female condom (*Femidom*<sup>®</sup>) is also available; it is pre-lubricated but does not contain a spermicide.

#### Combined hormonal contraceptives

Oral contraceptives containing an oestrogen and a progestogen ('combined oral contraceptives') are effective preparations for general use. Advantages of combined oral contraceptives include:

- reliable and reversible;
- reduced dysmenorrhoea and menorrhagia;
- reduced incidence of premenstrual tension;
- less symptomatic fibroids and functional ovarian cysts;
- less benign breast disease;
- reduced risk of ovarian and endometrial cancer;
- reduced risk of pelvic inflammatory disease.

Combined oral contraceptives containing a fixed amount of an oestrogen and a progestogen in each active tablet are termed 'monophasic'; those with varying amounts of the two hormones are termed 'phasic'. A transdermal patch and a vaginal ring, both containing an oestrogen with a progestogen, are also available.