

UROLOGY

URINARY TRACT INFECTIONS

A urinary tract infection (UTI) is an infection in any part of the urinary system, which includes the kidneys, bladder, the ureters, and urethra.

In women, the chance of getting a urinary tract infection is high. Some experts rank one's lifetime risk of getting an UTI as high as one in two, with many women having repeat infections, sometimes for years. About one in 10 men will get a UTI in their lifetime.

UTIs are a key reason why doctors tell women to wipe from front to back after using the bathroom. The urethra (tube that expels urine from the bladder) is close to the anus. Bacteria from the large intestine, such as *E. coli*, can sometimes get into the urethra. From there, they can travel up to the bladder and, if the infection isn't treated, can continue on to infect your kidneys. Women have shorter urethras than men. This makes it easier for bacteria to reach the bladder. Sexual intercourse can also be responsible for introducing bacteria into the urinary tract.

The symptoms of a UTI may include: a burning feeling when passing urine; a frequent or intense urge to pass urine, even though the amount can be very little when you do; cloudy, dark, bloody, or strange-smelling urine; feeling tired or shaky; fever or chills (a sign that the infection may have reached the kidneys); pain or pressure in the back or lower abdomen.

An infection can occur in the various parts of the urinary tract. Based on the location, each type has a different name:

- Cystitis (occurs in the bladder): one might feel the need to urinate often, or it might be painful. Lower belly pain and cloudy or bloody urine;
- Pyelonephritis (occurs in the kidneys): this can cause fever, chills, nausea, vomiting, and pain in the upper back or side;
- Urethritis (occurs in the urethra): this can cause a discharge and burning when passing urine.



If an UTI is suspected, it is necessary to seek medical help. A urine sample will be tested to identify which bacteria are causing the UTI. If UTIs are frequent and your doctor suspects a problem in the urinary tract, a closer look might be necessary with an ultrasound, a CT scan, or an MRI scan. They might also use a long, flexible tube called a cystoscope to look inside your urethra and bladder.

If the physician thinks you need them, antibiotics are

the most common treatment for urinary tract infections. As always, it is important to be sure to take all prescribed medicine, even after symptoms have improved. Drinking lots of water also helps to flush the bacteria from your body.

If three or more UTIs are experienced a year, ask your doctor to recommend a treatment plan. Some options include: taking a low dose of an antibiotic over a longer period to help prevent repeat infections; a single

dose of an antibiotic after sexual intercourse, which is a common infection trigger; antibiotics for one or two days every time symptoms appear; a non-antibiotic prophylaxis treatment.

Following some tips can help you avoid getting another UTI: empty your bladder often as soon as you feel the need to pass urine; don't rush, and be sure you've emptied your bladder completely; wipe from front to back after you use the toilet; drink lots of

water; choose showers over baths; stay away from feminine hygiene sprays, scented douches, and scented bath products, as they'll only increase irritation; cleanse your genital area before sexual intercourse; pass urine after sexual intercourse to flush out any bacteria that may have entered your urethra; if you use a diaphragm, unlubricated condoms or spermicidal jelly for birth control, you may want to switch to another method (diaphragms can increase

bacterial growth, while unlubricated condoms and spermicides can irritate the urinary tract); keep the genital area dry by wearing cotton underwear and loose-fitting clothes; don't wear tight jeans and nylon underwear – they can trap moisture, creating the perfect environment for the growth of bacteria.

Article supplied by the Hospital Particular do Algarve Group, with hospitals in Alvor and Gambelas (Faro)

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