

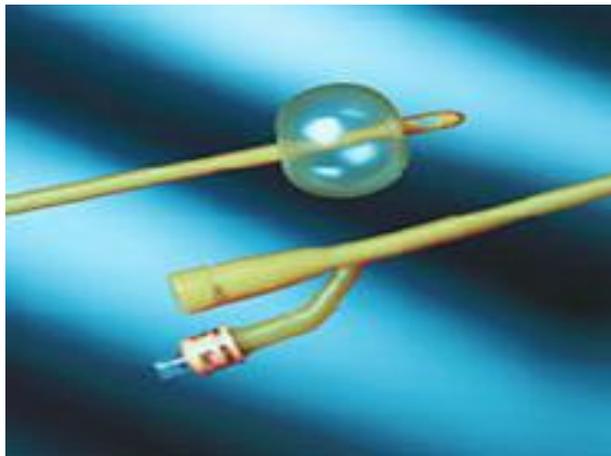


County Durham and Darlington  
Area Prescribing Committee

County Durham and Darlington   
NHS Foundation Trust

# **Catheter and Continence Care Formulary**

## **First Line Prescribing Guide 2018**



**Developed by the Trust wide Urinary Catheter Group**

**Version Two: November 2018**

**Review: May 2020**

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## **Introduction**

This continence and catheter care formulary has been prepared by the County Durham and Darlington NHS Foundation Trust (CDDFT) Continence Service with the input from the urinary catheter group, CCG, Primary Care and following consultation with Community Nursing Teams across the Trust. It aims to simplify prescribing of continence products and promote best practice.

It is available for all healthcare professionals prescribing and/or obtaining urinary catheters and continence care medical devices for general (non-specialised) use for adults across CDDFT, DDES, North Durham and Darlington CCG's.

The products selected for this formulary by the Continence Service and urinary catheter group have been based on experience, clinical effectiveness, patient requirement and cost effectiveness. They are products are recommended for patients within the Community and following discharge from hospital in to community.

This formulary will be updated regularly to reflect innovations in practice, new evaluated products and sent for consultation to the area prescribing committee (APC), urinary catheter group, community nursing teams and Urology Department at County Durham and Darlington NHS Foundation Trust.

## **Notes for use**

The formulary should be used alongside the Trust's Urinary Catheterisation Policy.

Patient assessment is essential before using any of the products listed in this formulary or deciding to catheterise. Guidelines for this are set out within the CDDFT Urinary Catheterisation Policy.

Alternative management options should be first considered in view of the complications associated with indwelling urinary catheters.

It should be remembered that the use of any continence appliance can significantly affect patients and carers, physically, socially, psychologically and sexually. Therefore it is vital that these issues should be taken into consideration whenever a continence product is prescribed. Patients and carers should be given the opportunity to make an informed choice when selecting products. The choice however, is determined by clinical assessment and is guided by the formulary. It is important that a regular review of the patients products is carried out, as often new products become available which may meet the patients or carers needs more appropriately.

All continence products are classified as medical devices and are regulated by the Medical Devices Agency (MDA). The MDA should be informed of minor faults and discrepancies between products as per Trust Policy. Anyone may report adverse incidents including patients, carers, or any healthcare professional via the Medicines and Healthcare Products Regulatory Authority (MHRA) reporting site.

Medical representatives regularly try to approach district nurses, residential and nursing homes, often leaving samples or offering free training, delivery services, etc and this should be avoided whenever possible unless the product is currently listed in the Continence Care Formulary and permission has been sought and Supplier Representative Policy 2016 adhered to.

## Ordering Supplies

Patients have the choice of where to obtain their prescribed continence supplies from. One supplier should not be recommended in preference to another. There are two routes of supply:

1. **Community Pharmacies** – prescriptions can be collected by the patient or a patient's representative from the GP surgery and items delivered directly to the patient's home, along with other medication.
2. **Dispensing Appliance Contractors (DAC)** – prescriptions can be posted from the GP surgery to the DAC and items delivered directly to the patient's home.
3. **Dispensing GP's** – for specific GP practices with specific patients

Please note that a prescription must be **authorised and generated** by a GP practice prior to any delivery of appliances to patients.

Each patient should keep **two spare catheters in stock** in case of problems with their catheter. The first time a patient is catheterised **three catheters** should be prescribed, one for use and two for spare. From then on only **one** catheter should be prescribed at a time.

## FORMULARY

### STERILE CATHETERISATION INSERTION PACKS

There are various catheterisation packs available for use on FP10 which can help reduce the risk of catheter related urinary tract infections and reduce healthcare professionals time by having all the appropriate equipment together.

**Cath-It** - Two layer system. Layer 1 catheter removal kit. Layer 2 catheter insertion kit (nb this pack does not include catheter, lubricating gel or saline).

**Prescription – Order 3 packs initially, then re-order 1 pack at a time.**

Category		Sterile Catheterisation Pack			
Indications and features		Facilitates aseptic non-touch technique to reduce risk of catheter associated urinary tract infections (CAUTI)			
Manufacturer	Appliance	Product code	Size	Quantity	
Richardson H/C	Cath-it	908410	S/M gloves	1	
Richardson H/C	Cath-it	908420	M/L gloves	1	
Richardson H/C	Cath-it	908430	L/XL gloves	1	

### STERILE LUBRICATING GEL

NICE guidelines (2012) state that urethral trauma and discomfort will be minimised if an appropriate single use sterile lubricating or anaesthetic gel is used.

