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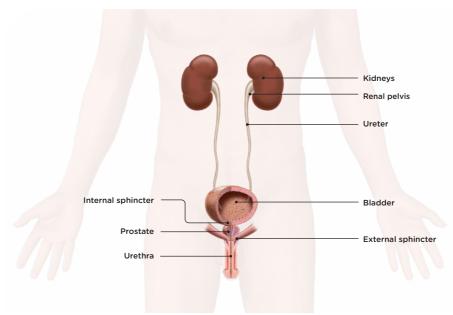


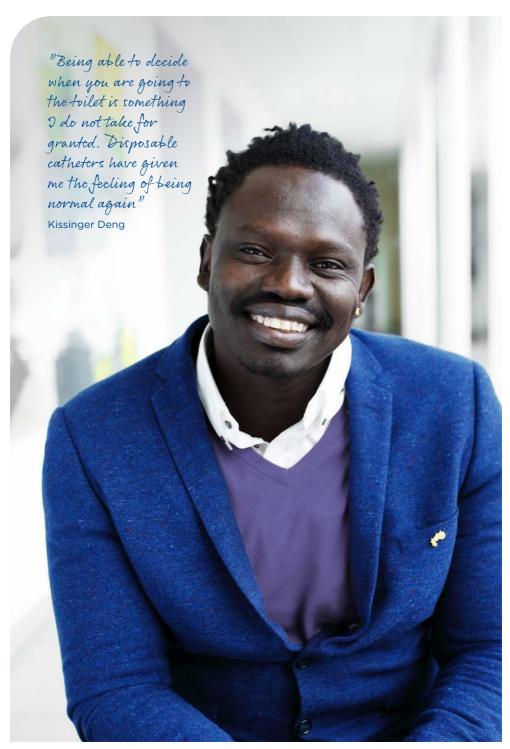
THE URINARY TRACT AND YOUR HEALTH

A healthy, functioning urinary tract is important to our well-being. In fact, our lives depend on it.

The kidneys have two primary functions: eliminating waste products from the blood and regulating the body's salt and water balance. The kidneys excrete waste products in the form of urine. The urine is collected in the bladder, which serves as a reservoir. The bladder is actually a large muscle which can expand and contract.

The bladder volume shrinks, and the urine passes via the internal sphincter. It works like a safety valve and is either open or closed. When it is open, the urine can flow out and into the toilet. Bladder emptying is controlled by the central nervous system, coordinated by conscious and unconscious intent. Urine volume varies individually, but the norm is 200-400 ml each time and 1-2 liters every 24 hours. Most people urinate four to eight times a day.







BI ADDER MANAGEMENT

Three main treatment approaches:

- Preventing urine reflux and kidney damage
- Preventing complications, such as large quantities of residual urine and urinary tract infections
- Improving quality of life by reducing incontinence and frequent urges

Management and treatment

Health care professionals can customize a treatment to handle your specific problems. For mild problems, the treatment normally begins with advice and tips on how to handle your problems.

Bladder emptying

Bladder catherization is a treatment if you are having a difficult time emptying the bladder or the bladder does not empty adequately when you urinate (residual urine). There are two different catheterization methods: intermittent catheterization (IC) and a permanent catheter.

Medicine

Medicines (tablets) are available to reduce urges to urinate. These relax the bladder muscle.

There is also a medicine, which is injected into the bladder muscle wall. This medicine may reduce the overactivity of the bladder. Self-catheterization will occasionally be

necessary after the treatment because the medicine is so effective, the bladder muscle is unable to contract to empty the bladder.

Accessories aids

Incontinence protection is used for urine leakage. The protection should be tested and adapted to individual needs.

These treatments are often combined:

- For example, medicine for calming an overactive bladder.
- Intermittent catheterization (IC). The bladder is emptied completely using a disposable catheter.
- Use of incontinence protection
- Bladder training and/or pelvic floor muscle training

Speak with your doctor or nurse. There are many ways to improve your quality of life

URINARY TRACT INFECTIONS

A neurogenic condition may affect bladder emptying, leaving the urinary system particularly vulnerable to complications.

Urinary tract infections (UTI) are common in people with conditions affecting the ability to empty the bladder – completely or partially.

A UTI is a bacterial infection affecting some portions of the urinary tract. Urine contains a number of fluids, salts and waste products. Urine does not normally contain bacteria. When bacteria manages to enter the bladder or kidneys and multiply in the urine, they attack the bladder lining and cause a UTI.

Urinary tract infections are divided into asymptomatic and symptomatic UTIs. An asymptomatic UTI means you have bacteria in the urine without symptoms.

Bacteria in the urine without symptoms (see signs of symptomatic UTI) does not necessarily mean you have a UTI or require any antibiotic treatment.

