Factors affecting success in learning clean intermittent self catheterization

TO Hoi-chu, CHAN Pak-Tong, Bill WONG
Division of Urology,
Department of Surgery,
Queen Elizabeth Hospital.
Introduction

Clean Intermittent Self Catheterization (CISC) has increasing popularity in the management of urinary retention because it is simple and easy to use, and it is the optimal form of urinary drainage.
Aims

This is a retrospective study to analyze:

- factors affecting ability to learn CISC in male patients with urinary retention.
Patients & Methods

- Jan 2001 - December 2001
- 177 consecutive men
- Had been taught CISC at the Urology Nurse Specialist’s Clinic
  - Patients failed trial without catheter
- Age: 37-92 years old (mean=72.2)
- Follow-up: 28-39 months (mean=33)
Results

4 early drop-outs:
- unwillingness to learn (2)
- discomfort during catheterization (1)
- failure to catheterize urethra (1)

146/173 (84.4%)
- successfully learned to perform CISC

27/173 (15.6%)
- ended up with CIC by carers
Results

- Of the 146/173 men use CISC,
- CISC technique acquisition time ranged from 0.5 to 43 (mean 1.0) days,
- With 111/146 men successfully acquired CISC technique within 0.5 day.
Results

Patients resumed spontaneous urethral voiding after 1-810 (median 14) days.

<table>
<thead>
<tr>
<th></th>
<th>resumed spontaneous urethral voiding</th>
<th>percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>83/173</td>
<td>(48.0%)</td>
</tr>
<tr>
<td>‘CISC’ Group</td>
<td>71/146</td>
<td>(48.6%)</td>
</tr>
<tr>
<td>‘CIC by carers’ Group</td>
<td>12/27</td>
<td>(44.4%)</td>
</tr>
</tbody>
</table>
Results

<table>
<thead>
<tr>
<th></th>
<th>CISC Group</th>
<th>“CIC by carers” Group</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADL-dependent</td>
<td>24/146</td>
<td>25/27</td>
<td>P&lt;0.001</td>
</tr>
<tr>
<td>previous cerebrovascular accidents</td>
<td>13/146</td>
<td>10/27</td>
<td>P&lt;0.001</td>
</tr>
</tbody>
</table>

- No statistical difference in mean age (72 vs 74 years old).
- There were statistical differences in being ADL-dependent and history of previous cerebrovascular accidents.
Conclusions

- Majority of our male patients with urinary retention were willing and were able to quickly acquire the skill to perform CISC.
- Patient’s age did not preclude success,
- but poor ADL-dependence and history of CVA were adverse factors.
- Significant rate of resumption of spontaneous urethral voiding will enhance patients’ motivation in using CISC or CIC by carers.
Thank you