*“Use lubricant from a sterile single use container to minimise urethral discomfort, trauma and the risk of infection.”<sup>1</sup>*

Must not be used in those with hypersensitivity to ingredients

**Instillagel** – anaesthetic gel is available on the continence formulary and FREE emergency stock is available at all Community Nurse bases. Please contact Clinimed representative for more information on 07970 090217.

**Prescription – Order 3 items initially, then only re-order 1 item at a time.**

**NB single items not a pack**

Category		Sterile Lubricant for Catheterisation			
Indications and features		Reduces the risk of urethral trauma. Recommended for both male and female patients. Suitable for supra-pubic changes.			
Manufacturer	Appliance	Product code	Size	Quantity	
Clinimed	Instillagel Pharmacy (P) medicine: needs to be prescribed or used via PGD	40-006	6ml [female use]	1	
Clinimed	Instillagel Pharmacy (P)	40-011	11ml [male use]	1	

	medicine: needs to be prescribed or used via PGD				
Optimum Medical	OptiLube Water soluble	1125	6ml	1	
Optimum Medical	OptiLube Water soluble	1126	11ml	1	

## CLEANSING SOLUTIONS

Sterile normal saline solution for topical irrigation and cleansing. Available in packs of 25 but please ONLY order x 3 pods for each patient. Order 1 pod when ordering a replacement catheter.

Category	Cleansing solutions				
Indications and features	Sterile normal saline solution for topical irrigation and cleansing				
Manufacturer	Appliance		Size	Quantity	
CD Medical	Irripod		Pod x 20ml	1	

## INTERMITTENT SELF CATHETERISATION

Intermittent Catheters indications for use include:

Patients with incomplete bladder emptying, e.g. Neurogenic bladder disorders, particularly patients with multiple sclerosis, spina bifida, diabetes and spinal cord injury. It may also be used to prevent stricture reoccurrence following stricture surgery.

Performing intermittent catheterisation protects the upper urinary tract from reflux and reduces the threat of encrustation and infection.

Age should not prevent Intermittent Self Catheterisation (ISC) being considered as an option for patients as it is recognised that it is a safe and valuable procedure for older people with significant post void residuals.

There are various intermittent catheters available and patients should be assessed on an individual basis and given the choice depending on dexterity, environment, lifestyle, etc.

*“Intermittent catheterisation should be used in preference to an indwelling catheter if it is clinically appropriate and a practical option for the patient”(1)*

The continence/urology specialist nurses have samples available if required to allow patients to choose the correct catheter, and full training will be given by the continence specialist/urology nurses to both patients and carers.

Lubricating gel is not needed with these catheters as they are pre-lubricated

These catheters are for single use only

Pack sizes vary depending on manufacturer

**Prescription – Order will depend on how many catheters patient uses a day. Some patients may use 5-6 a day and may use a selection of different types depending on lifestyle.**

### Female ISC

Category	Intermittent catheters				
Indications and features	Catheters for intermittent bladder drainage. Single Use only				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Clinimed	Curan Lady	CL plus Ch size	08ch – 14ch	30	<b>1<sup>st</sup> line</b>
Teleflex	Liquick base	6301[Ch]  [Insert Ch required in code above]	06ch – 14ch	60	<b>2<sup>nd</sup> line</b>
B Braun	Actreen Mini	2280 plus Ch size	10ch –14ch	30	<b>3<sup>rd</sup> line</b>

## Male ISC

Category	Intermittent catheters				
Indications and features	Catheters for intermittent bladder drainage. Single Use only				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Teleflex	Liquick base	6300[Ch] [Insert Ch required in code above]	10ch – 16ch	60	<b>1<sup>st</sup> line</b>
B Braun	Actreen Hi Lite	2382 plus Ch size then E	08 – 16ch	30	<b>2<sup>nd</sup> line</b>
Rochester	Hydrosil gripper	736 plus Ch size	10 – 18ch	30	<b>3<sup>rd</sup> line</b>

**NB: Alternative catheter are available if patients have specific needs or dexterity issues, please speak to Continence Specialist Nurses for advice**

### ISC catheters with bags attached:

**These catheters are ideal for patients when travelling or if toilet facilities are not accessible or appropriate.**

#### Female:

Category	Intermittent catheters				
Indications and features	Catheters for intermittent bladder drainage with bag attached. Single Use only				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Wellspect	Lofric Hydro Kit	423 plus Ch size then 25	08 – 18ch	20	<b>1<sup>st</sup> line</b>
Braun	Actreen Glyc set	2263 plus Ch size then E	06 – 16ch	30	<b>2<sup>nd</sup> line</b>

#### Male:

Category	Intermittent catheters				
Indications and features	Catheters for intermittent bladder drainage with bag attached. Single Use only				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Wellspect	Lofric Hydro Kit	420 plus Ch size then 25	08 – 18ch	20	<b>1<sup>st</sup> line</b>
Braun	Actreen Glyc set	2262 plus Ch size then E	08 – 18ch	30	<b>2<sup>nd</sup> line</b>

## INDWELLING CATHETERS FOR URETHRAL AND SUPRA-PUBIC USE

Indwelling urinary catheterisation must be only undertaken as the last resort after all other alternatives have been considered. This is due to the increased risk of catheter associated urinary tract infection (CAUTI) with an indwelling catheter.

