

Norfolk Physiology Unit Centre Block, Level 2

Urodynamics Tests – Information for Patients

Please make sure you understand and follow these instructions carefully – otherwise your test may need to be postponed and a new appointment arranged. Please be aware that this causes delays for other patients. If you need to cancel/re-arrange your appointment, please give as much notice as possible so we can offer your appointment to another patient.

Why do I need this test?

You will have recently attended for an outpatient appointment with problems associated with urine incontinence, or a frequent need to pass water, or a sudden urge to pass water, or difficulty passing water, or a combination of the above

These, and some other symptoms, can be associated with disorders of the bladder. Your consultant has requested these tests so that they can establish what exactly is causing your particular problem. They can then offer the most appropriate treatment.

You may have had recent surgery for one of the above conditions; the tests are done to check on the efficacy of the surgery and also to establish the new 'normal' values for you.

What is Urodynamics?

Urodynamics is a test that looks at the way the muscles in your bladder and urethra (the tube you pass urine through) work. You will be asked to attend the Norfolk Physiology Unit as an outpatient. When you arrive, please report to the receptionist who will check your details etc. and inform the investigator that you have arrived.

Please refrain from visiting the toilet as you will be asked to pass urine into a special toilet. If you have an urgent need to empty your bladder, please inform the receptionist. The special toilet records the rate at which your urine flows and the amount you pass. At this point an ultrasound scan may be done to check that your bladder is empty. A clear explanation will be given about the procedure.

You will be asked to undress from the waist down and lie, covered with a 'modesty' sheet, on an examination couch. Every effort will be made to preserve your privacy and dignity during the procedure. After cleansing the genital area with sterile fluid three fine tubes are then passed, two into the bladder and one into the rectum (back passage). The bladder tubes consist of a filling tube and another that measures pressure within your bladder. The third measures abdominal pressure in the back passage and is usually placed with the aid of the investigator's finger. These are all connected to a special machine and computer. Slowly the bladder is filled with sterile saline solution. You will be asked to indicate when you feel the first sensation to pass urine and when you have a strong desire to pass urine and cannot hold on much longer.

At some stage we may try to provoke your symptoms by asking you to cough etc.

Everything is recorded on the computer by the investigator and can be recalled for analysis. You will then be asked to empty your bladder into a special toilet that again records the rate of flow and the pressure inside the bladder during emptying. The remaining tubes are removed, and the test is now complete, although a further ultrasound scan may be needed at this point. The investigator may discuss the findings with you, though a full diagnosis may not be made, or treatment started until you see your consultant following all your tests. Your consultant will write to you and your GP after the test.

What special preparation is there?

No special preparation is needed but we ask you to attend with a full bladder if possible. You may also be asked to complete a 'frequency volume' chart for a few days before attending. This involves measuring and recording the amount of fluid you drink, and the amount of urine you pass. If you have a catheter in place, please record the amount you drink and pass the same. This gives us valuable information to aid your diagnosis. **If you do not complete the chart then your test may have to be postponed until you have completed one.**

If you have any mobility problems, or any other special needs – such as no rectum/back passage, please let us know in advance so that we can make any necessary arrangements to accommodate you.

If you suspect you may have a bladder infection (cystitis), please visit your GP prior to your appointment to have your urine 'dipstick' tested. If this is positive, we would appreciate your GP prescribing some antibiotics to treat the infection and cover you for the test. If you attend with an active infection, we will not be able to do the test.

Medication:

If you are taking any medication (other than antibiotics) for your bladder problem, you must discontinue it for 7 days prior to your test date (this includes over the counter and herbal remedies). If, however, you are a male patient taking medication for a prostate problem, you may continue to do so.

Are there any after effects/risks associated with urodynamics?

Some patients can experience mild discomfort in the form of burning and discomfort on passing urine following the test. Some people experience blood in their urine. Rarely, an infection in your urine may result; to minimise the chances of this occurring you need to drink an extra pint or two of watery fluid (not tea or coffee) a day for the two days following the test. If symptoms persist, please contact your G.P. There is a risk of inability to pass the catheter into your bladder and the procedure being abandoned. There is a very small risk of retention of urine requiring a temporary catheter to be put in your bladder. There is also a small possibility of failure to find the cause of your symptoms, requiring a possible repeat of the test at a later date.

If you have any concerns or questions about these tests, please telephone the Unit on 01603 288281 between 0730-1600 hours.