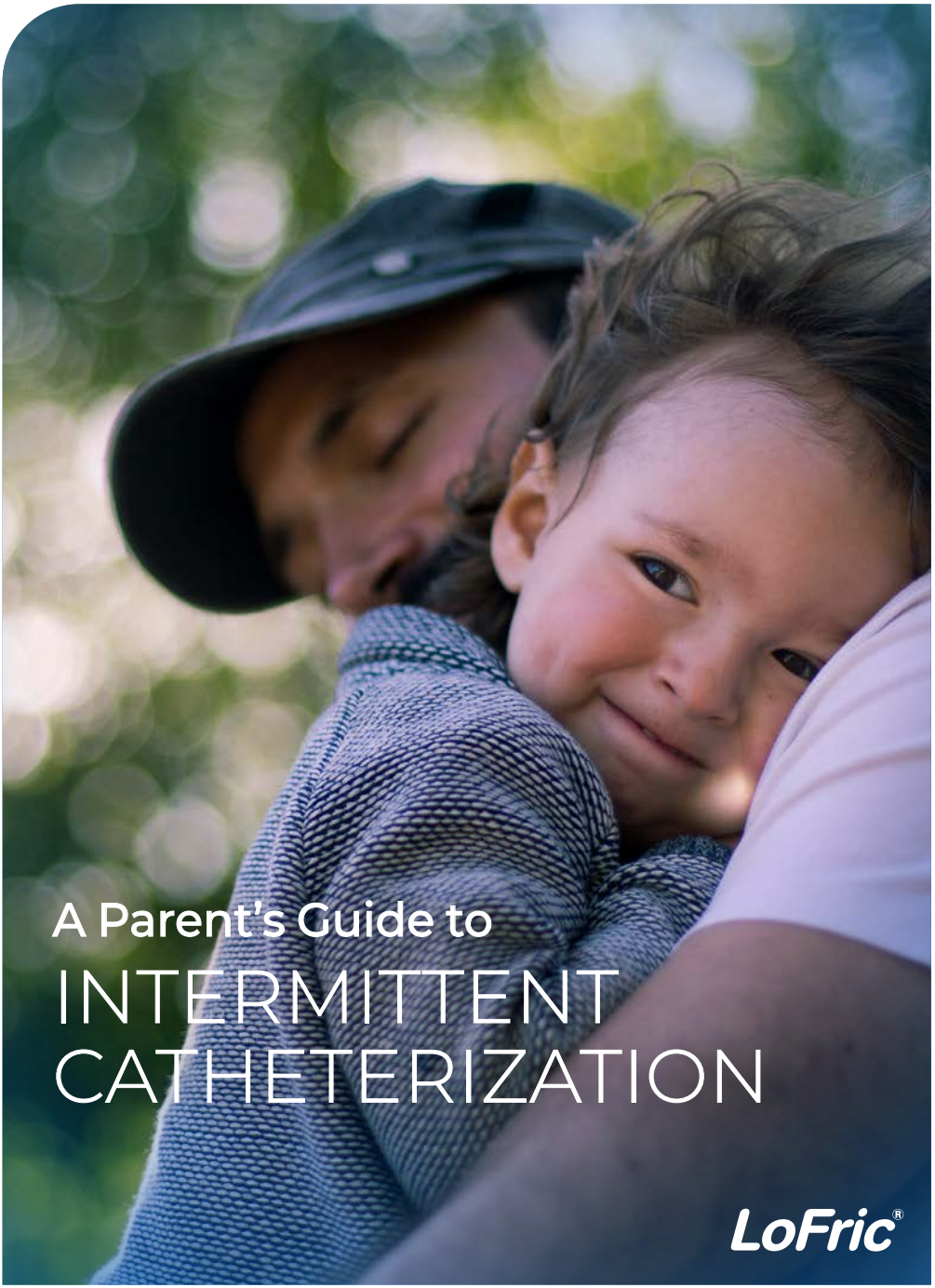
Wellspect®
A REAL DIFFERENCE



A Parent's Guide to INTERMITTENT CATHETERIZATION

LoFric®

Dear parent

This guide is for parents, carers or those who are otherwise responsible for a child who needs help emptying the bladder. Our aim is to give you knowledge and insight into how the urinary tract works, what can cause problems with the bladder and how Intermittent Catheterization (IC) can help your child.

The brochure is intended as a supplement to the information you received from healthcare professionals. We hope it can also be used as a reference book if new questions arise in the future.

TABLE OF CONTENT

1. DO YOU HAVE A CHILD WHO CANNOT URINATE NORMALLY?

This manual is written for you

Not being able to empty the bladder completely in the normal fashion is more common than you think. Every year, many children are born who for different reasons cannot urinate the way others do. Older children (and adults) can also experience problems urinating due to illness, injuries, surgery or medication. For some, these problems are temporary, while others will experience them for the rest of their lives. Today, most people experiencing these types of problems are being helped by a therapy known as intermittent catheterization (IC). Basically, this means emptying the bladder at regular intervals by using a thin plastic tube called a catheter. The information in this manual explains the IC method and is intended as a complement to the personal instructions provided to you by your healthcare professionals. It can also be used as a reference to review information over time or to consult as new questions arise. In this manual, we discuss how the urinary system works, what can affect it and how to catheterize your child, as well as how to gradually involve your child in the procedure so that he or she can perform self-catheterization as soon as it becomes possible. In this document we will refer to the term 'parents' but this also refers to guardians or primary carers helping the child.

We offer advice about how to show your child support and things you should think about as your child grows up and develops. Once you have read this manual, we hope that you will feel a sense of relief

– catheterization is neither complicated nor difficult.

Ways to help and support your child

Not being able to urinate is something that is usually not openly discussed. Needing someone's help to empty the bladder can be experienced as embarrassing, especially when your child grows older. For most children, being able to empty their own bladder without the help of an adult is very rewarding and an important step in their development. For this and many other reasons, it is important to allow your child to participate in catheterization at an early age and to encourage all signs of progress, both big and small. The ambition is to let your child learn as much as possible about the catheterization process, with consideration taken to his or her special condition.

Knowing that he or she is not alone in this situation can be comforting for your child (and for you as a parent). We can also reassure you that catheterization should not affect your child's education. It can be helpful to inform other adults in your child's surroundings about his or her situation.

Explain that catheterization isn't strange, dangerous or something that would normally prevent your child from functioning just like any other child. This way, you can work against prejudice, avoid common misunderstandings, and support your child's contact with the world around him or her. It's just another way to urinate.

2. HOW DOES THE URINARY SYSTEM FUNCTION?

This section aims to increase your knowledge about the basic anatomical functions of the urinary system, how it normally works and what can go wrong. This will hopefully assist in your dialogue with your child to better understand the human body and why catheterization is important.