It is the responsibility of the health care professional to ensure they remain competent in the assessment process, management and procedures for catheterisation. Training is available via Learning & Development.

*“Catheterisation is an aseptic procedure and should only be undertaken by healthcare workers trained and competent in this procedure”(1)*

Wherever possible use smallest gauge catheter 12-14ch for urethral use. Use larger gauge 16-18ch for supra-pubic use.

All catheters in inpatient areas (with the exception of some specialist areas) are standard length to reduce the risk of a female catheter being inserted into a male patient inadvertently. Female catheters are available on the Continence Care Formulary **if required**.

**Prescription – Order 3 catheters initially (where long term catheterisation is indicated) and then only re-order 1 catheter at a time.**

**Long Term Urinary Catheters – up to 12 weeks:**

Category	Self-retaining long term indwelling all silicone catheter (up to 12 weeks)				
Indications and features	<b>STANDARD length – use in male, female &amp; supra-pubic:</b>				
Manufacturer	Appliance	Product code	Size	Quantity	
Dover <b>**Please note a plastic cap is inserted into the leg bag insertion port – please remove this prior to inserting a leg / night bag or valve**</b>	Covidien  All silicone with pre filled syringe	8887805128- 8887805227	<b>12ch - 18ch standard</b>	1	<b>1<sup>st</sup> line</b>
Teleflex	Rusch Brilliant Aquaflate  All silicone with pre filled syringe + empty syringe for balloon deflation	DA3101[Ch]  [Insert Ch required in code above]	<b>12ch – 24ch Standard</b>	1	<b>2<sup>nd</sup> line</b>

Specialist **open ended catheters** (for urethral or supra pubic use) can offer an alternative for those patients experiencing problems with repeated bypassing and blockage. There is no tip to the end of the catheter creating an additional drainage channel. For more information on these products or any alternative catheter please contact the Continence Team or Urology Specialist Nurse

Manufacturer	Appliance	Product code	Size	Quantity	
Folysil X-tra	Coloplast Silicone open ended catheter with pre-filled syringe + empty syringe for balloon deflation	AA8C[Ch] [Insert Ch required in code above]	<b>12ch - 18ch Standard</b>	1	<b>1<sup>st</sup> line</b>

**Tiemann Tip Catheters** – these catheters have a tapered curved tip which is designed to negotiate the prostatic curve – To be used for problematic catheterisation in men with enlarged prostate only

**ONLY TO BE USED ON ADVICE FROM UROLOGY OR CONTINENCE SERVICE**

## CATHETER STABILISATION DEVICES

It is essential that the catheter is secured properly to help to reduce pulling on the catheter which will minimise the risk of urethral trauma. “Best practice suggests catheters are secured to avoid trauma” (2)

The G-straps can be worn around the thigh and fastened securely. Abdominal G-straps are also available. They can be washed up to 5 times and re-used.

**G-strap - Order 1 box of 5 initially and re-order.1 box every 6 months**

Category	Catheter Tube Stabilisation Device <b>G Strap</b>				
Indications and features	Reduces the risk of trauma to the urethra by holding the catheter securely in place on the thigh.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Coloplast	Simpla “G” Strap	383001	Adult 45cm	5	<b>1<sup>st</sup> line</b>
Coloplast	Simpla “G” Strap	383003	Abdominal 90cm	5	<b>1<sup>st</sup> line</b>
Bard	Comfasure retainer strap	SM3404	Small	5	<b>2<sup>nd</sup> line</b>
Bard	Comfasure retainer strap	AD3403	Adult	5	<b>2<sup>nd</sup> line</b>

Bard	Comfasure retainer strap	AB3405	Abdominal	5	2 <sup>nd</sup> line
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**Adhesive strap – Fixation Devices - Order 1 box initially and re-order every month.**

Category	Catheter Tube Stabilisation Device				
Indications and features	Designed to fix and support urethral and supra-pubic catheters at the catheter bifurcation The adhesive type straps can be worn for up to seven days				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Optimum Medical	Ugo Fix Gentle catheter clip	3004	N/A	5	1 <sup>st</sup> line
Bard	Statlock **Not to be used for patients with friable skin**	FOL0102DT	N/A	5	2 <sup>nd</sup> line

## CATHETER VALVES

Ideally these should be considered as first choice as opposed to free drainage via a urine bag, unless a medical reason is stated or by patient choice.

**Contra-indications:** reduced bladder capacity, no bladder sensation, cognitive impairment, poor manual dexterity and renal impairment.

**Please note catheter valves should not be used for patients following post-radical prostatectomy.**

Catheter valves should be changed every 5-7 days

Most patients connect to a night drainage bag to prevent waking at night

The catheter valve must be released regularly every 2 to 4 hours or as required to prevent over distension of the bladder

**Prescription – Order 1 box of (5) catheter valves initially, then re-order 1 box at a time.**

Category	Catheter Valves			
Indications and features	Allows drainage of urine from a catheterised bladder without the need for a permanently attached drainage bag. Lever tap / slide tap options.			
Manufacturer	Appliance	Product code	Pack size	
MacGregor Healthcare Ltd	Q Flow Catheter valve	21104204	5	1 <sup>st</sup> line
Clinisupplies	ProSys Valve	PCV3942		2 <sup>nd</sup> line

## STERILE LEG BAGS

Leg bags should remain connected for approximately 5-7 days. More frequent change is normally unnecessary and breaks the closed system, thereby increasing the risk of infection.