Your HCP may ask you to provide a urine sample if you suspect a UTI, so you get the correct antibiotic.

Signs of symptomatic UTI:

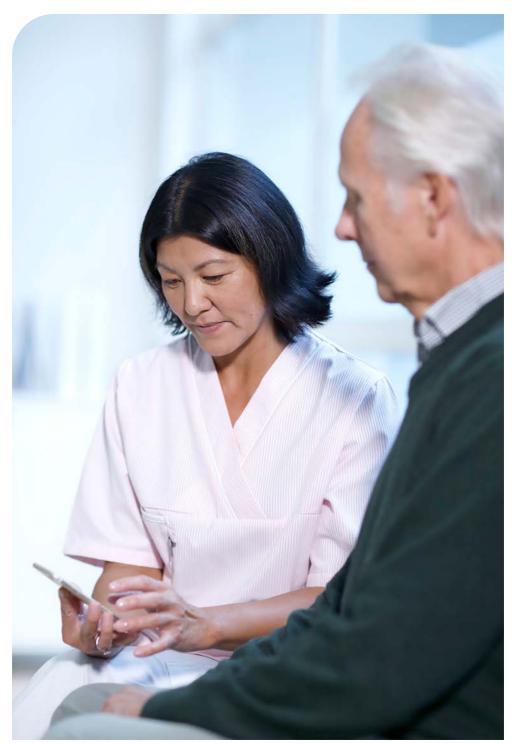
- · Changes in bladder function
- Leakage/increased leakage
- Sweating/burning sensation when emptying the bladder
- Frequent urges
- Pain across the lower abdomen or back
- · Blood in the urine
- Fever and/or general deterioration in your medical condition
- Increased spasticity (increased muscle tension)
- Increased autonomic reactions, such as sweating and chills

If you have symptoms of a urinary tract infection - contact a healthcare professional for further medical advice.

Prevent UTI and download the STOP UTI app









CATHETERIZATION

Catheter-assisted bladder emptying

For a bladder that is unable to fully empty, catheterization is the solution. There are two different catheterization methods: Intermittent Catheterization (IC) and a permanent catheter, often referred to as an "indwelling catheter". IC is the first-line choice and involves emptying the bladder regularly with a disposable catheter.^{1,2}

The benefits of IC1,2

There are many benefits of using IC compared to using a permanent catheter. The purpose of IC is to empty your bladder completely on a regular basis and prevent UTIs, urine leakage and frequent urges to urinate. Using IC supports a sexually active life.

Indwelling catheters

An indwelling catheter will drain urine from the bladder continuously as the catheter remains in place for many days or weeks. It is held in position by an inflated balloon in the bladder. The catheter can be inserted either through your urethra (urethral indwelling catheter) or through a little hole in your abdomen and into your bladder (suprapubic catheter).

There are many benefits to IC with a disposable catheter, including 1.2:

- Protection of the lower and upper urinary tract
- Complete emptying of the bladder, reducing the risk of a urinary tract infection
- Improvement in quality of life by reducing incontinence and frequent urges



Intermittent Catheterization (IC) is a method for emptying the bladder regularly using a disposable catheter. The method is effective whether you have problems storing urine, or emptying the bladder.

How IC works

IC involves inserting a catheter into the bladder regularly to drain the urine. This helps the bladder empty completely. When the bladder is empty, the catheter is removed and discarded. Most people learn how to self-catheterize very quickly. With a little training, it only takes a few minutes.²⁻⁴

IC may sound a little scary, difficult or uncomfortable. As with any new technique, practice makes perfect. Thousands of women, men and children around the world use self-catheterization every day. It also prevents the risk of kidney damage and urinary tract infections.^{1,2}

How often?

The number of catheterizations depends on the urine quantity. The urine quantity should not exceed 400 ml on each occasion. The number of times the catheterization must be performed varies individually and depend upon fluid intake. IC is normally performed four to six times per day, rarely at night.

The purpose of treatment²

- Prevent urine reflux and kidney damage
- Prevent complications, such as large quantities of residual urine and urinary tract infections
- Improve quality of life by reducing incontinence and frequent urges

HOW CAN IC SOLVE YOUR PROBLEM?

Reduce the risk of urinary tract infections

Complete emptying of the bladder reduces the risk of a urinary tract infection.^{1,2} To prevent urinary tract infections, you should empty your bladder completely on a regular basis.

Improve your quality of life

Minimizing the risk of urinary tract infections and/or incontinence can help you lead a more fuller life, free from worrying about embarrassing urine odor or wet clothes. This can give you better control and improve the quality of your life. When the bladder is emptied completely, visits to the toilet also become less frequent.