From a glass of water to urine

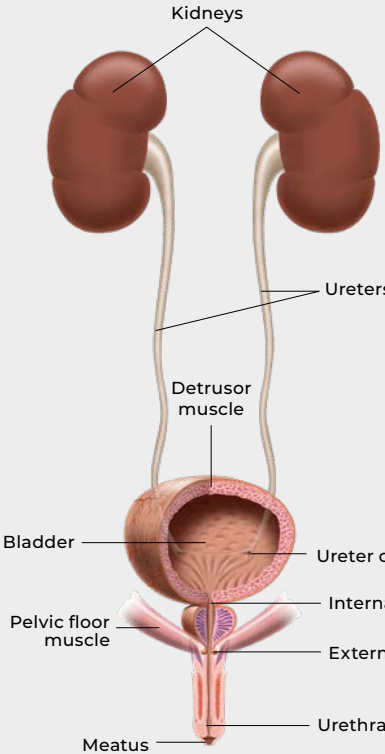
When you drink a glass of water, the water goes down to your stomach. This is where the first breakdown of food and drink takes place.

The contents of your stomach then go out to the intestines, where the blood vessels absorb the liquid. Your blood provides oxygen and nutrients to the cells of your body and removes the waste from the cells. Most of the water is then transported to the kidneys, which filters your blood and returns the liquid to your body, the liquid and substances it needs to function properly.

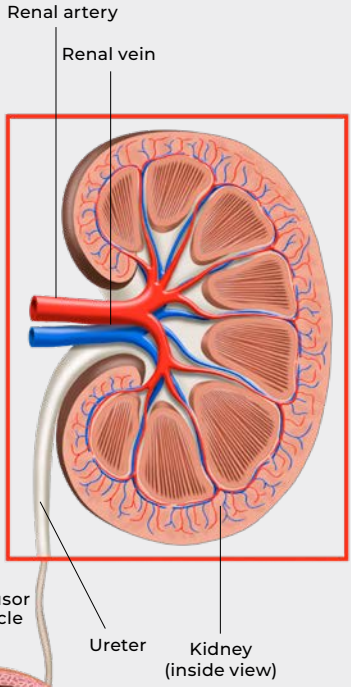
The excess liquids and the substances your body doesn't need leave with the urine, which is then transported from the kidneys via the ureters to the bladder.

The bladder collects and stores urine. When you feel the need to empty your bladder, the bladder sends a message to your brain that it soon should be emptied.

When you urinate, the brain tells the bladder muscle to contract and the sphincter muscle to relax, allowing the urine to flow out through the urethra.



The boy's urinary system



The girl's urinary system

Bladder

– Stores and empties urine

The bladder is a muscle-lined sack that stores and empties urine. This muscle is called the detrusor muscle. It serves as a low-pressure reservoir for the urine. Almost like a balloon in shape, the bladder is small when empty and expands as it fills up.

Urethra

– Transports urine from the bladder out of the body

In girls, the urethra is short and straight. It opens in the genital area just above the vagina. In boys, the urethra is longer, S-shaped and opens at the tip of the penis. In the urethra, the pressure is higher than in the bladder, which helps to keep the bladder under control.

Sphincters

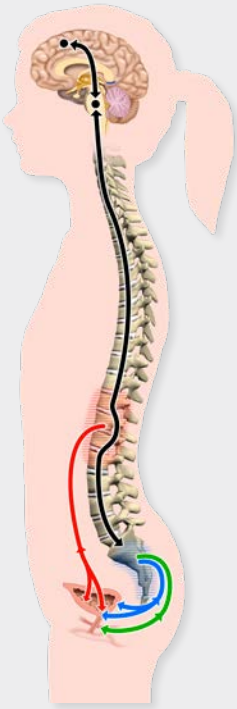
– Seal the urethra

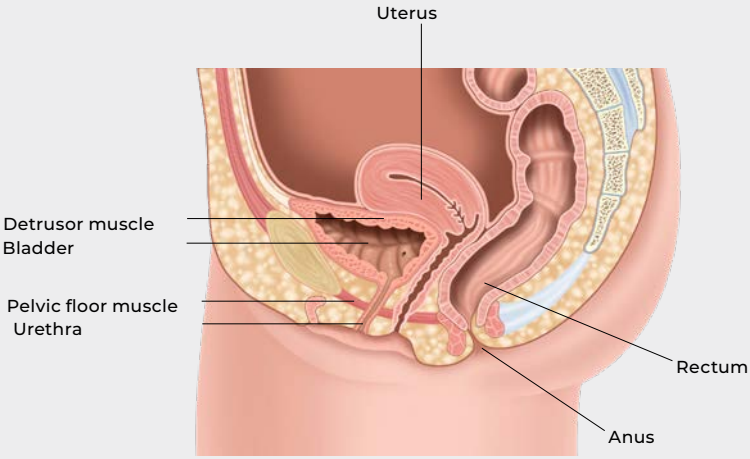
The urethra is surrounded by two small circular muscles called sphincters. The sphincter muscles are normally contracted – this seals the urethra so there are no leaks. When you go to the toilet, the sphincter muscles relax so your urine can come out. One sphincter muscle operates involuntarily, and the other voluntarily, which means you can control it.

Nerve connections

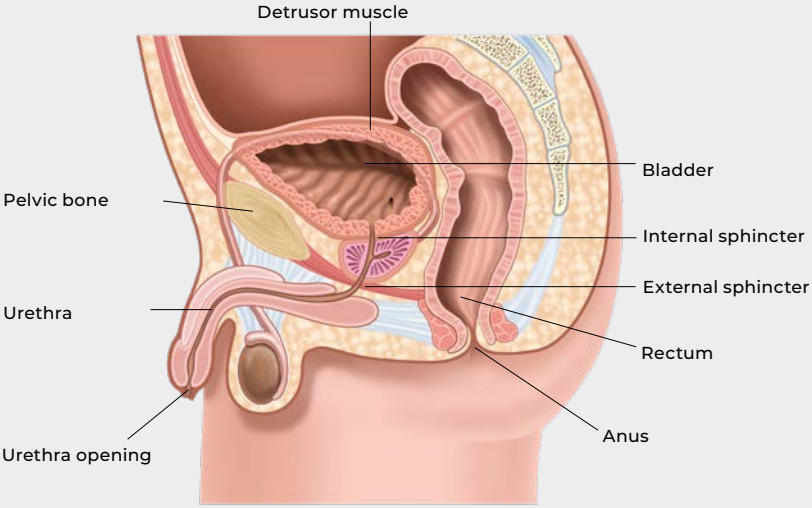
– Communication between brain and bladder

For the urination process to function as planned, the bladder and the brain need to communicate with each other. The following parts of the nervous system are involved in the urination process: the brain, the brainstem, the spinal cord, as well as some peripheral nerves.