**Prescription – Order 1 box of 10 leg bags initially and then re-order 1 box of 10 every alternate month.**

**\*\*Please note that when patients are discharged from the Acute sector with an indwelling catheter, they should be provided with a seven day supply of leg bags / night bags\*\***

Category	Leg Bags				
Indications and features	Leg bags can be worn in different positions on the leg. The intended position i.e. thigh or calf will determine the length of the inlet tube. Some leg bags have anti kinking tube. <b>Also available in 350mls and 750mls bag capacity</b>				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Clinisupplies	ProSys sterile leg bag (including 1 pair non latex gloves and 1 pair straps)	PH500S-LT (lever tap)	500ml (short tube)	10	<b>1<sup>st</sup> line</b>
		P500S (click – close tap)	500ml (short tube)	10	
Clinisupplies	ProSys sterile leg bag (including 1 pair non latex gloves and 1 pair straps)	PH500L-LT (lever tap)	500 ml (long tube)	10	<b>1<sup>st</sup> line</b>
		P500L (click – close tap)	500 ml (long tube)	10	
Bard	Uriplan	D5M	500ml (10cm inlet)	10	<b>2<sup>nd</sup> line</b>
Bard	Uriplan	D5L	500ml (30cm inlet)	10	<b>2<sup>nd</sup> line</b>
Coloplast	Simpla Profile	21573	500ml (6cm tube)	10	<b>3rd line</b>
Coloplast	Simpla Profile	21574	500ml (25cm tube)	10	<b>3rd line</b>

Non – sterile leg bags are **not** to be used with indwelling urinary catheters but are available for use with penile sheaths:

Manufacturer	Appliance	Product code	Size	Quantity in pack	
Coloplast (Non Sterile)	Simpla Profile	21584	500ml (50cm adjustable tube)	10	<b>1<sup>st</sup> Line</b>

## Specialist Bags

Category	Specialist Bags				
Indications and features	Simpla Plus Syphon Bag – sterile, self-emptying system for those with limited movement. Suitable for wheelchair users				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Coloplast	Simpla Plus Syphon	21566	750mls (6cm tube)	10	
Coloplast	Simpla Plus Syphon	21567	750mls (25cm tube)	10	
Indications and features	Belly bags to worn round the waist belted, can be <b>used for up to 28days</b>				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Teleflex	Rusch Belly Bag	B1000	1000mls	1	
Teleflex	Rusch Belly Bag	B1000CT	1000mls with extended drainage tube	1	
Teleflex	Rusch Belly Bag	B1000P	1000mls – needle free sample port	1	

## LEG BAG SLEEVES

These leg bag sleeves provide much better support than leg straps which are provided with the leg bag. They reduce the risk of the straps cutting the patient's leg and reduce the risk of urethral trauma by securing the bag correctly

These can be worn on the thigh or on the calf. Patient's leg must be measured to ensure correct fit.

### Prescription – Order 1 box of 5 initially and re-order 1 box every 6 months

Category	Leg Bag Holders				
Indications and features	Provides much better support than leg straps. Latex-free fabric. The sleeve encases the leg bag to hold it against the patient's leg. Washable and reusable				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Clinisupplies	ProSys leg bag sleeve	PLS3881	Small 24-40cm	4	
Clinisupplies	ProSys leg bag sleeve	PLS3904	Medium 36 – 50cm	4	
Clinisupplies	ProSys leg bag sleeve	PLS3928	Large 40 – 65cm	4	

## NIGHT DRAINAGE BAGS

**Prescription – Order 30 Night Bags (3 packs) initially and re-order 3 packs every month**

Category	Night Drainage Bags Non Drainable, Non Sterile, Single-Use Only				
Indications and features	Single-use only that require changing every night. Night bags should be directly connected to the leg bag to maintain a closed system. The position of the bag should be below the bladder level to enhance drainage. A night stand should be used to support the night bag. They must be disposed of correctly following Trust guidelines.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Optimum Medical	Ugo 9	9/NS/SU/DO	2 litre	10 Replace every night	<b>1st line</b>
Coloplast	Simpla S2	320902	2 litre	10 Replace every night	<b>2nd line</b>

## STERILE DRAINABLE NIGHT BAGS

Sterile drainable night bags **must** only be used on patients who remain in bed and/or where the night bag is attached directly to the catheter.

All night bags should be placed on a stand so the tap is clear of the floor.

All bags must stay in place for 5-7 days. There is no need for a spare box of sterile night bags in the patient's house as one box should last ten weeks.

**Prescription – 1 box of 10 drainable night bags initially and then re-order 1 box of 10 every alternate month**

Category	Night Drainage Bags				
Indications and features	Sterile drainable night bags only to be used with patients who remain in bed and/or where the bag is attached directly to the catheter				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Clinisupplies	ProSys	P2000-LT	2 litre with lever tap	10 replace every 5-7days	<b>1<sup>st</sup> line</b>
Coloplast	Simpla S5	346145	2 litre with lever action tap (100cm tube)	10 replace every 5-7days	<b>2nd line</b>
Bard	Uriplan	D813131	2 litre with outlet tap (98cm tube) available in lever tap and T tap	10 replace every 5-7days	<b>3rd line</b>

## CATHETER STANDS

These are not available on FP10 prescription but can be obtained from the relevant companies who are supplying leg and night bags as a complementary item as part of the prescription.

