

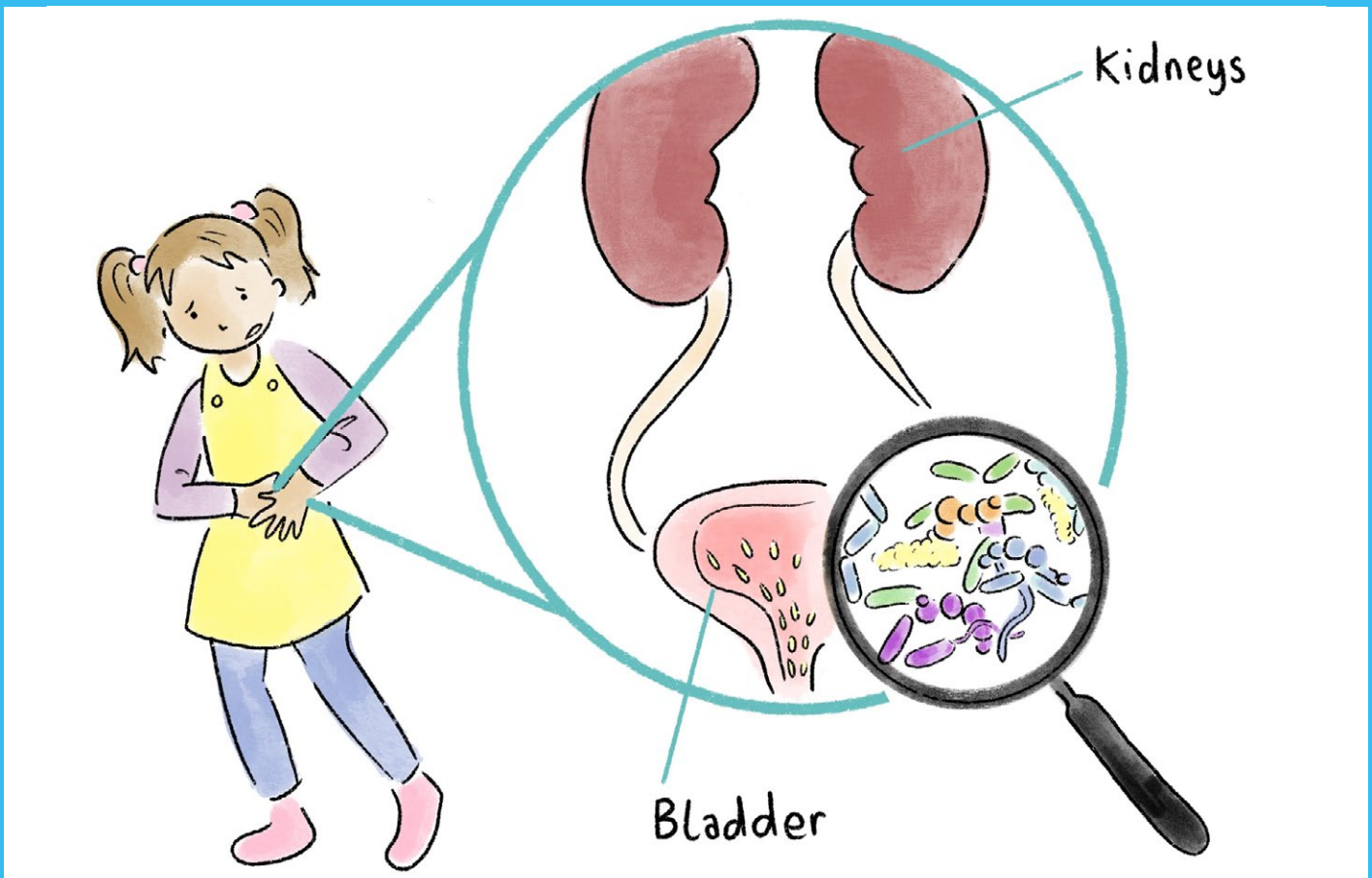
# Urinary Tract Infection (UTI)

## Information for parents and carers

### Key facts

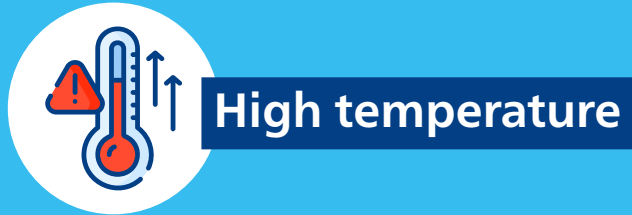
A urine infection occurs when bacteria gets into the urine and causes symptoms.