A cross section of the girl's anatomy



A cross section of the boy's anatomy

How the urinary system develops

What will eventually become the bladder and the urethra can already be seen between the 4th and 7th weeks of pregnancy. Infants empty their bladders a little at a time, about once an hour. A newborn baby's bladder can hold about 30 ml. Usually, this is a complete emptying, but not always. In those cases, the bladder is soon emptied again to avoid residual urine. The fact that fetuses and infants empty their bladders several times a day indicates that the coordination of the bladder's musculature and the sphincter is not yet fully developed.

At this age, the bladder is emptied by reflex when a certain volume is reached. It is still important to emphasize that a healthy child should urinate in doses. There shouldn't be any leakage. This is what is known as a child being physiologically continent, but not socially continent.

In other words, the child can retain doses, but cannot control it by will-power. When the child gets older, the child urinates less often. Older children urinate approximately every 3-4 hours. At the age of 12–18 months, children usually show that they need to urinate, but cannot control this urge. They will show that they need to urinate more or less at the same time the urine starts flowing.

As children develop during the coming months, the amount of time that elapses between them giving the signal that they need to urinate and the urine starting to flow will increase. At the age of 2–3 years, children can begin to control their bladder by willpower and by the age of 3 more than 80% are continent. 90% of all six year-olds are dry both by day and night. They are now able to control both the sphincter and the bladder and can both initiate and interrupt urination.

A rule of thumb is that the bladder increases ability to store urine by about 30ml per year.
There are of course deviations from this rule, but a good formula for calculating bladder capacity is to multiply 30 ml by the child's age and then add 30.

As the child grows older, he/she will urinate more seldom, typically every 3-4 hours. By the time a child has reached his or her teens, the bladder has reached adult capacity, which is approximately 500 ml.

3. WHAT CAN GO WRONG WITH THE URINARY SYSTEM?

There are three main types of bladder problems:

Storage problems – Inability to keep urine in the bladder. For example, various forms of incontinence.

Emptying problems – Inability to empty the bladder totally.

A mixture – of various forms of incontinence and retention.

Causes of bladder dysfunction

There are many conditions that affect the body's ability to store and empty urine. The most common reason why a child needs to be intermittently catheterized is that some of the nerves that control the bladder have been damaged. This is what is usually referred to as a neurogenic bladder.

Neurogenic bladder

Neurogenic bladder is the loss of normal bladder function caused by damage to part of the nervous system. This nerve damage can be found at different areas in the nervous system (in the brain and in the spinal cord).

The damage can be a result of a number of conditions. The most common conditions causing neurogenic bladder for children are congenital defects (defects that are present at birth) such as spina bifida.

Other conditions that can affect the nerves are brain or spinal cord injuries, neurological diseases, surgery or a tumor.

This damage can cause the bladder to be hypoactive (which means it is unable to contract and empty completely) or hyperactive (in which it contracts too quickly or frequently). Nerve damage can result in impairment to either or both the bladder muscle and the urinary sphincters.

Other indications which require intermittent catheterization (IC)

Outflow obstruction

Outflow obstruction is a generic term for an obstruction during voiding; something that is in the way of the urine flow. Outflow obstruction is characterized by high pressure within the bladder and a weak flow when urinating. Can be caused by,

- Urethral meatal stenosis
- Urethral valve
- Urethral stricture
- Epispadias

Congenital malformations such as bladder exstrophy

Bladder exstrophy is an abnormality present at birth in which the bladder and some other parts of the urinary system are not formed properly.

Reasons for intermittent catheterization (IC)

For children with bladder dysfunction, intermittent catheterization (IC) will aid in bladder management and good bladder health. The therapy is efficient irrespective of problems storing or emptying the urine. By using intermittent catheterization to empty the bladder completely, regularly and under low pressure, the risk of urinary tract infections and damage to the kidneys is reduced. In the long run, it provides a better quality of life through reduced frequent urges and incontinence.

**Further reading: ask your local HCP for further reading suggestions.*

4. WHAT IS INTERMITTENT CATHETERIZATION?

Intermittent catheterization (IC) involves periodically passing a small tube, called a catheter, through the urethra and into the bladder to allow all of the urine to flow out. This allows the bladder to be emptied completely when needed. Once the bladder is emptied, the catheter is removed from the body.

Intermittent catheterization is not a new concept. Some data suggests that catheters have been used by many people, including the Ancient Romans and Egyptians. Today, IC is the preferred form of treatment for the management of incomplete bladder emptying.

Is it difficult?

Although it can seem quite alarming at first, most people find learning to catheterize very easy. Handling a catheter by oneself is possible from around five years of age. With some practice, emptying the bladder with IC can take only a few minutes. Together you will quickly find your own style and position to accomplish this. It should become natural very quickly. Thousands of children, women and men around the world self-catheterize themselves 4-6 times a day, every day. Their experience is that it solves many of their problems and makes life easier.

How will it affect my child's life?

IC using the right catheter is the next best way of passing urine. Once incorporated into the daily routine, IC will not prevent you or your child from living a normal life. The only difference is that he or she will use a catheter to empty the bladder. Many users tell us that thanks to IC, they have regained their freedom. Their bladders no longer control them and they feel they have regained control. They agree that it felt scary at first but the work to learn IC quickly paid off. It is important to perform the catheterization procedure in private starting when your child is young and to involve as few people as necessary. That will give your child a chance to" build a healthy" relationship with this part of his or her body.

IC with single use catheters have several advantages:

- Help keep the urinary system healthy.
- Complete bladder emptying reduces the risk of urine left in the bladder and risk of urinary tract infections.
- Improved quality of life by reducing incontinence and sudden urge to urinate.

How do we fit IC into our everyday life?

You should create a routine that smoothly fits IC into your child's life. Try to find situations and times of the day that are convenient for carrying out IC, such as breaks and around lunch. This will allow your child to manage IC without it interfering too much with school, play or other activities. If possible, leave some spare catheters at places where you and your child often go.

How many times a day should my child carry out IC?

This varies from child to child and will be decided when you are taught IC. It depends on the amount of urine left in the bladder after your child has urinated without a catheter, and the bladder's urine capacity. How often your child should be catheterized can also be affected by the specific bladder problem and certain medications. Your Healthcare professional will inform you about the frequency of catheterization depending on circumstances for your specific child. Usually, every 3-4 hour.

What will happen if my child doesn't catheterize as often as we were told to?