**\*\*Please note: patients discharged from the Acute sector, with an indwelling catheter, should be discharged with a catheter stand – as these are single patient use and are issued whilst in hospital\*\***

## SHEATHS

Can offer a valuable alternative method of urinary incontinence management in men. They are single use, adhesive sheaths applied to the penis, then attached to a drainage bag.

Appropriate assessment must be undertaken by an appropriately trained healthcare professional.

Patients must be measured properly including girth and length.

Sheaths may be left in place for 1-3 days between changes

*Patients must meet the following criteria for a sheath to be successful:*

- *A non-retracted penis*
- *Healthy unbroken skin*
- *No risk of sheath being pulled off*
- *Reasonable mental awareness, manual dexterity and good eyesight or carer availability*

**Trial packs of sheaths and measuring devices are available, please contact the Manufacturer (see below).**

**Please ensure that the sheath is working effectively before prescribing.**

**Prescription – Order 1 box of 30 sheaths initially and re-order 1 box of 30 every month**

Category	Incontinence Sheaths				
Indications and features	Alternative method of urinary incontinence management in men. Single use adhesive sheaths applied to the penis then attached to a drainage bag.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Hollister	In view  Non latex with anti kinking funnel	Special: 971 (add size)  Standard: 972+add size  Extra: 973+add size	Available in 25mm to 41mm diameter, styles: <ul style="list-style-type: none"> <li>• Special</li> <li>• Standard</li> <li>• Extra</li> </ul>	30	<b>1<sup>st</sup> line</b>
Coloplast	Optima Non latex, self sealing.	Shorter: 221+ add size  Standard: 220+add size	Available in shorter length: 21mm, 25mm,30mm, 35mm diameter, styles: Available in standard length:	30	<b>2<sup>nd</sup> line</b>

			25mm, 28mm, 30mm, 35mm, 40mm diameter		
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### RETRACTED PENIS POUCH

Category	Retracted Penis Pouch				
Indications and features	Alternative method of urinary incontinence management in men. Single use adhesive urinary pouch applied to the penis then attached to a drainage bag.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Hollister	Retracted Penis Pouch with Flexend skin barrier	9873	One size: Cut to fit. 1-1.5inches in length.	10	

## CATHETER MAINTENANCE SOLUTIONS

Catheter maintenance solutions should only be used where clinically indicated. Rationale for use, indication of proposed duration of regime and a review date should be documented.

There is limited clinical evidence regarding the use of catheter maintenance solutions and advice is that they should not be used routinely. Risk of infection is increased each time the closed system is broken

They are available on prescription for the treatment of specific conditions but should only be used following thorough assessment as they can cause shedding of epithelial cells within the bladder.

EPIC 3 guidance suggests that there is no benefit in using these solutions in preventing CAUTI's and RCN Catheter Care 2012 states that they should not be used to unblock a catheter. There are a number of different solutions, each with their own indications for use and therefore the manufacturer's instructions should always be followed

It is important to diagnose the exact reason for blockage to ensure the correct course of treatment.

Record in patient notes including catheter passport the pH daily, date of catheterisation and length of time it remains patent. If the catheter blocks, cut it open lengthways and observe for crystal formation or debris. The 'life' of 3-5 catheters should be monitored to establish a pattern.

Normal pH 6-7. Bacteria from catheterisation secrete the enzyme urease which breaks down urea (in urine) which releases ammonia. Ammonia is alkaline which raises pH and causes crystals to form. Thus alkaline urine (high pH) is a strong indicator of potential blockage due to encrustation.

Even if there is no sign of the catheter blocking, research has shown that the critical pH is 6.8 at which point crystals will begin to form in and around the catheter.

Once encrustation is diagnosed and a pattern established, the use of catheter maintenance solutions and planned catheter changes can be adopted to reduce encrustations and prolong catheter life.

Solutions bathe the catheter lumen and tip to dissolve the crystals and re-acidify the urine which helps to prevent further encrustation.

**Rationale:** Two sequential 'washouts' of acidic solution can be significantly more effective in dissolving encrustation than one larger amount.

## Selecting the right solution:

### Sodium Chloride (NaCl 0.9%):

Category	Catheter maintenance solutions				
Indications and features	Is recommended to flush out debris and mucus. It has a purely mechanical action <b>Do not use for encrustation</b>				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Urotainer NaCl 0.9%	Urotainer	FB99849	50ml	1	

### Citric Acid 3.23%:

Category	Catheter maintenance solutions				
Indications and features	Consider if pH >6.8 Is recommended for 'blockers' Can be used prophylactically to prevent encrustation Measure pH to determine how often to use it Maximum dosage is twice daily Do not use for debris / mucus				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Urotainer Twin Suby G 3.23% citric acid	Urotainer	9746609	2 x 30ml	1	

### Citric Acid 6%:

Category	Catheter maintenance solutions				
Indications and features	Consider if pH >7.7 and citric acid 3.23% is ineffective Is recommended prior to changing a blocked catheter to reduce urethral trauma For use with persistent 'blockers' Maximum dosage is twice daily If irritation is experienced stop Do not use for debris / mucus				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Urotainer Twin Solution R 6% citric acid	Urotainer	9746625	2 x 30ml	1	

### Instilling solutions:

- Use an aseptic technique including sterile gloves
- Follow manufacturers guidelines
- Instil using gravity; do not exert pressure (to avoid damaging bladder mucosa).