- Commonly only affects the bladder
- It may travel higher into the kidneys
- Around 1 in 10 girls and 1 in 30 boys will have a urine infection in childhood

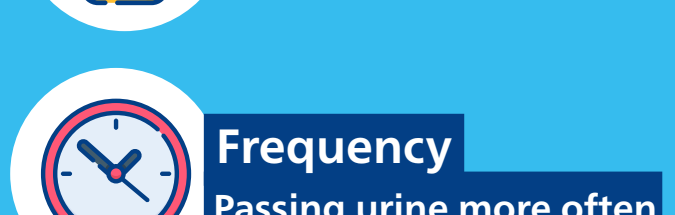


# Symptoms of UTI

## IN BABIES

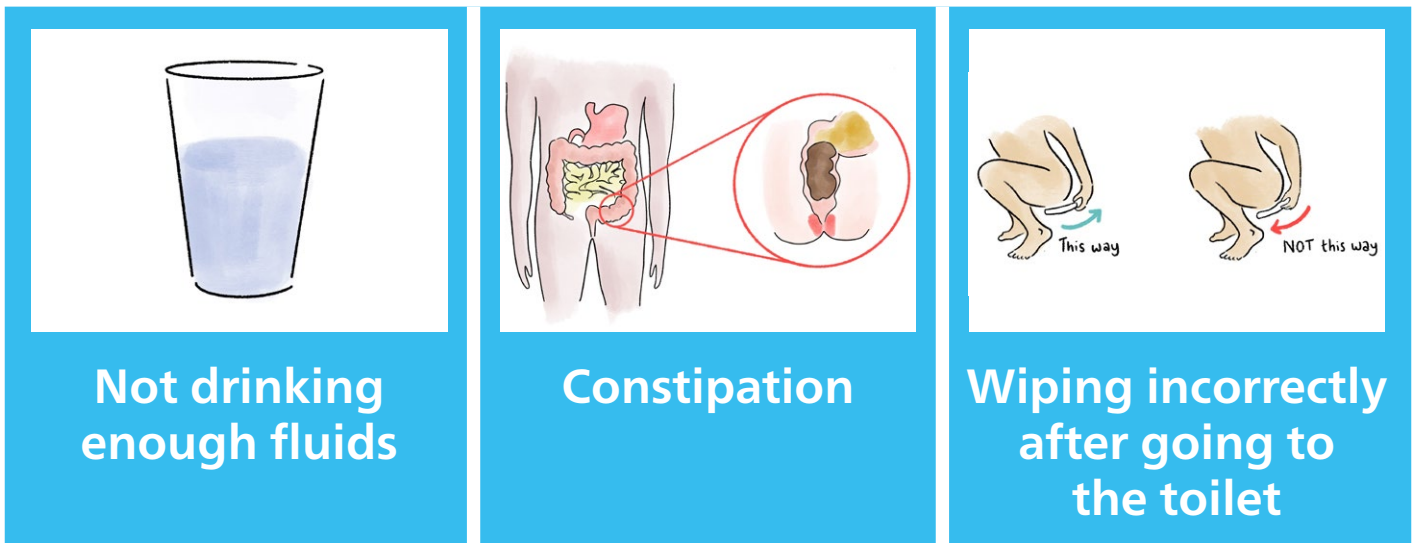


## IN CHILDREN



# Risk Factors

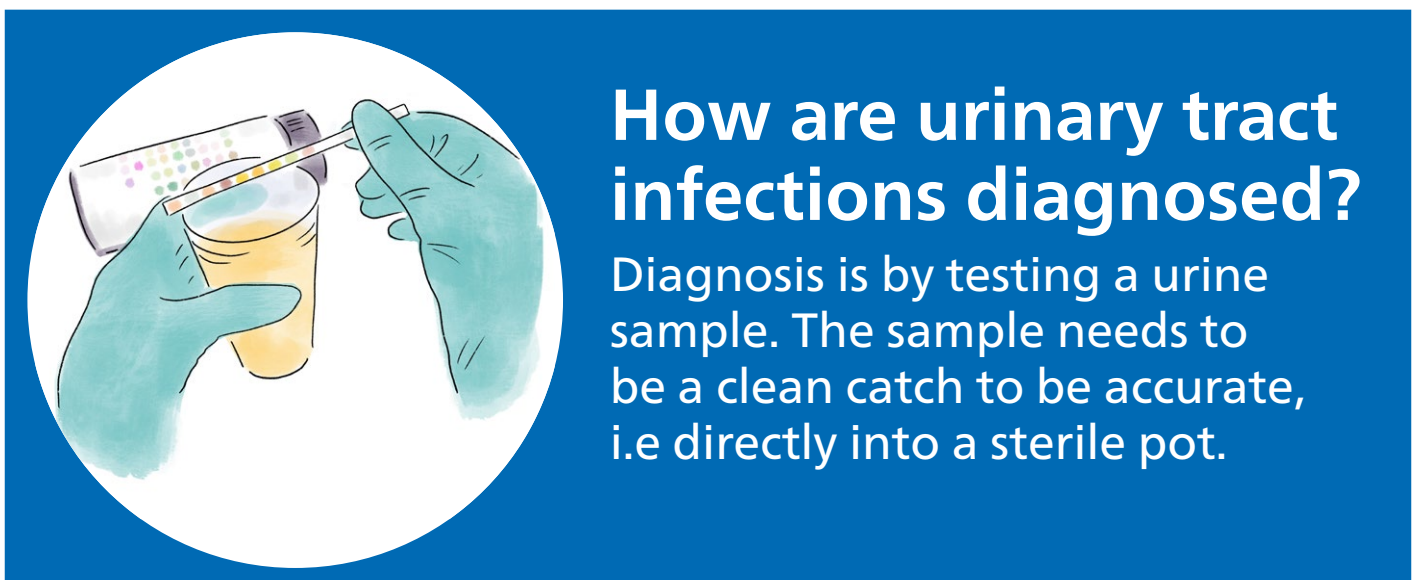
Most UTI's are seen in healthy children. Common causes include



Some children are at increased risk of UTI because of conditions which affect the flow of urine. These might include:

- A blockage at the exit from the bladder
- Poor bladder emptying
- Kidney stones
- Urine going back towards the kidneys

These rare things are found out by scanning your child.



## Treatments

When your child has a urinary tract infection, the doctor will prescribe antibiotics. When taking antibiotics it is important to complete the FULL COURSE.

If symptoms such as burning when passing urine, going to the toilet more often or blood in the urine don't improve after 2 days, you should SEEK MEDICAL ADVICE

## What to keep in your medicine cabinet

Keep the following items in your medicine cabinet ready for when you need them;

- Oral Rehydration Solution (ORS) Sachets (e.g. Dioralyte)
- Liquid Paracetamol (e.g. Calpol)
- Liquid Ibuprofen – please note that if your child has been diagnosed with Asthma, Ibuprofen is not recommended unless discussed with your doctor first.

Never exceed the maximum dose for paracetamol and ibuprofen in any 24-hour period. Keep a diary of when you give each dose so that you do not give your child too much.

Please check the use-by dates and keep out of reach of children. These medicines are all available over the counter from a pharmacist. The pharmacy or supermarket own brands are cheaper and work just as well, if you are unsure, ask your pharmacist.



# Caring for your child at home

If your child does not have any red or amber symptoms in the traffic light advice then you can care for your child at home.

If your child is already taking medicines or inhalers, you should carry on using these.

Give lots to drink to help flush the infection out.



## Pain or distress

If your child is in pain or distressed and over 3 months old, you can give them liquid paracetamol or ibuprofen.