If you miss catheterization once or twice, do not worry. However, make sure that it does not happen often, as this may cause both urinary tract infections and urine leakage. If the pressure in the child's bladder becomes too high, there is a risk that the urine will move up to the kidneys, which could cause serious injury.

5. CATHETERIZATION AND YOUR CHILD

From the start it's you as a parent who will learn how to catheterize your child. As the child grows older it's important to keep them actively involved. Teaching your child to urinate using a catheter is a process. This is why you should encourage your child to participate and learn how to catheterize as early as possible.

Just remember to stay calm and to be methodical. Always train your child on his or her terms. Certain diseases can cause learning disabilities, which may mean that the child will not be able to manage the catheterization process as early or as independently as would otherwise be the case.

0–2 years

Although children of this age are not usually continent and use diapers, your health care professional might want you to use intermittent catheterization to ensure that your child's bladder is completely emptied to avoid infections and kidney damage. Newborns are often catheterized in the same position, regardless of whether it is a boy or a girl. The important thing is to completely empty the bladder. If you put a pillow under your child's back you will give his or her body, an angle which makes it easier to ensure that the bladder is completely emptied. You can also press lightly with your hand over the pubic bone when the urine has stopped flowing before pulling out the catheter.

It is important to keep to a schedule. Carefully follow your healthcare professional's instructions about how many times to carry out catheterization. You do not normally need to empty the bladder at night. It is usually enough to empty it 4–6 times per day. However, newborn babies' urine volumes can vary considerably.

It is good if your child comes up to a sitting position in connection with IC as soon as the child sits securely on the potty or toilet seat, in a normal position for urinating. This way, gravity helps you to empty your child's bladder completely.

You can let your child play with a catheter while you empty his or her bladder. It is a good idea if more than one adult learns how to catheterize your child, so that you can receive help and support when needed.

2–4 years

At this stage the aim is to work towards continence. Toilet training is important milestone, which has physical, emotional and social implications. Preparation for toilet training should start early.

For the parent, a great deal of patience is required to catheterize their child. It is important that your child learns that emptying the bladder is something private and that it must be done in the toilet. Therefore, as early as possible, you should introduce routines to only catheterize your child in the bathroom.

If your child wants to join in and help, he or she can, for example, prepare their catheter or perhaps carefully pull out the catheter after emptying the bladder. You can also get a special doll on which the child can practice catheterization.

4–8 years

When your child reaches the age of preschool you may start helping your child to self-catheterize more actively. Use a doll to show how the catheterization works. Pictures may help to explain how the urine leaves the bladder. For girls, it is important that they familiarize themselves with their genital area using a mirror, so that they learn where the urethra is located and what they look like in the genital area.

The most important thing at this age is motivating your child to carry out the entire catheterization step by step, by him or herself. This means dressing and undressing, remembering the time, gathering supplies, washing his or her hands, moving to the toilet, preparing the catheter, undressing, inserting the catheter, making sure the bladder is empty, removing and disposing of the catheter, getting dressed, washing his or her hands.

When it is time for your child to start school, it is good if he or she is able to catheterize themself. Girls can sit on the toilet. If your child has a poor sense of balance, you can try using a special seat or cushion. Boys can either stand up or sit down.
The procedure can also be performed while sitting in a wheelchair. It may be easier to use catheter kits such as LoFric® Hydro-Kit, which require a slightly different technique, but are practical for times when you do not have access to a toilet.
There are also urine bags that can be connected to the catheter.

**Always make sure you receive training from your HCP and follow any advice given.*

6. NOT ALL HYDROPHILIC CATHETERS ARE THE SAME

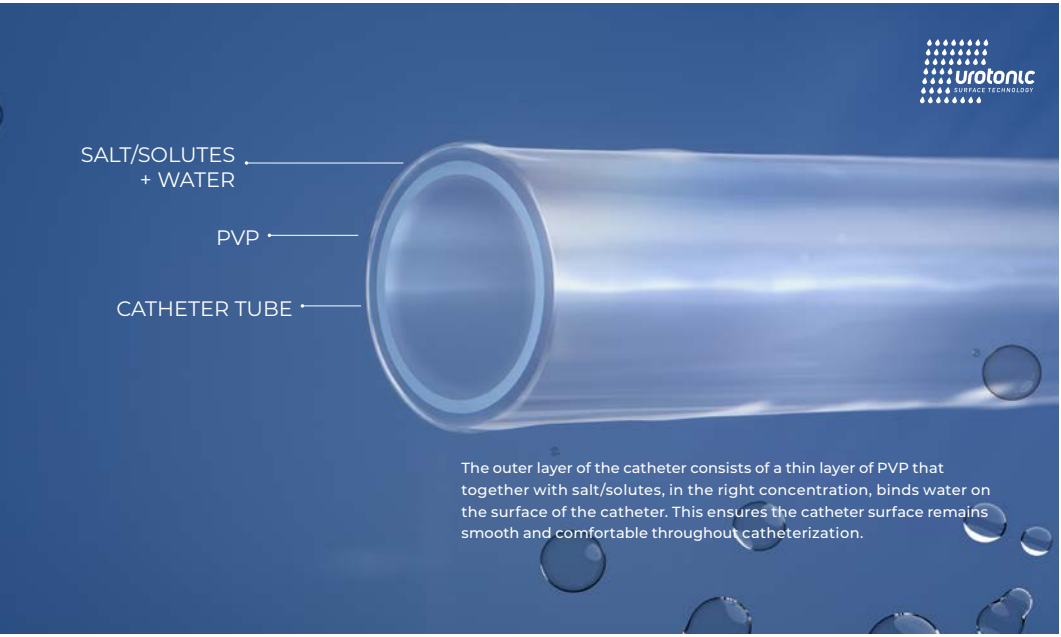
A good start to catheterization is vital for many reasons. The bladder function affects well-being and it's important that complete bladder emptying works well both in the short and long term. Therefore, the choice of catheter matters, as does the knowledge and support along the road. Within time, self-catheterization will be a natural part of your daily life.

The LoFric product family consists of a wide range of different hydrophilic, ready-to-use catheters developed and designed to fit into everyday life. They all have smart features to make intermittent catheterization as easy, comfortable and safe as possible, in any situation.

Wellspect has worked with catheters for 40 year, has met thousands of users, and is confident in our cause. Urethral health and staying free from infections is crucial for a good life, therefore LoFric catheters are designed to maintain good urethral health also in the long-term. To think long-term is important.

Complications like urethral trauma, strictures and urinary tract infections might not be noticeable from the outset. Therefore, to ensure long-term urethral health, make sure to choose the right catheter – right from the start.

