Pathway: Diagnosis of Urinary Tract Infection (UTI)

Urinary Symptoms in Adult Women <65 years old do not culture routinely \(^{(1)}\)
In sexually active young men and women with urinary symptoms consider Chlamydia trachomatis

Urinary Symptoms in Adult Women > 65 years

- Do not send urine for culture in asymptomatic elderly with positive dipsticks
- Only send urine for culture if two or more signs of infection, especially dysuria, fever >38° or new incontinence
- Do not treat asymptomatic bacteriuria in the elderly, as it is very common
- Treating does not reduce mortality or prevent symptomatic episodes, but increases side effects & antibiotic resistance

Urinary Symptoms in women and men with catheters

- Do not treat asymptomatic bacteriuria in those with indwelling catheters, as bacteriuria is very common and antibiotics increase side effects and antibiotic resistance
- Treatment does not reduce mortality or prevent symptomatic episodes, but increase side effects and antibiotic resistance
- Only send urine for culture in catheterised if features of symptomatic infection. However always:
  - exclude other sources of infection
  - check that the catheter drains correctly and is not blocked
  - consider need for continued catheterisation
  - if the catheter has been in place for more than 7 days, consider changing it before/when starting antibiotic treatment
- Do not give antibiotic prophylaxis for catheter changes unless history of symptomatic UTIs due to catheter change

When else should I send a urine for culture?

- **Pregnancy** – if symptomatic for investigation of possible UTI. In all at first antenatal visit – as asymptomatic bacteriuria is associated with pyelonephritis and premature delivery
- Suspected **pyelonephritis** (loin pain and fever)
- Suspected UTI in men
- **Failed antibiotic treatment** or **persistent symptoms**
- Recurrent UTI, abnormalities of genitourinary tract, renal impairment – more likely to have a resistant strain

References & Additional information:

1. Carr J. Urinary tract infections in women ; diagnosis and management in primary care. BMJ 2006; 332; 94-7. Useful review with treating MCQ
<table>
<thead>
<tr>
<th>Date of Meeting Reviewed</th>
<th>November 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCG GP sign off:</td>
<td>Dr P Garnett</td>
</tr>
<tr>
<td>Review date:</td>
<td>November 2016</td>
</tr>
</tbody>
</table>