At home, we do not recommend giving paracetamol and ibuprofen at the same time. If your child has not improved after two to three hours you may want to give them the other medicine. Never exceed the dose on the packaging.

## Hydration

If your child is not feeding as normal, offer smaller feeds more frequently. If your child is breastfed, continue to feed on demand.

# Maintaining Hydration

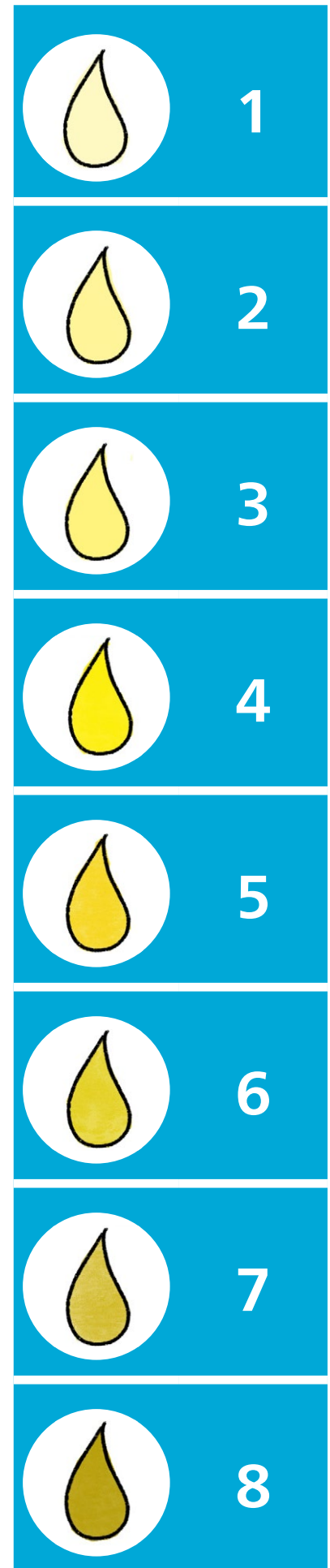
The urine colour chart is a simple tool that can be used to assess if children are drinking enough fluids throughout the day to stay hydrated.

If urine matches the colours number 1, 2 or 3 they are hydrated

If urine matches colours 4-8 they are dehydrated and need to drink more fluid.

Some medicines and vitamins can discolour the urine.

Drinking water encourages children to go to the toilet more often.



# Preventing Urine Infections

As well as the antibiotics, there are also some things you can do to help the infection to get better and also prevent another infection

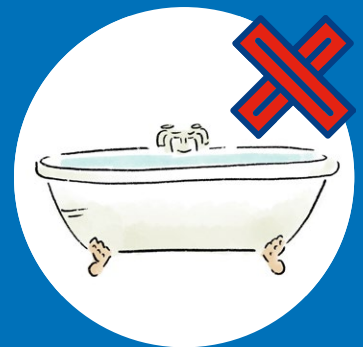
- 1** **AVOID CONSTIPATION.** You can do this by giving your child a high fibre diet to include wholemeal bread, whole wheat cereals and fresh fruit and vegetables. Ensure your child drinks a lot and has regular exercise. If this is an issue for your child, please talk to your health visitor or GP.



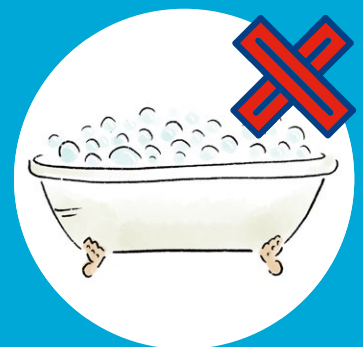
- 2** In young girls the tube to the bladder is very close to the back passage, wiping should be done from front to back.



- 3** It is better to take a shower rather than a bath. **CLEANLINESS** is very important to help prevent infection.