LoFric catheters are scientifically proven to promote urethral health, short- and long-term, due to the unique Urotonic™ Surface Technology.



Urotonic™ Surface Technology – smooth at insertion and withdrawal

All LoFric cathethers are coated with the unique Urotonic™ Surface Technology (UST). This means that the surface layer is hydrophilic and isotonic to urine, which prevents the water from the catheter surface to migrate into the surrounding tissue in the urethra.

Migration of water can cause the catheter surface to dry out and increase friction at withdrawal.

The Urotonic™ Surface Technology of all LoFric catheters ensures that the catheter remains smooth and safe, both during insertion and withdrawal.

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.

7. LOFRIC PRODUCT RANGE FOR CHILDREN

LoFric Origo

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

LoFric Sense

LoFric® Sense™ is a hydrophilic intermittent catheter, tailor-made for women and their needs. The ergonomic grip allows for a better grip and non-touch technique. It's easy and discreet to carry and use anywhere.

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 aids in better grip and allowing non-touch technique. Thanks to the long neck it can be hung over the knee for convenient catheterization.

LoFric Primo

LoFric® Primo™ is a hydrophilic intermittent catheter. It's packaged with its own sterile salt solution for instant activation and can be used anywhere. It has an integrated insertion guide allowing non touch technique. It's foldable, easy and discreet to bring along.

LoFric

LoFric® is the first hydrophilic catheter developed for intermittent catheterization. It can be used at home, in hospitals as well as out and about. It requires clean water to activate the unique Urotonic™ Surface Technology coating on the catheter tube.

8. INSTRUCTIONS FOR HOW TO ACTIVATE LOFRIC PRODUCTS

Instructions for how to activate LoFric Origo

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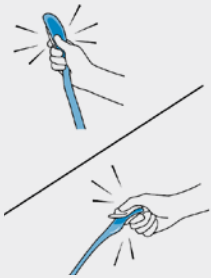

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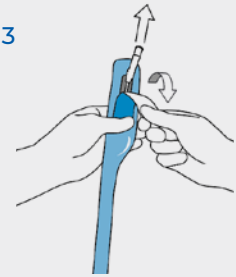

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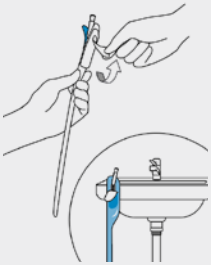

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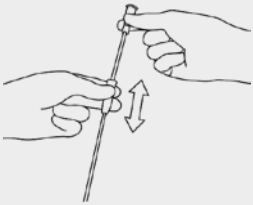
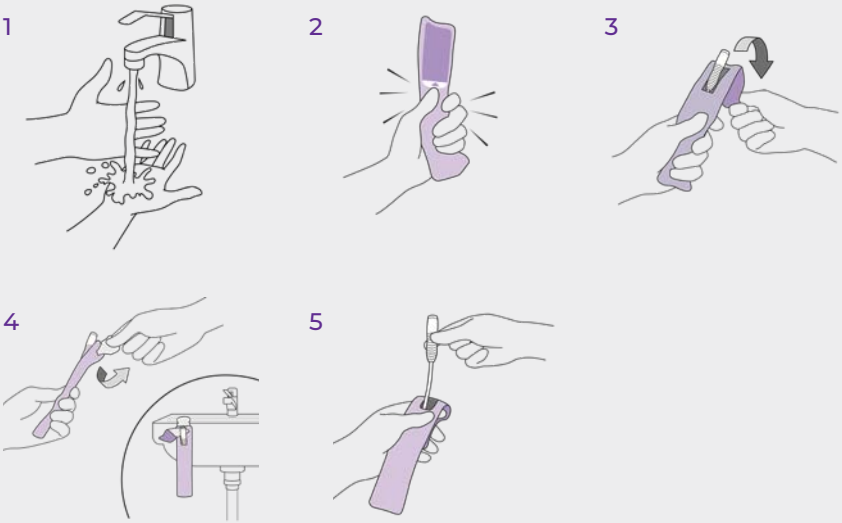


1. Wash your hands thoroughly with soap and water.
2. Press to release the salt solution and the catheter is ready to use.
3. Pull the tab down to open.
4. Optional: Use the adhesive tab on the reverse side to attach the product to a dry, clean surface.
5. Take out the catheter. Optional: Pull and adjust the Insertion Grip located on the funnel, to control insertion without having to touch the catheter tube.

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
**Please refer to IFU included in the package, for important information and complete instructions.*
**Contact your prescriber if you experience difficulties.*

Instructions for how to activate LoFric Sense



1 Wash your hands thoroughly with soap and water.

2 Press to release the salt solution and the catheter is ready to use.

3 Pull the tab up to open.

4 Optional: Use the adhesive tab on the reverse side to attach the product to a dry, clean surface.

5 Hold flap in place and take out the catheter.

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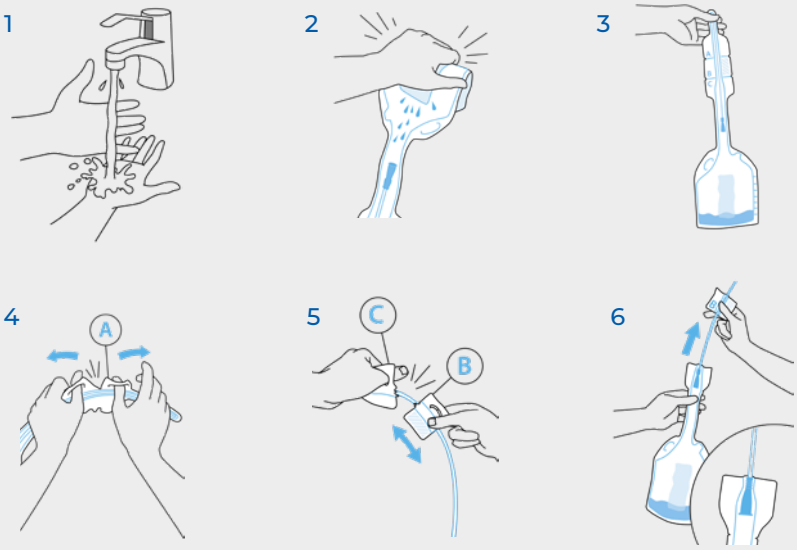
Instructions for how to activate LoFric Hydro-Kit



1. Wash your hands thoroughly with soap and water.
2. Hold the product upright. Fold the sachet and squeeze. Let the salt solution run down to the catheter.
3. Turn the product upside down to allow the salt solution to drain into the collection bag.
4. Use loops at indentation “A” to open and uncover the tip of the catheter.
5. Use loops at indentation “B/C” to open. Use section “B” as insertion grip.
6. Gently pull the catheter out of the package until the funnel comes to a stop, to seal between catheter and collection bag.