Save time

Many people need to sit on the toilet for a long time to empty the bladder, or need to return after having just gone. IC only takes a few minutes, and you empty the bladder completely.

Prevent incontinence and frequent urges to urinate

Emptying your bladder completely on a regular basis will help you avoid leakage and frequent urges to urinate. An overfilled bladder may cause uncontrolled leakage.

Maintain normal kidney function

Emptying your bladder completely on a regular basis prevents kidney damage, especially if you have a neurological disorder causing abnormal bladder pressure.

HOW TO PERFORM IC



1. Wash your hands with soap and water, before and after catheterization. Touch the catheter tube as little as possible after you have washed your hands before self-catheterization.



2. Hold the penis up towards the stomach to straighten the urethra. Slowly insert the catheter into the urethra. When urine starts to flow, push the catheter one or two centimeters further in.



3. Return the penis to its normal position when the urine starts flowing through the catheter.



4. When the urine flow stops, slowly remove the catheter a little. If urine starts flowing again, wait for it to stop completely, then remove the catheter completely. Your bladder is now completely empty.



1. Note the location of the mark on the funnel relative to the catheter tip when you insert the catheter. That way you ensure the catheter tip is going in the right direction during the catheterization



2. Ensure the catheter tip turns up towards the abdomen while inserting the catheter and during the catheterization.

Find a position you are comfortable with and use any accessories you need.





If you perform self-catheterization sitting in a wheelchair, it may be helpful to use a urine collection bag or LoFric* Hydro-Kit™.





In this scenario, an extension tube is connected directly to the toilet bowl for emptying. A tip for keeping the tube from moving while emptying is to place the tube between the toilet base and the toilet seat.

GOOD TO KNOW ABOUT CATHETER TYPES

It's always a great advantage to get a good start with a new technique. The same applies when you start to catheterize. Selecting a suitable catheter, based on informed knowledge of what is available, is the first step.

Most people prefer catheters that are simple to use and easy to insert. Taking the long-term perspective is as important as getting a good start.

The surface of the catheter is important. The surface of the catheter is in direct contact with the urethra during each catheterization. A smooth, well lubricated, hydrophilic-coated surface can make a difference, especially when used for a long time. 1.5

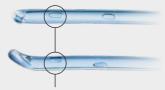
LoFric is a single-use hydrophiliccoated catheter, adapted to the natural conditions of the urethra that minimizes complications of catheterization, also after long term use.^{5,6}

Catheter tips

A Tiemann catheter (catheter with angled tip) may be appropriate to use for a tight urinary tract, for example, in the event of an enlarged prostate or spastic sphincter. The angled tip can then pass through smoothly.

Rounded (Nelaton)

Tapered (Tiemann/ coudé)



Catheter eyelet through which the urine is emptied





The outer layer of the catheter consists of a thin layer of PVP that together with salt/solutes, in the right concentration, binds water on the surface of the catheter. This ensures the catheter surface remains smooth and comfortable throughout catheterization.

LOFRIC - THE CHOICE YOU CAN ALWAYS TRUST

LoFric Origo

LoFric® Origo™ is a hydrophilic intermittent catheter. It's foldable to pocket size, discreet and easy to bring along. The adjustable Insertion Grip allows non-touch technique and facilitates a safe and hygienic catheterization.

LoFric Hydro-Kit

LoFric® Hydro-Kit™ is an all-in-one hydrophilic catheter kit for intermittent catheterization. It has an integrated collection bag and is ready to use anywhere. The loops allows easy opening, the textured Insertion Grip for better grip and allowing non-touch technique. Thanks to the long neck it can be hung over the knee for convenient catheterization





*All LoFric hydrophilic catheters are for single use only.

Ensure proper training on the catheterization procedure is provided to user.

LoFric is for prescription use only.



Drinking

The body generally needs 1.5-2 liters of fluid intake daily. This fluid flushes the bladder and reduces the risk of urinary tract infection.

Good hygiene

Daily hygiene in the genital area is recommended. It is wise to use hand sanitizer before self-catheterization in a public restroom.

Catheterizing frequencies

Your urotherapist/nurse will advise you on how often to catheterize. The normal frequency is 4-6 times a day. It varies from person to person, depending upon your specific bladder issues, how much you drink, how much urine you pass each time and whether you can urinate without a catheter. As a general rule, the bladder should not contain more than 400 ml of urine. To avoid complications, follow the recommendations given to you during training.

Empty your bladder completely

You can do this by changing your body position while the catheter is still in your bladder. Withdraw the catheter slowly to empty all of the urine. Don't be in a hurry. Residual urine inside the bladder increases

the risk of urinary tract infection.
The bladder is emptied most effectively while sitting or standing.

