Neurogenic Bladder

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Disclosure

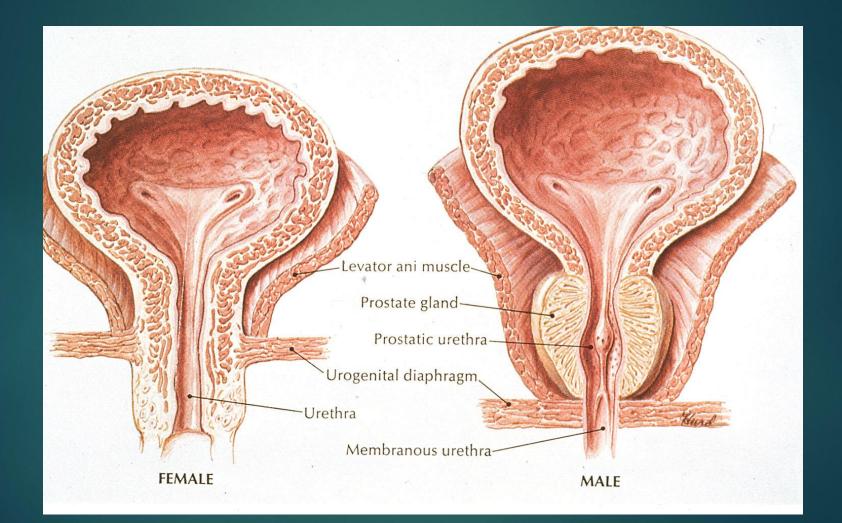
No conflict of interest and/or financial disclosure to report.

Objectives

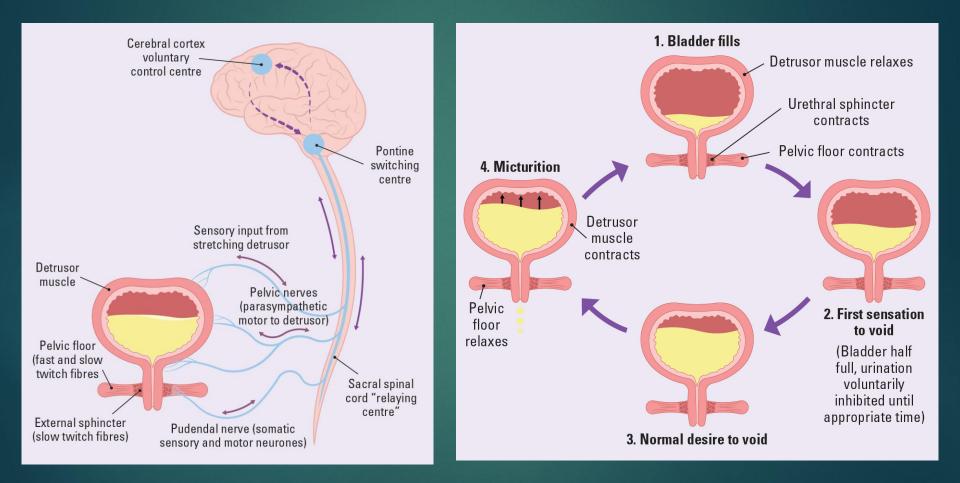
Define, describe, or identify the following regarding neurogenic bladder:

- Bladder Anatomy
- Normal Micturition
- Neurogenic Bladder
- Causes
- Management Aim
- Management Strategies
- Urinary Tract Infections (UTI)
- Diagnostic Studies

Bladder Anatomy

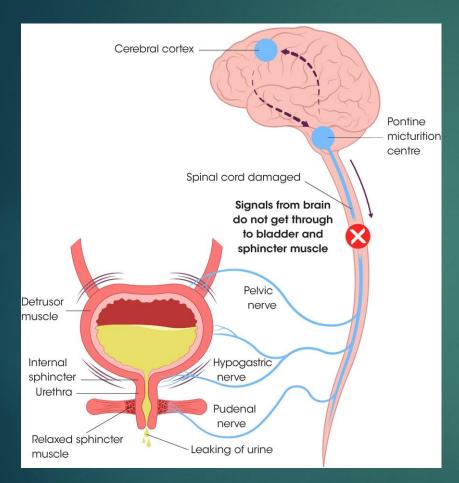


Normal Micturition



British Journal of Community Nursing - Diabetic bladder dysfunction

Neurogenic Bladder Causes



Interruption in neuropathway with subsequent urinary retention and expulsion impairment