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
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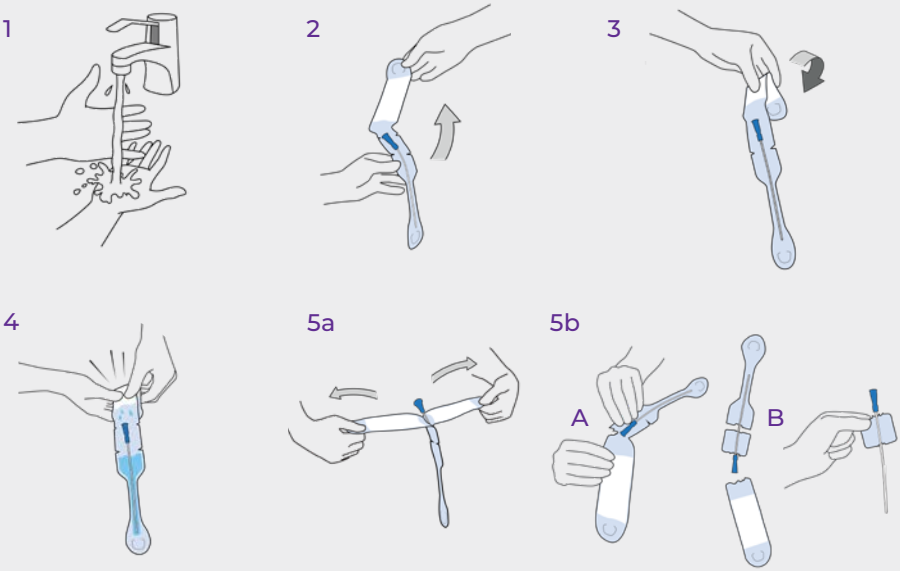
Instructions for how to activate LoFric Primo



1 Wash your hands thoroughly with soap and water.

2 Unfold the package. Hold the product upright.

3 Fold the water pocket.

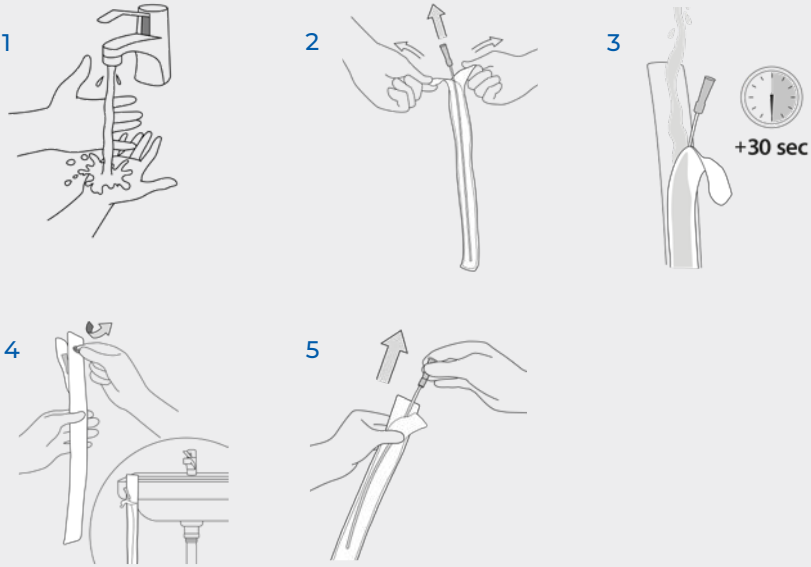
4 Press to release the salt solution and the catheter is ready to use.

5a Open the product, take the catheter out to catheterize.

5b Optional opening using handling aid: Turn the package upside down and the water will flow back to the water pocket. Remove the water pocket by tearing at indentation “A”. Tear at indentation “B”. Use the remaining packaging part as a handling aid. (This part will give you a firm grip and insertion aid, allowing you to insert the catheter without touching it.)

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
**Please refer to IFU included in the package, for important information and complete instructions.*
**Contact your prescriber if you experience difficulties.*

Instructions for how to activate LoFric



1. Wash your hands with soap and water before catheterization.
2. To open, peel the tabs on the funnel side of the package.
3. Fill the package with water, at home from the cold tap and in hospital with steril water or saline. Soak the catheter for 30 seconds before use.
4. Whilst preparing yourself for catheterization, you can remove the sticker and use the self-adhesive tape to attach the product ta a dry surface.
5. Take out the catheter.

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
**Please refer to IFU included in the package, for important information and complete instructions.*
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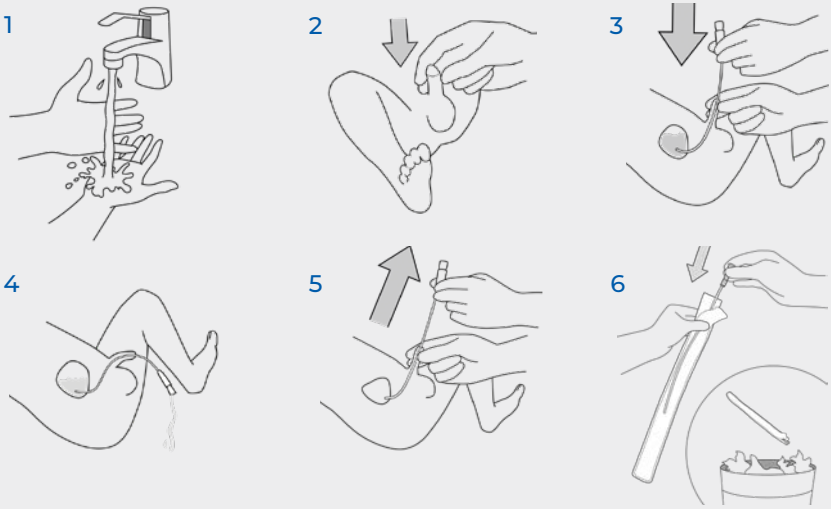
9. INSTRUCTIONS FOR PARENTS ON HOW TO CATHETERIZE YOUR CHILD

