

Early clean intermittent catheterization recommended with neurogenic bladder

September 7 2023, by Lori Solomon



Early clean intermittent catheterization is recommended to reduce the

incidence of recurrent febrile urinary tract infections (FUTIs) in children with neurogenic bladder (NB), according to a study published in the September issue of *Neurourology & Urodynamics*.

Guanglun Zhou, from Shenzhen Children's Hospital in Guangdong, China, and colleagues sought to identify the clinical and urodynamic risk factors associated with the development of recurrent FUTIs in children with NB. The analysis included [data](#) for 321 children with NB receiving clean intermittent catheterization (CIC) prospectively followed for two years.

The researchers found that occasional FUTIs occurred in 223 patients, and 98 patients experienced recurrent FUTIs. Late-initiation and low-frequency CIC, vesicoureteral reflux (VUR), small bladder capacity and low compliance, and detrusor overactivity were associated with an increased risk for recurrent FUTIs. Risk for recurrent FUTIs was higher for [children](#) with high-grade VUR (grades IV to V) versus those with low-grade VUR (grades I to III; odds ratio, 26.95 versus 4.78; P

"We recommend early CIC interventions in [patients](#) with NB," the authors write.

More information: Guanglun Zhou et al, Risk factors associated with recurrent febrile urinary tract infection in children with neurogenic bladder who perform clean intermittent catheterization, *Neurourology and Urodynamics* (2023). [DOI: 10.1002/nau.25245](https://doi.org/10.1002/nau.25245)

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