

Q&A: Six UTI myths and facts

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As a woman in my mid-60s, I have been diagnosed with a urinary tract infection for the first time ever. I was surprised to find out that I don't need antibiotics because I don't have any symptoms. There's a lot of conflicting information online about UTIs, like whether every infection needs to be treated and if sex causes an infection. Can you help me distinguish between UTI myth and fact?

ANSWER: Urinary tract infections, also called UTIs, are the most common infection for women in the U.S., so you are not alone. About 40% of women will have at least one UTI in their lifetime, and 1 in 10 postmenopausal women had a UTI in the last year.

A UTI is an infection that occurs in the urinary system, such as the bladder, ureters and kidneys. Most infections involve the bladder, which is known as the <u>lower urinary tract</u>.

Similar to your experience, UTIs don't always cause symptoms. But when they do, the symptoms may include a strong urge to urinate, a burning feeling while urinating, urinating more often, red or bright pink urine, or <u>pelvic pain</u>. Some patients experience chills, marked fatigue, fever or flank pain along the side of the torso below the ribs. These symptoms indicate that the infection has extended beyond the bladder, possibly to the kidney or into the bloodstream.

Here's the truth about six UTI myths you should know in case you develop another infection:

Myth: Only women can get a <u>urinary tract infection</u>.

Fact: UTIs can affect both men and women. Women are at greater risk for a UTI because the urethra is shorter than in men, so it's easier for bacteria to travel to the bladder. UTIs also are more common in postmenopausal women because changes in vaginal and urethral tissue



due to low estrogen levels increases the risk of infection.

Myth: All UTIs cause symptoms.

Fact: Most UTIs cause symptoms, like pain or a <u>burning sensation</u> when urinating, or a feeling like you need to urinate often. As you discovered, though, it is possible to have bacteria in the urinary tract but not have any UTI symptoms. This is called asymptomatic bacteriuria, and it is more common in <u>older adults</u> or people who use a catheter to empty their bladders.

Myth: All UTIs must be treated with antibiotics.

Fact: Not all UTIs require antibiotics. Some people can have bacteria in their bladders but not experience any symptoms. This is called asymptomatic bacteriuria. In most cases, no treatment is necessary as the bacteria is not causing issues. This is probably why your health care team didn't recommend treatment for your recent UTI.

There are a few groups of people that may require treatment, including people who are pregnant, people with planned urologic surgery and people with weakened immune systems. Antibiotics are used to treat UTIs when the person is experiencing painful or bothersome symptoms and there is bacteria present in the urine.

Myth: A UTI will go away on its own.

Fact: Asymptomatic bacteriuria, which is a UTI without symptoms, could go away without treatment. However, UTIs with symptoms rarely resolve on their own. If you begin experiencing UTI symptoms, like burning, pain or frequency, talk with your health care team about obtaining a urine culture and the right treatment for you.



Myth: UTIs can be passed to your partner.

Fact: UTIs are not contagious or passed between partners by sexual or casual physical contact.

Myth: UTIs are sexually transmitted infections.

Fact: Sexual activity can increase the risk for UTIs, but it does not cause them. Therefore, UTIs are not classified as sexually transmitted infections. The act of intercourse can cause bacteria to get close to or into the urethra, the small tube that empties your bladder. Lower your risk by urinating after intercourse to remove some of the bacteria before it can cause an infection.

Talk with your health care team if you start to experience UTI symptoms, like painful or burning urination, pelvic pain, a strong urge to urinate, fever, chills, disorientation, or back or side pain.

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