

#### **Royal Manchester Children's Hospital**

## Information for Patients

# **Urodynamics**

Urodynamics is a test used to assess the bladder function. It assesses how well the bladder, urethra and sphincter are storing and releasing urine, it also allows us to see if the bladder is having involuntary contractions and if there is any reflux of urine from the bladder into the kidneys.

## How is it carried out?

Urodynamics is carried out using either a urethral catheter or suprapubic lines. You will be told prior to your child's appointment whether they will require urethral catheterisation or suprapubic line insertion for the Urodynamics test.

If your child requires suprapubic line insertion they will be admitted to the ward the day before the Urodynamics test and will have two very thin suprapubic lines (tubes) inserted into the bladder via their abdomen under anaesthetic. Sometimes, these lines (tubes) are secured with a very fine stitch to reduce the chance of them falling out. They will stay in overnight (you can stay with your child overnight) and the Urodynamics test will be carried out the next morning. There is usually a large dressing over the suprapubic lines which will be removed on the day of the Urodynamics test.

If your child is going to be using a urethral catheter for Urodynamics then we will bring them in the morning of the Urodynamics test and they will urethrally catheterise (pass a tube) using one of our special catheters that connects to the **Urodynamics machine** (which is a bit like a big computer).



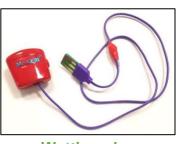
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**Urodynamics Bed** 





Wetting alarm

**Urodynamics machine** 

To begin with, we will aspirate the lines/catheter to ensure that the bladder is empty and then they will be connected up to our Urodynamics machine. We will need to place a small catheter in to the rectum which measures the abdominal pressure, which is important to ensure the test is accurate. We will also place a **wetting alarm** at the top of the leg, this helps alert us if any urine leaks out during the test.

Once your child is connected to the machine we will begin to fill the bladder with saline water which has added contrast; this enables us to take X-rays and visualise the bladder during the test. Your child will be required to tell us once they feel the need to urinate.

The test will finish once your child feels that they are unable to hold the need to urinate any longer or if urine begins to leak. We may ask them to urinate on a toilet called a Uroflow; this is a special toilet that measures the urine output and speed of flow. We may then aspirate the lines/catheter to ensure that the bladder is fully empty, or your child may be required to catheterise themselves if they intermittently catheterise at home to ensure they fully drain the bladder.

Once the test is finished, we will remove the catheter/suprapubic lines. If we are removing suprapubic lines, a stitch may be present which is cut, the lines are then slid out and a dressing will be placed over the area. This dressing is to stay on for 24 hours, and we would advise you avoid taking a bath/shower until the dressing is removed. You will be advised by the nurse to monitor for any signs of infection, but this is a rare complication.

## How long will the test take?

Once you and your child are in the X-ray department for the Urodynamics test please prepare to be there for up to 1.5 - 2 hours, this is to include preparation for the test and removal of catheter/lines once the test has finished. Your child will be required to remain still during the test therefore please bring something to keep them occupied during the test.





## Will the test hurt?



If your child is required to urethrally catheterise for the test, then this will be done using one of our special catheters, which should feel no different to the catheters they usually use at home (if they catheterise at home). The child, a parent or the nurse can insert the catheter based on preference.

If your child requires insertion of suprapubic lines, then this will be done when they are asleep under anaesthetic so they will not feel this. Some children complain of mild discomfort following insertion of the lines, and medication for this can be given on the ward if required. When removing the lines, children sometimes feel a tugging sensation for a few seconds. Any discomfort usually eases quickly once the lines are removed.

Insertion of the rectal catheter is painless, as it sits just inside the rectum. Most children are worried about this aspect of the test, but do not experience any discomfort on the day.

### What happens after the test?

Once the test has finished the doctor will discuss the results with you and further management that they feel may be beneficial for you child. You are able to go home once the test is finished, but you may be required to go back to the ward and be discharged from there, and occasionally will be given a prescription to collect from pharmacy depending on the results of the test. Your child is likely to be booked in for a follow up clinic appointment to see the consultant, which will be sent out to you in the post.

In case of problems or advice please call:

#### Ward 76 Urology Secretary (Joan Shields) Urology Clinical Nurse Specialist

(0161) 701 7600 (0161) 701 2161 (0161) 701 2476 (Tuesday to Friday 07.00-15.00)

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