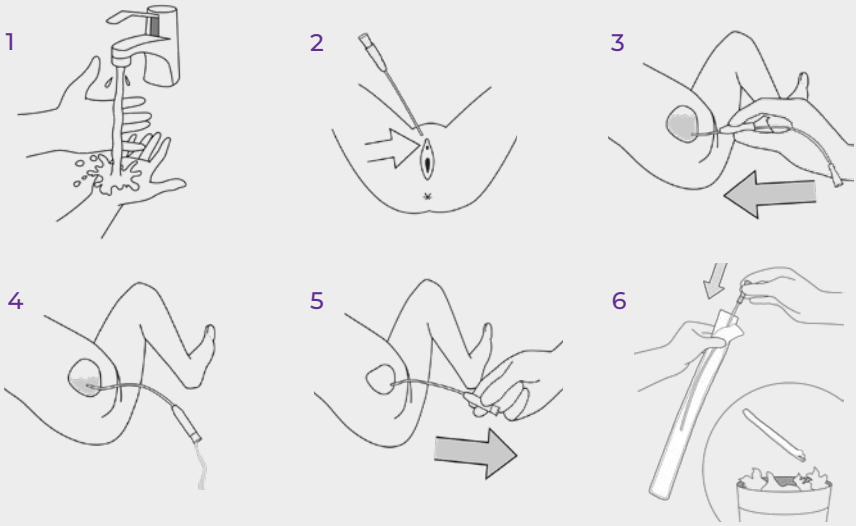
IC instructions for parents when catheterizing a boy



1. Wash your hands with soap and water before catheterization.
   Wash your child's genital area once a day with water and mild soap. If faeces have leaked, always wash prior to catheterization.
2. Lift his penis up towards his stomach. In this position, the urethra is extended and becomes U-shaped. This will make it easier to guide the catheter into the bladder.
3. Slowly insert the catheter into the urethra. When urine begins to flow, insert the catheter slightly more to ensure both eyelets are inside the bladder.
4. Point his penis and the funnel end of the catheter towards a container of any kind or a diaper. When the urine flow stops, slowly withdraw the catheter a little bit. If urine starts to flow again, wait until it has stopped to ensure complete bladder emptying.
5. Hold the penis up towards his stomach again and withdraw the catheter slowly.
6. Put the catheter back in the package and dispose appropriately.

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
**Please refer to IFU included in the package, for important information and complete instructions.*
**Contact your prescriber if you experience difficulties.*

IC instructions for parents when catheterizing a girl



1. Wash your hands with soap and water before catheterization.
   Wash your child's genital area once a day with water and mild soap. If faeces have leaked, always wash prior to catheterization.
2. Spread the labia and locate the urethra just above the vaginal opening.
3. With your other hand, slowly insert the catheter into the urethra. When urine begins to flow, insert the catheter slightly more to ensure both eyelets are inside the bladder. You can now let go of the labia to free up your other hand.
4. Point the funnel end of the catheter towards a container of any kind or a diaper. When the urine flow stops, slowly withdraw the catheter a little bit. If urine starts to flow again, wait until it has stopped to ensure complete bladder emptying.
5. Now, withdraw the catheter slowly.
6. Put the catheter back in the package and dispose appropriately.

**Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.*
**Please refer to IFU included in the package, for important information and complete instructions.*
**Contact your prescriber if you experience difficulties.*

10. IC INSTRUCTION FOR BOYS SELF-CATHETERIZING

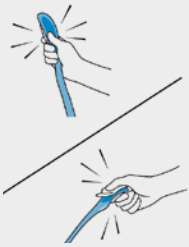
1

I begin by washing my hands. thoroughly with soap and water.
Also the last thing I do, is wash my hands.

2

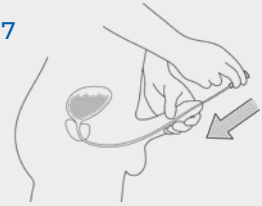
I wash my external genital area once a day. In case of fecal leakage, I always wash before catheterization.

3



I press to release the salt solution and the catheter is ready to use.

7



I lift my penis towards my stomach to straighten the urethra. I slowly insert the catheter into the urethra. When the urine begins to flow, I insert the catheter slightly more to ensure both eyelets are inside the bladder.

8

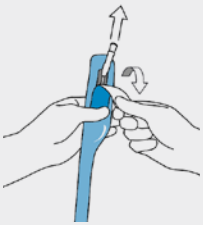
I angle my penis down as the urine begins to flow through the catheter.

*Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.

*Please refer to IFU included in the package, for important information and complete instructions.

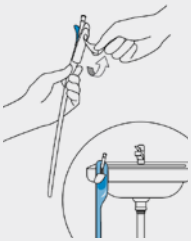
*Contact your prescriber if you experience difficulties.

4



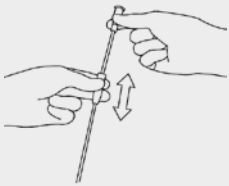
I peel open the label by pulling the tab down.

5



Optional: use the adhesive tab on the back to stick the product to a dry and clean surface.

6



I take the catheter out.

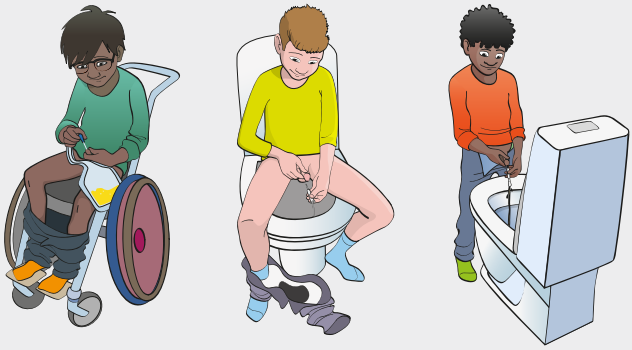
Optional: you can pull and adjust the Insertion Grip located on the funnel, to help insert the catheter without having to touch the slippery tube.

9

When the flow stops, I slowly pull the catheter out a little bit. If more starts coming out, I stop and wait. This to ensure my bladder is completely empty. Then I remove the catheter completely.

10

I put the catheter back in the package before I throw it away.



Examples of positions to perform IC

11. IC INSTRUCTION FOR GIRLS SELF-CATHETERIZING

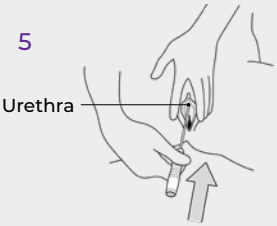
1

I begin by washing my hands. thoroughly with soap and water. Also the last thing I do, is wash my hands.

2

I wash my external genital area once a day. I make sure that I always wash from the front to the back before I use my catheter.
In case of fecal leakage, I always wash before catheterization.

5



I insert the catheter.
The opening of the urethra looks like a small star.
At first it helps to use a mirror to find it, but you should soon learn how to feel your way.

6

When the catheter is all the way into the bladder, the urine flows out.

Ensure to follow the advice and training on the catheterization procedure given by your HCP, before use.