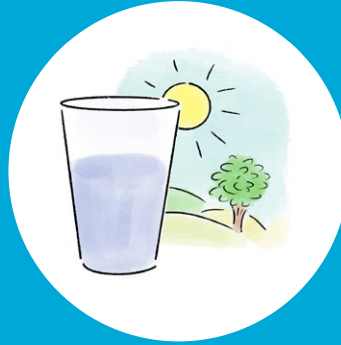
- 4** Avoid irritating soaps and bubble baths, use plain water only to wash the bottom.



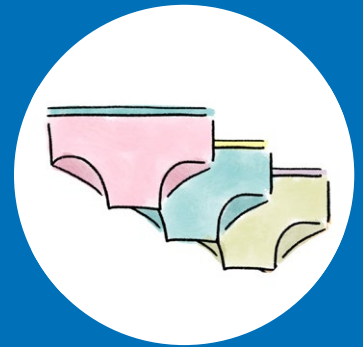
**5** EMPTYING THE BLADDER properly is very important. Encourage your child to use the toilet regularly and empty the bladder every 2-3 hours.



**6** Always encourage your child to DRINK as much as possible during the day, and the EMPTY THE BLADDER properly last thing at night



**7** UNDERWEAR should not be tight, they prevent air from circulating freely and encourage the warm, moist environment which favours infection. Soft cotton briefs, changed daily are ideal.



**8** Swimming is excellent exercise but chlorine in the pool is very irritant for girls, so rinse their bottom thoroughly with water in the shower afterwards.





Children can change quickly and if at any time your child displays any of the 'Red' features in the box below you should seek EMERGENCY HELP.



## RED

### If your child

- has blue lips
- becomes pale, mottled and feels abnormally cold to touch
- is struggling to breathe
- has a fit/seizure
- becomes extremely agitated (crying inconsolably despite distraction, confused or very lethargic (difficult to wake)
- develops a rash that does not disappear with pressure (the 'glass test')
- is under 3 months of age with a temperature of 38°C or above (unless the fever is 48 hours following a vaccination and no other red or amber features)

### YOU NEED EMERGENCY HELP CALL 999

You need to be seen at the hospital Emergency Department



## AMBER

### If your child has any one of these features

- Appears to be getting worse or you are worried
- Restless or irritable
- Increased difficulty breathing
- Temperature of 39°C despite paracetamol and/or ibuprofen
- Continues to have a fever of 38 °C or above for more than 5 days
- Reduced fluid intake by half usual amount
- Passed urine less than twice in 12 hours
- Has extreme shivering or complains of muscle pains

### SEEK MEDICAL ADVICE TODAY

Please call your GP surgery, or, if it is closed call NHS 111  
Your GP may want to speak to you on the phone first to give you medical advice. They will arrange to see your child if it is appropriate.



## GREEN

### If none of the features in the red or amber boxes above are present

See 'Important things to consider' box

### SELF-CARE

Using the advice on this leaflet you can care for your child at home. The most important advice is to keep your child well hydrated.

If you feel you need more advice, please contact your local pharmacy, Health Visitor or GP surgery.

You can also call NHS 111 for advice.

# What happens next

- In most cases, your child will recover fully and will not have any more UTIs. Once a urine infection is diagnosed and treatment, the infection usually clears quickly
- Many children who just have a single UTI which gets better quickly will not need any further tests
- If your child has an infection when they are very young, the infection is caused by an unusual bacteria, they have recurrent infections or they don't get better quickly with antibiotics they may need further tests
- An ultrasound of the kidneys is the most common test
- It is important that you and your child watch for any symptoms of a repeat infection and go back to your GP to check a urine specimen if there is any doubt
- If further tests are needed, your doctor will discuss and arrange them if necessary. The type of scan will depend on your child's specific circumstances.
- Rarely scans show up problems which require follow up and antibiotics for longer. Very rarely a procedure is required to put the problem right if any blockages are found on the scan

# Why is it important to identify and treat UTIs quickly?

- Most children will recover completely and have no long-term problems
- A small number of children may develop scarring on their kidneys which can cause high blood pressure in later life

## Key points to remember

- A urine infection is caused by bacteria that gets into the urine and causes symptoms
- The infection usually clears quickly once the antibiotics have been started
- Speak to your doctor if your child is not improving after 2 days
- Keeping your child well hydrated is very important