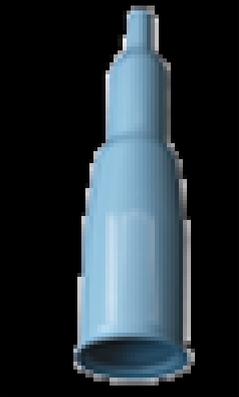
Category	Bladder Infusion Kit				
Indications and features	The bladder infusion kit maintains the closed system and is suitable for patients who have more than 2 maintenance solutions per week				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
L.IN.C Medical	Bladder Infusion it	MCI/701	N/A	10	

## URINALS / URINE DIRECTORS

There is a wide range of products available on FP10

Patients will require assessing for the appropriateness of using urinals, due to many factors including hand dexterity, eye sight and co-ordination. For further advice contact Continence Team

	<ul style="list-style-type: none"> <li>• Female Bridge Urinal with tap</li> <li>• Helpful for ladies with restricted movements/ mobility problems or to assist carer</li> <li>• Useful for ladies in wheelchairs</li> <li>• Patients need to be sitting for effective use</li> <li>• Useful for ladies who void large amounts of urine as a 2litre drainage bag can be attached to the urinal</li> </ul>	<p>Beambridge Medical 6.18T</p> <p>PIP Code 267-5304</p>
	<ul style="list-style-type: none"> <li>• Useful for ladies who are unable to sit on the toilet to pass urine and can be attached to a 2 litre urine drainage bag</li> </ul>	<p>Beambridge Medical 6.40</p> <p>PIP Code 277-1111</p>
<p><b>Lady funnel – Female Urine directors / positioners</b></p>		
	<ul style="list-style-type: none"> <li>• Helpful for ladies with mobility problems or to assist carer</li> <li>• For ladies who void large amounts of urine.</li> </ul>	<p>Beambridge Medical 6-26</p> <p>PIP Code 271-7221</p>
	<p>Must be used with the lady sitting on the edge of the bed or chair.</p>	<p>Beambridge Medical 6-45</p> <p>PIP Code 237-6291</p>
<p><b>Lady Jug</b></p>		

 <p><b>Urine directors / Positioners Male</b></p>	<ul style="list-style-type: none"> <li>• Male Funnel</li> <li>• Useful for men with retracted penis or difficulty in directing flow</li> <li>• Helpful for males with mobility problems</li> <li>• Can be used to aid toileting where there is difficulty managing a urinal by attaching a 2 litre drainage bag</li> <li>• Available in 4 sizes</li> </ul>	<p>Beambridge Medical:</p> <p>Male funnel Male funnel mini Youth funnel Adult funnel</p> <p>Product code 6- 35 6-35M 6- 38 6-37</p> <p>(PIP code) 262-5960 301-0667 340-0934 340-1007</p>
 <p><b>Male draining jug with tap</b></p>	<ul style="list-style-type: none"> <li>• Helpful with patients with mobility problems</li> <li>• For men who void large volumes of urine a 2 litre drainage bag may be used to accommodate larger volumes of urine</li> </ul>	<p>Beambridge Medical 6-50T</p> <p>(PIP code) 6-50T</p>
 <p><b>Male Pocket Urinal</b></p>	<ul style="list-style-type: none"> <li>• Useful for men when travelling</li> <li>• Small enough to put in pocket</li> <li>• Advise re washing using soapy water, do NOT use disinfectant or bleach.</li> <li>• Advise re turning urinal inside out to wash &amp; dry</li> <li>• Advise re-checking rubber lining is not perished to avoid accidents.</li> </ul>	<p>Manfred Sauer</p> <p>URlbag Male</p>
 <p><b>Female Pocket Urinal</b></p>	<ul style="list-style-type: none"> <li>• Useful for women when travelling</li> <li>• Small enough to put in pocket</li> <li>• Advise re washing using soapy water, do NOT use disinfectant or bleach.</li> <li>• Advise re turning urinal inside out to wash &amp; dry</li> <li>• Advise re-checking rubber lining is not perished to avoid accidents.</li> </ul>	<p>Manfred Sauer</p> <p>URlbag F</p>

## **BOWEL FORMULARY**

### **Guidelines for the use of Trans Anal Irrigation (TAI) as a Treatment for Chronic Constipation Refractory to Standard Treatments in Adults**

#### **What is Trans Anal Irrigation (TAI)?**

TAI is a treatment for constipation which allows washout of the lower bowel. Instillation of water produces rectal distension and is thought to stimulate peristalsis. It is self-administered by the patient at home, after adequate training in the use of equipment designed for this purpose. This is minimally invasive, safe and effective for the management of chronic constipation which is refractory to standard treatments. The purpose of this document is to provide criteria for the use of TAI.

