

URINARY TRACT INFECTIONS IN WOMEN

Distinction between types of UTIs - Treat acute cystitis – manage per evidence based guidelines

RECURRENT	PERSISTENT	COMPLICATED
2+ UTIs in 6 mo <i>OR</i> 3+ / year No symptoms for 2 weeks since treatment (Negative Cultures between Episodes)	Recurrent Symptoms <2 weeks from completion of treatment Culture POSITIVE for same organism AFTER treatment	Fever/chills/sepsis Gross hematuria Flank pain/CVA tenderness Catheter / Foreign Body related

PREVENTION OF RECURRENT <i>UNCOMPLICATED</i> UTI	
Urinary Hygiene	<ul style="list-style-type: none"> ▶ Hygiene measures: ▶ Change wet clothes (after gym, swimming, incontinence) promptly ▶ Avoid/ treat diarrhea/ loose BMs ▶ Avoid thong underwear Avoid baths & hot tubs ▶ Voiding right after sex (especially for Post-Coital UTIs) ▶ Wiping front to back ▶ Voiding every 2 - 3 hours ▶ Drinking a glass of water after voiding
OTC Daily Treatments	<ul style="list-style-type: none"> ▶ High potency “Pharmaceutical grade” Cranberry extract (Ellura, Thera-Cran) ▶ Probiotics
PRESCRIPTION Prophylaxis (consider if >2 UTIs/6 mo; or >3 UTIs/12 mo)	
“Self Start” UTI treatment	<ul style="list-style-type: none"> ▶ For Reliable, uncomplicated patients ▶ With/Without culture ▶ Prompt initiation of 3 day course of Cipro or Bactrim. (Macrobid requires 5 days) ▶ Contact MD: Sx not responding to treatment by 48 hours, flank pain, fever or gross hematuria
Post Coital**	<ul style="list-style-type: none"> ▶ Prophylactic antibiotics after sexual activity ▶ TMP-SMX 0.5 SS or one SS post coital (once/d) ▶ Nitrofurantoin 50mg (or 100mg) post-coital (once/d) ▶ Cephalexin 250mg post coital (once/d)
Prescription Prophylactic Daily Treatments**	<ul style="list-style-type: none"> ▶ Local (urethral, genital hiatus) Estrogen ▶ Methenamine mandelate 1000mg QID ▶ Methenamine hippurate 1000mg BID ▶ Keflex 125mg (or 250mg) QD ▶ Cefaclor 250mg QD ▶ Fosfomycin 3g ▶ Nitrofurantoin 50mg (or 100mg) QHS ▶ TMP-SMX 0.5 SS QHS or 0.5 SS 3x/wk ▶ Trimethoprim 100mg QHS *