

IPC Bulletin for Staff providing Domiciliary Care (Care at Home)

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Understanding urinary tract infections in the adults over 65 years

IMPORTANT: Urine dipsticks are unreliable in diagnosing UTIs in adults over 65 years and in catheterised adults as it will detect the bacteria present in the bladder/urine without an infection.

The diagnosis of urinary tract infection (UTI) is difficult in those who are over 65 years, as people within this age group are more likely to have bacteria present in their urine which is not causing harm. This is called asymptomatic bacteriuria and doesn't require antibiotic treatment. By 80 years, half of older adults in care, and most with a urinary catheter, will have bacteria in their bladder/urine.

People in this age group frequently receive unnecessary antibiotic treatment for asymptomatic bacteriuria which puts them at risk of future antibiotic resistance, missed correct diagnosis or developing *Clostridioides difficile* infection.

Early recognition and treatment of a UTI is important, as 45% of *E. coli* bloodstream infections are caused by a UTI.

When to seek medical advice

If the service user has a **new onset of dysuria** (pain on passing urine) alone

OR

If the service user has **2 or more of the following symptoms:**

- ◆ Temperature 1.5°C above normal twice in the last 12 hours
- ◆ New frequency or urgency to pass urine
- ◆ New incontinence
- ◆ New or worsening delirium/debility/confusion
- ◆ Visible haematuria (blood in the urine)

If **fever and delirium only** it may not be a UTI so an assessment by a medical professional is required.

If catheterised, also check for kinks in the catheter tubing or catheter blockage and seek advice .

Think '**SEPSIS**'

A UTI can lead to sepsis or pyelonephritis (infection of the kidneys).

It is vital that medical advice is sought if the client has any of the following symptoms:

- ◆ Kidney pain/tenderness in back, under ribs
- ◆ Shaking chills (rigors) or temperature over 37.9°C or below 36°C
- ◆ New or different flu-like illness
- ◆ Nausea/vomiting

If trained, check the service user's vital signs. However, doing this must not cause a delay in seeking medical advice.

When to send a specimen

The GP surgery will request a sample if they suspect that a UTI is likely.

Do not take urine samples to the surgery unless requested.

Specimen collection

- ◆ Assist the service user to collect a mid-stream or clean catch specimen before they start antibiotics if prescribed.
- ◆ Use the specimen container supplied by the GP surgery as this contains boric acid which preserves bacterial numbers for up to 72 hours.
- ◆ Fill the container with urine to the 'fill line' and invert several times to mix the urine with the preservative.
- ◆ If you need a catheter specimen, only take urine from the sampling port, never the bag, using a non-touch technique.



Adults under 65 years

Guidance for other age groups varies.

- ◆ All men under 65 years with any UTI symptoms require further assessment.
- ◆ Women under 65 years of age also require further medical assessment if they have any UTI symptoms.

What's new:

IPC training event for Domiciliary Care and Care Homes

10th October, 2022 @ £150.00 per delegate

www.eventbrite.co.uk/e/infection-prevention-and-control-training-event-for-care-homes-tickets-379787182687

Visit our website to find lots of IPC resources, many of which are free to download.

www.infectionpreventioncontrol.co.uk

Call us on 01423 557340.