#### **Efficacy & Safety**

A review by Emmett et al (2015) concluded the success rate of TAI is around 50%. This can be considered adequate given the chronic, refractory nature of symptoms and the simple, reversible nature of this treatment (Christensen et al, 2010). Etherson et al (2016) found around 60% of patients with chronic constipation refractory to all other non-surgical treatments used TAI for an extended period of time (1-2 years or more) and felt their symptoms were significantly improved.

TAI has been extensively reported as simple to perform and safe (Christensen et al, 2009), with the estimated risk of the most serious complication (TAI induced colonic perforation) being less than 0.0002% per irrigation (Emmanuel et al 2013). A systematic review and meta-analysis by Emmett et al (2015) found that minor side-effects (abdominal cramps, ano-rectal pain, anal canal bleeding, leakage of irrigation fluid and expulsion of rectal catheter) were experienced by some patients.

#### **Eligibility for use**

##### **Patient fulfils all of the following:**

- Diagnosis (following bowel assessment) of chronic constipation which may be idiopathic, IBS-C, opioid induced, neurological or result from obstructive defaecation syndrome
- Inadequate response to at least 2 types of laxatives used at maximum tolerated dose
- Inadequate response to biofeedback therapy and /or lifestyle changes
- Inadequate response to specialist initiated drugs if indicated and available locally e.g. Prucalopride, Lubiprostone, Linaclotide, Naloxegol
- Symptoms present > 6 months

##### **Patient fulfils one of the following:**

- Admission to hospital or presentation to urgent care / A&E with chronic constipation
- Loss of earnings due to symptoms
- PAC-QOL >50

**NB Patients with severe (bed-bound) neuro-constipation need not fulfil severity criteria, biofeedback & lifestyle measures. Those at risk of faecal incontinence need not have full trials of laxatives and prokinetics.**

TAI can only be initiated by the Durham Constipation Clinic. Community patients who are identified as potentially benefitting from TAI, will be discussed at the monthly DCC MDT by their Continence Specialist Nurse before TAI is initiated. There is a range of products available which may benefit different clinical presentations. Where patients can manage any product, the most cost effective option should be considered at the 3 month review appointment as per NTAG guidelines.

**NB** Irypump (BBraun) is the most cost-effective equipment for long term treatment but has the highest start-up cost.

#### **How to prescribe**

Following initiation of TAI, the specialist nurse will advise the patient's GP, in writing, of what to prescribe (including name and codes) and frequency of ordering. On discharge from the Specialist Service, all patients are given contact details in case of queries or difficulties. On-going prescriptions are the responsibility of the GP.

## When to stop TAI

For those patients with refractory bowel dysfunction whose symptoms improve with TAI, it should be considered as a long term management solution. The therapeutic effect may reduce over time and treatment should be discontinued if it becomes ineffective (following adjustments from the specialist team). If any of the following occur, TAI should be discontinued and the Specialist Nurse consulted for further advice: **Pregnancy, colorectal cancer, change in bowel habit until cancer is excluded, during chemotherapy, during episodes of active IBD, anal /colo-rectal stenosis, active diverticulitis, ischaemic colitis, for 3 months post rectal /colo-rectal surgery, for 12 months post radical prostatectomy, for 4 weeks post polypectomy.**

### References:

Christensen P, Krogh K, Buntzen S, Payandeh F, Laurberg S, (2009) "Long-term outcome and safety of transanal irrigation for constipation and faecal incontinence," Diseases of the Colon and Rectum, vol. 52, no. 2, pp. 286–292  
 Christensen P, Krogh K. (2010) *Transanal irrigation for disordered defecation: a systematic review.* Scandinavian Journal of Gastroenterology. 45(5): pp517–27  
 Emmanuel A.V, Krogh K, Bazzocchi G et al. (2013) "Consensus review of best practice of transanal irrigation in adults," Spinal Cord, vol. 51, no. 10, pp. 732–738  
 Emmett C.D, Close H.J, Yiannakou Y, Mason J.M (2015): "Trans-anal irrigation therapy to treat adult chronic functional constipation: systematic review and meta-analysis" BMC Gastroenterology 15:139 DOI 10.1186/s12876-015-0354-7  
 Etherson K.J, Minty I, Bain I. M, Cundall J, Yiannakou Y (2017) "Transanal Irrigation for Refractory Chronic Idiopathic Constipation: Patients Perceive a Safe and Effective Therapy" Gastroenterology Research and Practice, Volume 2017, Article ID 3826087, 6 pages Hindawi Publishing Corporation <https://doi.org/10.1155/2017/3826087>

## Adult Trans-Anal Irrigation (TAI) Pathway

Patient referred for consideration of TAI (red flags excluded)

### Indications for use: (note Appendix 1 may apply locally)

Following bowel assessment patient may be diagnosed with:

**Chronic constipation** (may be idiopathic, IBS-C, opioid induced, neurological or result from obstructive defaecation syndrome), which has had an:

- Inadequate response to at least 2 types of laxatives used at maximum tolerated dose
- Inadequate response to biofeedback therapy and /or lifestyle changes
- Inadequate response to specialist initiated drugs if indicated and available locally e.g. Prucalopride, Lubiprostone, Linaclotide, Naloxegol
- Symptoms present > 6 months

**Chronic faecal incontinence** (may be idiopathic, IBS-D, neurological or result from obstructive defaecation syndrome), which has had an:

