

# Your child's procedure to insert a tube for draining urine (suprapubic catheter)

This leaflet is about your child's procedure to insert a tube called a suprapubic catheter for draining urine from the bladder. It explains what you should do before your child's procedure, on the day of the procedure and when you return home.

## Your child's condition and procedure

### What is a suprapubic catheter?

A suprapubic catheter is a flexible tube to drain urine from the bladder through the lower tummy (abdomen).

Your child has the procedure to insert the tube under a general anaesthetic. This is a medicine that makes them sleep and stops them feeling any pain during the procedure.

### Why should my child have a suprapubic catheter?

If your child's bladder does not empty properly, one way of treating this is to use a suprapubic catheter.

## Before your child's procedure

### What needs to happen before my child's procedure?

We need to see your child at a pre-admission clinic. This clinic may take place face to face or online. We make sure that your child is ready for an anaesthetic and surgery.

After the pre-admission clinic, our admissions team contacts you by letter, text message or phone. We offer you a date for your child's procedure. We also explain when your child should stop eating and drinking (fast) before their procedure.

### Do I need to get pain medicine ready for my child?

Please make sure that you have a week's supply of paracetamol (a painkiller) and ibuprofen (an anti-inflammatory medicine) at home before the procedure. We do not routinely give these medicines to take home for your child after day surgery.

You can buy paracetamol and ibuprofen from a pharmacy, supermarket or shop. Paracetamol for children may also be called Calpol<sup>®</sup>. Ibuprofen for children may also be called Calprofen<sup>®</sup> or Nurofen<sup>®</sup>. You need the type of medicine that you would give your child if they were unwell with a cold or ear ache. If your child cannot take paracetamol or ibuprofen for any reason, please speak to their healthcare team about other options.

## On the day of the procedure

### When you arrive at the children's day surgery unit

We give you a time to arrive at the Evelina London children's day surgery unit. It is important that you arrive at the correct time and have followed the fasting instructions for your child. If you arrive late or have not followed the fasting instructions, we may not be able to do the procedure.

You and your child meet the surgical and anaesthetic teams on the admissions ward before the procedure. We confirm that you have given your permission (consent) for the procedure. You can ask us any questions that you may have.

### During the procedure

We give your child a general anaesthetic. This is a medicine that makes your child sleep and stops them feeling any pain during the procedure. You can stay with your child until they are asleep. Please see our separate leaflet called "Your child's general anaesthetic" for details.

When your child is asleep, the surgeon passes a medical telescope (cystoscope) through the water pipe (urethra) from which urine leaves the body. We fill the bladder with special medical water (saline) to see inside it more clearly. Using a special kit and with guidance from the telescope, the surgeon then passes the catheter from the abdomen into the bladder.

The surgeon inflates the tip of the catheter inside the bladder like a small balloon to stop the catheter coming out.

The procedure lasts about 1 hour.

### Are there any other treatment options to this procedure?

Other possible treatment options include the following:

- **Using intermittent urinary catheters**  
This involves passing a catheter regularly into the water pipe to empty the bladder.
- **Using an indwelling urinary catheter**  
This is a catheter that stays in the water pipe all the time. It is usually changed every 6 to 12 weeks.
- **Having the Mitrofanoff procedure**  
This is a procedure to make a tunnel between the bladder and abdomen. When the area has healed, your child's bladder can be emptied regularly by passing a catheter into the tunnel.

### Are there any risks to my child's procedure?

Every procedure has some risks of complications. To reduce these risks, we make sure that your child is well at the time of the procedure. We talk to you about the risks in the clinic and before the procedure when we confirm that we have your consent.

After the procedure, there may be some blood in the urine. This usually settles by itself. It is rare for children to return to hospital or need more treatment for bleeding.

Sometimes, there might be a urinary tract infection after a procedure to insert a suprapubic catheter. During the procedure, we give your child antibiotics to reduce the chance of an infection.

When we put in a suprapubic catheter, there is a small risk that structures near the bladder can get damaged. This is rare, but can be serious and we might need to do more surgery.

A suprapubic catheter needs to be changed regularly every 6 to 12 weeks. In the long term, suprapubic catheters can cause several problems:

- They do not stop urine coming out of the water pipe.
- They can cause repeated urinary tract infections.
- In some children, they can cause bladder spasms (when the bladder muscles squeeze suddenly). These spasms may be painful.
- They can get blocked by debris or blood clots.
- An unusual problem is that stones can form on suprapubic catheters. It is important that the catheters are changed regularly to prevent this.

## After your child's procedure

### **How will my child look and feel after their procedure?**

Your child may feel drowsy after their surgery and sleep for a while. They may be restless (agitated) and upset for up to an hour after waking up from the procedure. Some children may have pain and feel or be sick (vomit), but this is not common.

### **Will my child be in pain after their procedure?**

Your child only has a small wound in the abdomen after the procedure.

When your child is awake, we may give them paracetamol, ibuprofen or both medicines regularly. You can continue to give your child these medicines as needed when they are at home. The nurses can guide you when the next amount (dose) of pain medicine is due.

The suprapubic catheter can cause sudden tightening of the muscles (spasms) in the bladder. If your child has bladder spasms, they may get sudden discomfort or the feeling that they need to pee.

The spasms can be controlled by taking medicine regularly to relax the bladder muscles. We prescribe this medicine for your child before they go home.

### **When can my child eat and drink or feed after their procedure?**

Your child should be able to eat and drink or feed as usual within 1 to 2 hours of the procedure.

