ISC
(Intermittent self-catheterisation)

Patient Information
The purpose of this leaflet is to give a brief explanation of what intermittent catheterisation is and how it is performed. We advise you to read the leaflet in preparation for your formal teaching with your healthcare professional.

Why do I need to learn Intermittent self-catheterisation (ISC)?

There are many different reasons why you may be unable to empty your bladder. Your healthcare professional should provide you with a clear explanation of why this is happening to you and the benefits you could get from learning ISC.

What is ISC?

ISC is the temporary insertion of a catheter into the bladder to drain urine. A catheter is a tube that is inserted through the urethra (the tube that connects the bladder to the outside opening) to drain the urine held in the bladder. This is done at regular intervals. Once the bladder is empty the catheter is removed allowing you complete independence. This procedure is simple to perform and should not be painful.

Advantages of ISC

As previously mentioned performing ISC can help you regain your independence. Together with your healthcare professional you can devise a plan where you are in control of when to empty your bladder. This can give you more freedom.

If you do not fully empty your bladder you can be at an increased risk of urine infections as the urine sits in the bladder for long periods allowing more time for bacteria to multiply. Performing ISC can reduce the risk of urine infections by ensuring that the bladder is completely emptied regularly. Performing ISC may also stop the feeling that you have to visit the toilet frequently and reduce the likelihood of urine leakage.

Anatomy

It is very important before you attempt catheterisation that you are completely sure you can identify your urethra. You must also have a basic understanding of how the kidneys and bladder work.
You have two kidneys which extract waste from the body and turn this waste into urine. The kidneys drain into the bladder through two tubes (ureters), the bladder slowly fills up and stretches like a balloon. As the bladder gets bigger nerves send a signal to the brain making you aware that the bladder is filling and give you a sensation of needing the toilet.

When you go to the toilet your brain sends a signal to the sphincter muscle (the muscle that holds the bladder shut) to relax and also sends a signal to the bladder to squeeze, this forces the urine out of the bladder and along the urethra (the tube from the bladder to the outside).

Before your teaching session it will be useful to try and identify the opening of your urethra. The urethra is a small opening which is found approximately two to five centimetres below the clitoris:

1. Clitoris
2. Urethral orifice
3. Labia
4. Vaginal orifice

It may be clearly visible or surrounded by a small mound of tissue. Further back from the urethra is the vaginal opening. It is important to identify the urethral opening before you use a catheter.

What do the catheters look like?
There are lots of different types of catheter available. Your healthcare professional will offer you advice on which one best suits your needs. Most catheters are made of soft plastic materials and are pre lubricated or have a special lubricating coating that is activated when immersed in water; this makes it more comfortable for insertion. They may come with a collection bag attached or may need to be emptied directly into the toilet. They are often discreetly packaged to give you confidence whilst carrying supplies.

Basic hygiene
Performing ISC reduces the risk of developing urine infections when compared to indwelling catheters but only if a clean procedure is used.

Before performing ISC wash your hands with soap and water, or if you are not able to get to a sink you can use alcohol hand gel. Clean the genital area using mild soap and water or a wet wipe that does not contain alcohol. Wipe from front to back. Once this is done, you are ready to perform ISC.
Positioning
Your healthcare professional will give you advice and support to find a suitable position to perform ISC. The position you choose will allow you to see the urethra clearly and be comfortable whilst you perform catheterisation. Common positions are:

- Standing up in front of a mirror
- Standing with one foot up on a seat / toilet.
- Sitting on the edge of a seat / toilet with your pelvis tilted forwards.
- Squatting over the toilet
- Laying down with knees bent and slightly apart.

ISC procedure
This information is a guide and you will be supervised when performing ISC for the first time.

1. Ensure you have washed your hands and genital area.
2. Prepare your catheter according to the manufacturer’s instructions.
3. Adopt the position you have chosen that allows you to comfortably catheterise and hold the catheter with your ‘dominant’ hand (usually the hand you write with).
4. Part the labia with the other hand.
5. Identify the opening of the urethra.
6. Gently insert the catheter into the urethra aiming upwards and backwards. The catheter will need to be inserted about five to eight centimetres. You will know it is in far enough when urine starts to drain from the catheter.
7. Once urine flows make sure to hold the catheter in this position until the flow of urine has completely stopped. The urine can be drained into the toilet, a container or into a collection bag if one is supplied with your catheter.
8. Once the flow has stopped, gently and slowly withdraw the catheter. You may notice a slight trickle of urine whilst withdrawing the catheter this is normal.
9. Dispose of the catheter. The catheters must not be flushed down the toilet. Please put back in the wrapper and dispose of in the bin.

If you decide to learn ISC to help deal with your bladder problem you will be given guidance and support from your healthcare professional to ensure you feel confident to learn this skill.

At your appointment there will be plenty of time to ask questions and if at any point you decide you do not want to continue with learning ISC, please inform the healthcare professional looking after you.

If you have any questions before your appointment, please make a note below and your questions will be answered at the teaching session.

Your appointment will take approximately one hour.

If you cannot attend for your appointment please ring the appointments office on 01642 854861 to rearrange.

If you have any questions that can’t wait until your appointment please feel free to contact your consultant’s secretary who will endeavour to answer your questions. You can contact them through the hospital switchboard on 01642 850850.
We hope that you have found this information helpful. Please remember our staff will be happy to answer any questions you have about any aspect of your care and welcome any comments about this leaflet.

**Comments, compliments, concerns or complaints**

South Tees Hospitals NHS Foundation Trust is concerned about the quality of care you receive and strives to maintain high standards of health care.

However we do appreciate that there may be an occasion where you, or your family, feel dissatisfied with the standard of service you receive. Please do not hesitate to tell us about your concerns as this helps us to learn from your experience and to improve services for future patients.

**Patient Advice and Liaison Service (PALS)**

This service aims to advise and support patients, families and carers and help sort out problems quickly on your behalf.

This service is available, and based, at The James Cook University Hospital but also covers the Friarage Hospital in Northallerton, our community hospitals and community health services. Please ask a member of staff for further information.

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