- Inadequate response to biofeedback therapy and /or lifestyle changes
- Inadequate response to constipating medication
- Symptoms present >6 months

Absolute Contra-Indications	Cautions
Anal or colo-rectal stenosis	Severe diverticulosis (diffuse disease or dense sigmoid disease)
Active Inflammatory Bowel Disease (IBD)	Previous diverticulitis or diverticular abscess
Acute diverticulitis	Long term steroid therapy
Ischaemic colitis	Use of rectal medication
Colorectal cancer	Radiotherapy to the abdominal or pelvic region
Within 3 months of rectal / colo-rectal surgery	Previous anal, colo-rectal or pelvic surgery
Within 4 weeks of polypectomy	Faecal impaction
During chemotherapy	Painful anal conditions including fissure, fistula, haemorrhoids, solitary rectal ulcer syndrome
Within 12 months post radical prostatectomy	Prone to rectal bleeding or on anticoagulant therapy (not including aspirin or clopidogrel)
Pregnancy (even if an established user)	Severe autonomic dysreflexia
	During conception
	Cognitive impairment
	Unstable metabolic conditions (frail, renal or liver disease, consider use of saline, monitoring electrolytes)

## PRODUCT INFORMATION

<b>PRODUCT</b>	<b>PACK CONTENTS</b>	<b>CODE</b>	<b>FREQUENCY (based on 15 irrigations per month)</b>
Aquaflush Quick	2L water bag, pump, tube, cones	AFQS (5 cones) AFQM (15 cones)	Once only (starter set) 1 per month
Aquaflush Lite	1.2L water bag, pump, tube, cones	AFLS (5 cones) AFLM (15 cones)	Once only (starter set) 1 per month
Aquaflush Compact	1 hand pump, cones	AFCS (5 cones) AFCM (15 cones)	Once only (starter set) 1 per month
Irypump S set	Electric pump, charger, water container, tubing, reusable cone	29120E	1 per 3 years
Irycone +	Tubing, reusable cone	29220E	1 per 3 months
Irypump water container	Water container	29240	1 per 6 months
Navina Smart System	Smart control unit (touch sensitive), water container, tubes, 2 rectal catheters	69009	400 uses or 2 years
Navina Classic System	Classic control unit (hand pump), water container, tubing, 2 rectal catheters	69005	1 per 6 months
Navina Consumable Set	Water bag, 15 rectal catheters		1 per month
Peristeen Accessory Unit	15 rectal catheters, water bag	29122	1 per month
Peristeen Accessory Unit (small)	15 rectal catheters (small), water bag	29127	1 per month
Peristeen Full System	Control unit, water bag, tubing, 2 rectal catheters	29121	1 per 6 months
Qufora Irrisedo Cone System	15 cones, 1 water bag with pump	QTM	1 per month
Qufora Irrisedo Mini System	15 cones 1 hand pump	53601- 015	1 per month
Qufora Irrisedo Balloon System Base Set (regular)	Control unit, water bag, 2 rectal catheters	58101- 002	1 per 6 months

Qufora Balloon System Accessory set (regular)	Water bag, 15 rectal catheters (regular)	58201- 015	1 per month
Qufora Balloon System Accessory set (small)	Water bag, 15 rectal catheters (small)	58202 - 015	1 per month

## ANAL PLUGS

Anal plugs are devices which are inserted into the rectum (like a suppository) and help to prevent bowel leakage.

This product should not be used without assessment by an appropriate health professional

Category	Peristeen Anal plugs				
Indications and features	They are made from medical grade foam that is slightly absorbent but can allow air to pass through. Individual plugs are covered in a dissolvable film which keeps the plug in a size and shape similar to a suppository or small tampon for easy insertion. Once in the rectum, moisture from the lining of the rectum dissolves the film and the anal plug expands to a cup or mushroom shape. They can stay in place for a maximum of 12 hours but must be removed in order to pass stool. They have a string attached for easy removal.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Coloplast	Peristeen anal plug - foam, cup-shaped devices that sit inside the rectum	1450	Small	20	
		1451	Large	20	
Category	RENEW Anal plugs:				
Indications and features	Renew plugs only need to be changed when opening bowels.				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Renew Medical	Renew Insert Anal Plug	FG 730	Regular	30	
		FG 731	Large	30	

## FAECAL COLLECTOR

Correct fitting is important for comfort and to ensure they are effective, you are recommended to ask a health care professional with experience of faecal collectors for help.

Category	Drainable Faecal collector				
Indications and features	Maintain skin integrity and/or protect perianal skin from breakdown. Contains odour & increase patient comfort				
Manufacturer	Appliance	Product code	Size	Quantity in pack	
Hollister Faecal Collector	Hollister Ltd	9822	500ml	10	
		9821	1000ml	10	

**There are other faecal collectors available please ask your Continence Service for more information**

References:

- 1) Loveday HP, Wilson JA, Pratt RJ et al. 2013. Epic 3: National Evidence-Based guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England. *Journal of Hospital Infection*; 86S1 : S1-S70.
- 2) National Institute for Health and Care Excellence. 2012. Guidance 139. Infection: Prevention and Control of Healthcare-associated Infections in Primary and Community care. London: National Institute for Health and Care Excellence
- 3) RCN Catheter Care....