- Brain Injury (CVA, Parkinson's Disease, Trauma, Mass/Tumor)
- Spinal Cord Injury or Disorder (Trauma, Mass, Multiple Sclerosis)

Advanced Diabetes

<u>Sacral nerve neuromodulation: the past, present and future -</u> <u>Canagasingham - 2023 - Trends in Urology & Men's Health - Wiley Online</u> <u>Library</u>

Management Aim

Maintain Fluid Balance (Intake/Output)
 Prevent:

 Bladder Over Distention
 Urinary Tract Infections

- Renal Reflux (Hydronephrosis)
- Renal Failure

Management Strategies

- Indwelling Catheter
- Intermittent Catheterization
- External Catheter/Devices
- ► Hygiene
- Medications
- Surgical Interventions

Indwelling Catheter

- Encourage fluids- at least 2000cc/day
- Catheter size generally 14 to 16 Fr.
- Proper securement of catheter- thigh or abdomen
- Urinary Tract Infection Prevention (CAUTI)
- Antibiotics generally not needed
- Transition to Intermittent Catheterization as needed

Intermittent Catheterization (IC)

- Sterile technique in hospital
- Use of clean technique in home setting
- Size 14 Fr. catheter, use 12 Fr. for patients with penile implants
- Regular, timed catheterization schedule
- Limit fluids to 2000cc/day

Incontinence Devices/Products

Incontinence:

- Pads
- Pouches
- Underwear
- Female external catheter
- Male external condom catheter

Medications/Surgery

Medications

- Anticholinergics
- Botulinum toxin
- Alpha Blockers
- Surgery
 - Artificial Urinary Sphincter (AUS)
 - Urethral injectable implant (bulking material)
 - Mitrofanoff (continent stoma)
 - Cystoplasty (bladder augmentation)

Diagnostic Studies

Laboratory tests
 urine cultures
 Urinalysis

Radiology/Nuclear Medicine studies
Renal ultrasound
Renal scan
KUB Xray

Urodynamics/Transrectal ultrasound

Sequela

Urinary Tract Infection (UTI)
Pyelonephritis
Urosepsis
Renal/Bladder Calculi
Renal Failure/Dialysis

Urinary Tract Infections- Causes

- Inadequate emptying of bladder
- Poor hygiene, not washing hands
- Contamination from hands, bowel, and urinary appliances
- Inadequate fluid intake

Urinary Tract Infections-Common Symptoms

- Cloudy urine/sediment in urine*
- Foul odor
- Increase in spasms
- Autonomic Dysreflexia
- Sweating
- Fever/chills
- No observable symptoms

Urinary Tract Infections-Prevention

- Adequate fluid intake- at least 2000cc/day
- Scheduled bladder emptying
- Sterile technique for foley catheter/IC (in hospital)
- Change external catheter daily
- Daily groin hygiene with soap and water
- Clean leg bad and bedside bag daily with antibacterial solution
- Wash wheelchair cushion and cushion cover weekly or as needed
- Clean pants/underwear daily

References

- Clinical Practice Guidelines Paralyzed Veterans Of America (pva.org)
- Polytrauma/TBI System of Care Home (va.gov)
- Spinal Cord Injuries and Disorders System of Care Home (va.gov)
- Neurogenic bladder and bowel management -Mayo Clinic
- Urinary incontinence injectable implant Information | Mount Sinai - New York
- Artificial Urinary Sphincter: Placement & Success Rate (clevelandclinic.org)
- Bladder Augmentation (Cystoplasty): Procedure & Recovery (clevelandclinic.org)
- Urinary tract infections in patients with neurogenic bladder - ScienceDirect

Thank you/Questions