

A Guide for Using UroDapter[®] Catheter Free Bladder Instillation Adapter

Introduction

Compared to the traditional way of bladder instillation – which involves a catheter – using UroDapter[®] has a number of advantages.

The process is minimally invasive and entirely painless. A catheter, even if it is used in the most cautious way, can cause microlesions and be the source of infections. These issues cannot be experienced if the UroDapter[®] is used. Moreover, UroDapter[®] enables the treatment of the bladder and the urethra at the same time, which is impossible with a catheter. After the instillation the mucosa of the surface of the urethra becomes covered with a thin layer of the instilled solution which has a regenerative effect until the next voiding.

We have used UroDapter[®] more than 4000 times in the last 6 years. With this device the instillation is quick and easy.

Storing and Preparation

- UroDapter[®] should be stored in a dry, clean place. It does not require cooling nor any special conditions.
- Before using make sure that both the adapter and its sterile wrapping is intact. If either of them appears to be damaged, do not use the device.
- UroDapter[®], as a sterile device, is for single use. Do not try to re-sterilize it.
- After using it can be handled as communal garbage. It does not count as dangerous waste. Regarding the solution being instilled with the UroDapter[®] consult the waste management manual of the material in question.
- Before starting the treatment disinfect not only the urethral orifice but also the 3 cm area of the orifice and on the inner surface of the labia. For this process any mucosal antiseptic solution can be used.
- Unpack the UroDapter[®] and attach its connective tail to the syringe. UroDapter[®] can be attached to both Luer Slip and Luer Lock syringes easily.
- Disinfect freshly unpacked UroDapter[®], from the tip to the sealing collar, too. This prevents the drift of the bacteria into the bladder and it inactivates the bacteria located in the first couple of millimeters of the urethra, too.

Using UroDapter[®]: Performing the Instillation

- Always make it sure that UroDapter[®] is inserted into the urethra, and not into the vagina in case of female patients.
- For exposing the orifice of female patients, the fingers should lie as close to the orifice as they can be. The exposition has to happen by pulling the labia apart laterally (and not only upwards).
- The optimal instillation can be performed if the axis of the urethra and the syringe are parallel. In this case, the resistance can be experienced by using the syringe decreases

characteristically. In general, for younger female patients UroDapter[®] should be situated slightly upwards (given that the patient is lying on her back), for older patients, it should be situated slightly downwards.

- Only the tip of UroDapter[®] should penetrate the urethra, which means approximately 6–8 mm. The isolating collar should cover the orifice properly and be pushed against the nearby structures gently.
- Start performing the instillation. Given that the isolating collar is covering the orifice properly, the instilled solution raises the intra-urethral pressure, which opens the sphincter, thus the solution enters the bladder. That said, the instillation itself can be performed in one minute. The exact time, obviously, depends on the patient.
- If the sphincter becomes constricted due to pain or fear and muscle tone increases making the instillation hard to impossible. In this case the patient must be told to relax, a couple of deep sighs may help them, too. It is important to wait until the constrictions end: the speed of the instillation should be decreased, or, if needed, paused.
- In case of leakage, a part of the solution does not reach the urethra, it flows away instead. By treating female patients, the leaking solution might enter the vagina, and it re-appears only after the instillation has ended and the patient has stood up. During the instillation proper lighting and the constant observation of the sealing collar are essential so that leakage can be noticed immediately and it can be ceased by certain minor corrections.
- The two most frequent situations in which leakage happens are applying too low or too high pressure with UroDapter[®]. Adjust the pressure accordingly, the ideal amount can be experienced as the suddenly lowering resistance of the plunger of the syringe.
- The leaking solution causes neither infections nor complications by entering the vagina or contacting the nearby structures.
- When the treatment has ended, the patient must try to hold her urine back for at least 3 hours, so that the solution can affect the bladder and the urethra for an ample amount of time. Besides this, any action can be performed by the patient.

For further information check the instructions compiled for therapists: A Guide for Using UroDapter[®] Tips and Tricks.