### **Do we see the surgeon after my child's procedure?**

Yes, the surgeon comes to check your child after their procedure. They update you about the surgery and answer any questions that you may have.

### **When can my child go home?**

Your child can go home on the same day as their procedure when they:

- feel comfortable
- can manage (tolerate) their usual food and drink
- are not feeling sick (nausea) or being sick (vomiting)
- are behaving as they usually do
- have peed after the procedure

Please supervise your child carefully on the journey home. According to the sudden infant death syndrome (SIDS) guidelines, it is best to avoid long car journeys for babies under 1 year of age. If you travel home by car, it is important that:

- you stop for frequent breaks to feed your baby and change their position
- an adult sits with the baby in the back of the car

## After you go home

### **How do I care for my child after the procedure?**

It is important that your child drinks plenty of fluids.

For the first day, you allow the suprapubic catheter to drain into the bag. After the first night, your child needs to start their regular catheter routine. The surgeon explains what this routine should be.

Many children have a tap, such as a Flip-Flow<sup>®</sup> valve, put onto the end of their suprapubic catheter. This is kept closed until it is time to empty the bladder. The urine can then be drained directly into the toilet.

The surgeon tells you how to manage your child's suprapubic catheter and its tap. Often, children are asked to empty their bladder every 2 to 3 hours by opening the tap and draining the urine. Some children sleep at night with their suprapubic catheter draining into a collection bag. Other children sleep with the tap on their suprapubic catheter closed.

You need to deflate the balloon that holds the catheter in place and inflate it again once a week. This is to make sure that the balloon stays filled. We show you how to do this.

To make it easier to change the suprapubic catheter, you should turn the catheter all the way round once a day. You can start doing this as soon as it is comfortable for your child. This is usually after a few days.

Please make sure that you understand how to manage your child's suprapubic catheter before going home.

### **How can I manage my child's pain after their procedure?**

We recommend giving your child paracetamol and ibuprofen if they do not have any problems taking these medicines. You can give your child the medicines regularly for 1 to 2 days and then as needed to control pain. Please remember to buy the pain medicines before the day of your child's procedure.

It is safe to give the 2 medicines at the same time, ideally with food. This is easier to plan and the medicines work in different ways. You can give your child:

- 1 recommended amount (dose) of paracetamol every 4 to 6 hours and no more than 4 doses in 24 hours
- 1 dose of ibuprofen every 6 to 8 hours and no more than 3 doses in 24 hours

You may find the following chart helpful to keep track of your child's medicines.

## Home medicine chart for parents

Medicine	Time to give	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Paracetamol								
Ibuprofen								

### Do I need to look for any symptoms after my child's procedure?

After your child's procedure, contact a GP or go to your nearest emergency department (A&E) if you feel that they are unwell or notice any of the following issues:

- **Blood**  
A little blood is often seen in the urine after inserting a suprapubic catheter. This can last for up to 2 weeks after the procedure. However, it is important to get medical help if there is any heavy bleeding or red lumps (blood clots) in your child's urine.
- **Signs of a urinary tract infection**  
Your child may have developed a urinary tract infection if they have:
  - a stinging or burning sensation that is getting worse when they pee
  - cloudy or smelly urine
  - a high temperature (fever)

- **Catheter does not drain**

If your child's catheter does not drain, this may be because it has a kink (bend or twist) or is blocked. You can check that the catheter does not have any kinks. If the catheter does not start to drain, your child may need to be assessed.

- **Catheter falls out**

If your child's catheter falls out, the wound will close quickly. Please take your child to A&E immediately to get another catheter inserted.

## Do you see my child again after their procedure?

Your child needs to have their first suprapubic catheter changed about 6 to 12 weeks after we inserted it. We can usually do this without giving your child an anaesthetic or sedation (medicine to make them calm and sleepy). We arrange for your child's first catheter to be changed at Evelina London Children's Hospital.

### Contact us

#### Before the procedure

For **advice about your child's procedure**, call the urology medical secretary, **phone** 020 7188 4610 or 020 7188 4628, **email** [evelinaurologydoctors@gstt.nhs.uk](mailto:evelinaurologydoctors@gstt.nhs.uk)

If you **cannot keep your appointment**, contact our admissions team, **phone** 020 7188 9098, **email** [gst-tr.paediatricadmissions@nhs.net](mailto:gst-tr.paediatricadmissions@nhs.net)

If your child is **unwell in the 2 weeks before the procedure**, contact our pre-assessment team, **phone** 020 7188 7188 extension 58209 (Monday to Friday, 9am to 5pm)

If your child is **unwell any time after 5pm on the evening before the procedure**, contact the bed managers, **phone** 020 7188 7188, choose the option for the bleep desk, bleep 0821 when connected and wait for the response

#### After the procedure

For **medical advice**, **email** [evelinaurologydoctors@gstt.nhs.uk](mailto:evelinaurologydoctors@gstt.nhs.uk)

For **advice from the clinical nurse specialists**, **email** [evelinabladdernurses@gstt.nhs.uk](mailto:evelinabladdernurses@gstt.nhs.uk)

For questions about **outpatient appointments**, **phone** 020 7188 4000, **email** [paediatricappointmentsurology@gstt.nhs.uk](mailto:paediatricappointmentsurology@gstt.nhs.uk)

If you are concerned that your child is **seriously unwell** at any time, go to your nearest A&E or **phone** 999

For more information on conditions, procedures, treatments and services offered at our hospitals, please visit **web** [www.evelinalondon.nhs.uk/leaflets](http://www.evelinalondon.nhs.uk/leaflets)



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