



Service Priorities and Programmes
Electronic Presentations

Convention ID: 510

Submitting author: Ms Crystal Suk Yin Li

Post title: Advanced Practice Nurse, Prince of Wales Hospital, NTEC

Implication of Evidence Practice in Reducing the Risk of Catheter Associated Urinary Tract Infection (CAUTI) in Bladder Irrigation by Utilizing a New Closed Urinary Drainage System

Li C(1), Ho KW(1), Kwok SW(1), Ng CF(2)(3), Yee CH(2)(3)

(1)Department of Surgery, Prince of Wales Hospital (2)Division of Urology, Department of Surgery, Prince Of Wales Hospital (3)Department of Surgery, The Chinese University of Hong Kong

Keywords:

Reduce Urinary Tract Infection

Utilizing a new closed urinary drainage system

Introduction

Urinary tract infection (UTI) is a common condition associated with the presence of an indwelling urethral catheter. Transurethral resection of prostate (TURP) is a frequently performed procedure in urology, and bladder irrigation is often needed after surgery. There is some evidence in the literature demonstrating that the use of a closed urinary drainage system would decrease the chance of UTI when compared with the traditional open drainage system.

Objectives

To compare the rate of UTI after TURP between closed urinary drainage system and open urinary drainage system.

Methodology

A retrospective review of TURP results in Prince of Wales Hospital in 2009 (when the traditional open drainage system was still in use) was performed. A prospective evaluation of TURP outcome in 2013 after implementation of the new closed drainage system was accomplished.

Result

From January 2009 to December 2009, a total of 109 TURP were performed in Prince of Wales Hospital. The traditional open drainage system was used after the surgery, and UTI rate requiring medical attention was 8.3% according to symptoms or urine culture results. From August 2013 to December 2013, a total of 53 TURP were performed followed with the use of closed urinary drainage system. Among these patients, 8 patients were lost to follow-up. Two patients had UTI confirmed with urine culture upon 1 week after discharge, making the UTI rate to be 4.8% in this series of patients with the new closed urinary drainage system. In conclusion, preliminary data have supported the use of this new closed urinary drainage system to decrease the chance of UTI. A longer evaluation period with inclusion of more patients would help confirm such findings in a wider clinical practice.