Difficulty inserting the catheter

If you are tense, the sphincter muscle around your urethra may tighten up, making it more difficult to insert the catheter. Don't try to force the catheter in. Find a good position, cough a little and relax. Try to reinsert the catheter. When you start the treatment, you may see a little blood in your urine or on the catheter. This is usually caused by urethra irritation. It usually clears up very soon, but if in doubt, contact your urotherapist or nurse.

When travelling

Carry your catheters and accessories with you when you travel. Since there is always a slight risk of luggage getting lost, always keep a few days' supply of catheters in your hand luggage. To avoid problems at customs, you can order a Medical Validation Certificate from your urotherapist/nurse or contact us at Wellspect HealthCare.

Read more about traveling with catheters at wellspect.com

CHECKLIST BEFORE STARTING IC

To make sure that you have all the information you need to get started with and maintain self-catheterization, you can use this checklist. Fill it in together with your nurse.

Information about IC

Contact nealtncare:	
Clinic:	Telephone:
Catheter selection, LoFric	CH: Length:cm
Number of catheterizations per day:	
 □ What can cause bladder emptying problems? □ Urinary tract anatomy □ Normal functioning of the urinary tract □ Benefits of IC □ Training in the IC method □ Performing IC under supervision Follow-up on IC	 ☐ Adapting emptying intervals individually ☐ Information on complications, such as urinary tract infections ☐ Demonstrate catheters and any other accessories ☐ Practical advice
Contact healthcare:	
Clinic:	Telephone:
Catheter selection, LoFric	CH: Length:cm
Number of catheterizations per day:	
☐ To adapt the emptying interval - review your micturition list	☐ Practical information about changes in the product line and current web sites
☐ IC technique repetition	☐ Any complications
☐ Follow-up on the affect IC treatment has on everyday life/quality of life - correct catheter? - correct emptying interval?	☐ Practical advice, for example



REAL LIFE STORIES

$\label{eq:michael} \mbox{MICHAEL KERR - User of LoFric Origo and LoFric Hydro-Kit}$

"Eighteen years ago I had a diving accident on a holiday. I dived into a swimming pool and didn't realize it was the shallow end. I hit my head in the bottom and broke my neck. I sustained a spinal cord injury at C6-7 level and started using intermittent catheters to empty my bladder.

The biggest challenge for me was holding the catheter. That's what I found most tricky, but once I found a way that worked for me, it was fine.

I have tried a few different catheters before I tried this one and this works

best for me. It is easy to use, it is compact. I can fold it up and put it in a bag under my chair, so it is discreet. I don't need to worry about finding water, it's already in there. You just squeeze it and break the seal and you've got your sterile water.

My bladder management has greatly improved! I feel better, no sweating, no infections and it improves your sexual function as well. I feel much better since I started using intermittent catheters."



BLADDER AND BOWEL INTERACTIONS

Bladder and bowel dysfunctions often appear together. In a lot of cases, these symptoms coexist and interact. If you have a neurogenic condition, they can have a huge impact upon quality of life. If bladder symptoms are getting worse, this often also means the bowel symtoms will also. But they are rarely addressed together, even though it may be beneficial for the outcome.

A combined treatment approach

Therapies that relieve one of these conditions often relieve the other at the same time. A combined treatment approach increases the effectiveness of each therapy, and regaining control of both your bladder and bowel will significantly improve your quality of life. Ask your healthcare provider for more information.

WOULD YOU LIKE TO KNOW MORE ABOUT GETTING A GOOD START?

- Learn more about your body and different diagnoses
- Discover the benefits of Intermittent Catheterization (IC) with LoFric
- Get informed about how transanal irrigation (TAI) with Navina Systems can help you regain bowel control
- · Watch instruction videos
- · Read user testimonials

You will find all this and more at: wellspect.com

Contact us

If you have any questions or need more information about LoFric and Navina Systems and our user support programs, do not hesitate to contact us directly.

You will find all contact details on wellspect.com





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- 4. Li L et al. Arch Phys Med Rehab 2013;94:782-7.
- 5. Håkansson et al. Urol Nurs. 2015;35:235-47).
- 6. DeFoor et al. 2017. J Pediatr Urol. 2017;13(4):373.e1-373.e5.

At Wellspect we value the people behind our success as a leading provider of life-changing products for bowel and bladder management such as the well-known brands LoFric® and Navina™. From the thousands of users and healthcare professionals worldwide who inspire our innovative solutions. we know that working together is the best way to advance continence care, giving our users more time for life. Building on over 30 years of life-improving performance, we passionately strive to make a difference every day to everyone who needs our products and services.

Wellspect, A Real Difference,

wellspect.com















