

## Long-term indwelling urethral catheter tied to more infections

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Long-term indwelling urethral catheter (IUC) use is associated with a



higher incidence of urinary tract infection (UTI) in people with spinal cord injury, according to a study published online March 27 in the *Journal of Spinal Cord Medicine*.

Tsai-Chin Cheng, from the Taipei Veterans General Hospital in Taiwan, and colleagues examined the association between type of urological management and urological complications in patients with spinal cord <u>injury</u>. The analysis included 207 individuals with spinal cord injury.

The researchers found that the most common management type was self-voiding (31 percent), followed by intermittent catheterization (23 percent). The IUC and suprapubic catheter (SPC) groups included more people with complete spinal cord injury compared with other management methods. The SPC and self-voiding groups had lower risks for developing UTI (relative risks [95 percent confidence intervals], 0.76 [0.59 to 0.97] and 0.39 [0.28 to 0.55], respectively), compared with the IUC group. The risk for epididymitis trended lower in the SPC group versus the IUC group (relative risk, 0.55; 95 percent confidence interval, 0.18 to 1.63).

"Given the retrospective nature of our study, the interpretation of our findings should be made with caution," the authors write. "Long-term trials are warranted to determine the optimal bladder-<u>management</u> methods for patients with various levels and types of spinal cord injury."

**More information:** Tsai-Chin Cheng et al, Complications of different methods of urological management in people with neurogenic bladder secondary to spinal cord injury, *The Journal of Spinal Cord Medicine* (2023). DOI: 10.1080/10790268.2023.2188393

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