



# What is a Suprapubic Catheter (SPC)?

**QUEENSLAND  
SPINAL CORD INJURIES  
SERVICE (QSCIS)**

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## DEFINITION:

Suprapubic - means the area just above your pubic bone, above the level of your pubic hair.

Catheter - means a hollow tube inserted into your bladder to drain away urine.

Suprapubic Catheter - means you have a urinary catheter inserted into your bladder through the abdominal wall.

## ADVANTAGES OF SUPRAPUBIC CATHETERIZATION

- More hygienic as it is away from the genital area where infection has an easy passage to the bladder via an indwelling urethral catheter.
- Easier to change and less embarrassing for the patient, relatives etc.
- Pressure areas can occur with urethral indwelling catheters.
- Sexual activity less inhibited with absence of urethral catheter.
- Patient independence - patients can change their own catheter.

## DISADVANTAGES OF SUPRAPUBIC CATHETERIZATION

- Catheter must be replaced immediately if it falls out as the opening may close over.
- Urine may still leak via the urethra especially if catheter is blocked or the drainage tube kinked.
- Any tube going into the bladder can provide an entry for infection.
- Some people are not comfortable with the thought of a tube going into their abdomen.

## CARING FOR YOUR SUPRAPUBIC CATHETER

1. Ensure that you drink at least 2-3 litres of fluid per day.
2. Check the catheter site daily for signs of infection or irritation (look for redness, feel for heat at site, check for discharge). If you feel there is a problem inform your nurse or doctor.
3. Daily shower or wash ensuring you thoroughly clean and dry around the catheter site.
4. Avoid the use of talcum powder, sprays or deodorants around the site of the catheter.
5. Check the urine colour, amount and clarity daily for changes or problems (e.g. infection). Take a urine specimen if you suspect there is a problem.
6. Ensure the drainage bag is below the level of your waist to allow the urine to drain by gravity (unless wearing a waist bag).
7. Continue your bladder medication as directed by your doctor.
8. Maintain a closed drainage system as much as possible. This means keeping the number of times you have to disconnect the bag to an absolute minimum. This will reduce your chance of getting infections.
9. Have a spare catheter with you at all times in case of emergencies.

## TROUBLE SHOOTING

1. **Catheter not draining**
  - Check for kinks in the tubing.
  - Check the catheter drainage bag is below your waist.
  - Adjust your position to see if that helps the drainage.
  - Prepare to change the catheter if you have been trained to do so or make arrangements for someone else to change it someone else to do it.

## **DO NOT TAKE THE CATHETER OUT UNLESS IT IS GOING TO BE REINSERTED IMMEDIATELY**

- if necessary you can drain the bladder urethrally by inserting a urethral catheter and attend a casualty department or your GP surgery with your spare catheter of the same size and arrange for it to be changed.

### **2. Urine cloudy / debris present**

- Could be a urinary tract infection – take a urine sample.
- If problem with drainage occurs have catheter changed as soon as possible.
- Taking cranberry juice or tablets can help reduce the amount of sediment in your urine.
- Increase your fluid intake to at least three litres per day.

\*Having a catheter in your bladder puts you at a greater risk of developing bladder stones. Bladder stones can be the cause of urine infections and may cause drainage problems. If grit or stones are causing problems with the drainage from your catheter inform your doctor.

### **3. Bleeding after catheter change**

- When your catheter is changed there can be some trauma which may cause bleeding – sometimes this is unavoidable.
- Ensure the catheter is still draining and increase your oral fluid intake to dilute and flush out the blood.
- If you suspect your catheter is not draining any urine seek medical attention immediately.
- If the bleeding has not stopped within 24hours or causes your catheter to block seek medical attention immediately.

### **4. Catheter balloon will not deflate**

- Are you pushing the syringe tightly into the balloon port as you draw back the syringe?
- If you are trying to change the catheter in an emergency, you must insert a urethral catheter until you are able to seek medical attention.
- Contact your doctor or attend a casualty department immediately.

## **HOW TO CHANGE A SUPRAPUBIC CATHETER**

Your suprapubic catheter must be changed using a sterile technique. If you are unsure of how to do this make arrangements for your doctor or nurse to do this in advance of the change being due.

### **How often should it be changed?**

- if the catheter is silicone or hydrogel coated it can be changed every 6 weeks provided there aren't any problems, which could make an earlier change necessary.

NOTE: your first SPC change must be done six weeks after insertion by a doctor or a nurse with a doctor present.

### **Equipment required:**

- Silicone catheter of appropriate size
- Catheter pack
- Two 10ml syringes
- Sterile water (to inflate catheter balloon)
- Cleaning solution – either chlorhexidine or sterile normal saline
- Two pairs of sterile gloves
- Drainage bag
- Lubricant

### **Method:**

1. Position yourself / your patient so lying on back with SPC insertion site exposed.
2. Thoroughly wash your hands.
3. Using a sterile method open out your catheter pack and add new catheter, two syringes, cleaning solution, sterile normal saline and some lubricant to your sterile field.
4. Open both glove packets.
5. Wash your hands thoroughly for at least 3-5 minutes.
6. Using a sterile technique apply both pairs of gloves (one on top of the other).
7. Clean around catheter site thoroughly using cleaning solution.
8. Using one syringe deflate balloon and remove catheter (you may feel some mild resistance) being careful to note how far in the catheter was.
9. Remove the top pair of gloves (leaving you with a sterile pair).
10. Pick up the pre-lubricated catheter and insert only as far in as the previous catheter was (if you insert the catheter too far it may go into the urethra).
11. WAIT FOR SOME URINE TO FLOW FROM THE CATHETER (may take a few minutes if a routine catheter change).
12. *Once there is urine draining from the catheter* you may inflate the balloon using 5-8mls of sterile water.
13. Attach a drainage bag.

### **For further information please contact:**

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