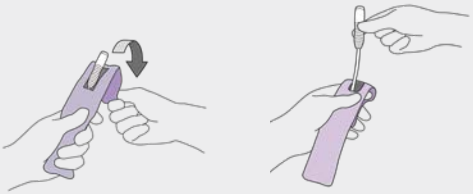
Please refer to IFU included in the package, for important information and complete instructions.

Contact your prescriber if you experience difficulties.

3

Squeeze to release the salt solution and the catheter is ready to use.

4

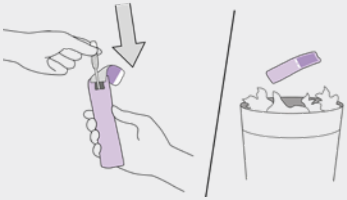


I peel open the label, hold it back and then grip the handle to take the catheter out.

7

After the last drop is out, I pull the catheter out slowly to make sure all is really out.
If more urine starts coming out, I stop and wait. When I am sure my bladder is emptied, I pinch or fold the catheter before I remove it all the way. This way I am sure that even the last drops of urine, left in the catheter, stay in the catheter.

8



I put the catheter back in the package before I throw it away.

Examples of positions to perform IC

12. WHAT SHOULD I TAKE INTO CONSIDERATION?

Privacy

For your child's integrity and development, it is also important that he or she learns that urinating is a private matter, which should, if possible, be done in the bathroom with a closed door and with as few people as possible involved.

When can my child begin using a catheter by him or herself? The age ranges named in this guide are merely guidelines. The exact age when your child is mature enough to catheterize him or herself depends on the individual. For example, different levels of cognitive and physical coordination difficulties will affect when a child will be ready to progress from one step to the next.

Catheter size changes as our child grows

As your child grows and becomes older, you will need to change to a larger and and possibly longer catheter (if a boy). If your child is impatient and feels that it takes too long to empty his or her bladder, it can be because the catheter is too small. In order to minimize the risk of a urinary tract infection or residual urine in the bladder, the catheter must not be too thin or too short. Talk to your child's IC healthcare professional.

You are the one responsible

As parents, you are responsible for teaching others in IC or for organizing a training session through HCP´s. Explain how important it is that your child is catheterized as many times as necessary, and why the bladder must be emptied properly. You are with the help of HCP´s the one who will teach your child intermittent catheterization. As long as the child needs your help you are responsible for ensuring that catheterization is carried out on time, correctly, and the right number of times per day. It might also be good to retain some control even as your child starts to assume responsibility. As your child grows, do not be afraid to let go. Even if it may feel faster and easier to catheterize the child yourself, you are doing your child a favor by teaching him or her the procedure, as this will increase his or her self-confidence and autonomy.

Other responsible adults

It may also be a good idea to tell relatives and other adults involved with your child about the situation. Explain that there is nothing strange about catheterization. It is neither dangerous, nor does it normally prevent your child from functioning like everyone else. This way, you can avoid prejudice, ordinary misunderstandings and support your child in his or her contacts with people around him or her.

In pre-school and school

Even if your child is able to manage intermittent catheterization on his or her own, you should inform his or her teacher and school staff. Your child's "private parts" are a private matter. Using a catheter is more intimate than changing a diaper, so remember to teach your child to close the toilet door. If possible, your child should have a personal toilet, with a lockable cabinet for his or her equipment.

Medical personnel

When you and your child visit a pediatric medical center or doctor's office it is a good idea to mention that your child is catheterized.

13. QUESTIONS AND ANSWERS

How much should my child drink?

This varies from child to child, depending on the child's size, his or her specific condition. Different medications may even have an impact. You should therefore discuss this with your health care professional.

Can my child shower and bath as usual?

Washing, showers, and bathing are normally no problem. It is enough to wash the child's genital area once a day with a mild soap.
If faeces have leaked, always wash prior to catheterization.

What do we do on trips?

Our best advice is that it is better to take too many catheters than too few! If you are travelling abroad you can ask your child's doctor to give you a medical validation certificate or contact Wellspect. That way you will avoid any problems with customs.

Luggages which are checked-in when travelling by plane are sometimes lost. It is therefore better to place your catheters in your hand luggage.

How will catheterization work for my daughter when she gets her period?

Menstruation will not affect the IC procedure. However as always, good hygiene is important.

How to dispose the product after use varies between countries, often the following is valid.

- The transport package as well as catheter box will be sorted as cardboard.
- The packages for LoFric Origo, LoFric Sense and LoFric Primo are sorted as plastic.

The catheter itself shall be sorted as combustible household waste since it's been in contact with body fluids during the catheterization.
The same is valid for packages which have been in contact with body fluids.

What if my child is wet between cath-eterization?

If your child has not had problems with leaking prior to this, it may be a sign of an infection, poor bladder emptying or a change in bladder behavior. Contact your child's healthcare professional for more advice.

What do I do if I notice blood on the catheter?

Always discuss with your HCP if you feel worried, but a small amount of blood can be normal especially if you are beginning catheterization. If the amount increases or continues over a long period you should seek further advice.

Urinary tract infections (UTI)

Under normal conditions the urinary tract has a built-in resistance to infections.

One of the resistance mechanisms is natural emptying (voiding), which means that bacteria are washed out of the bladder.

Bacteriuria in urine does not always needs to be treated:

Sometimes we can have bacteria in our urine without having any problems or symptoms. This is called non-symptomatic bacteriuria. This is a situation that is quite common for children and adults who practice intermittent catheterization.

The bacteria are present in the urine but do not attack the mucous membrane or the bladder wall. Non-symptomatic bacteriuria is usually not treated in children over the age of two in order to minimize the risk of developing resistance to antibiotics.

How do I know if I my child has a urinary tract infection (UTI)?

If your child experiences shivering, a high temperature or fever, or cloudy or smelly urine, he or she may have an infection. Let them drink extra fluids, continue to catheterize and contact your doctor or nurse for advice.

What can I do to prevent urinary tract infection (UTI) for my child?

Hygiene

A. Make sure to wash your hands well prior to catheterization.

B. Wash your child's genital area once a day, if feces have leaked, wash again.

C. Make sure the catheter surface does not come in contact with anything before entering the urethra.

Empty totally

A. Urine is a good environment for bacterial growth, so it is important that you completely empty your child's bladder.

B. Once the urine flow stops, it could be because the eyes of the catheters are above the urine level in the bladder. To make sure you have emptied your child's bladder completely, remove the catheter slowly/stepwise and stop if more urine starts to flow.

C. If you put a pillow under your child's back you will give his or her body an angle which makes it easier to ensure that the bladder is completely emptied.

Empty frequently

A. The volume per catheterization should not be too large. It is important to empty regularly.

B. If the volume is large, the bladder wall is extended and the mucous membrane can be damaged, which makes it easier for bacteria to attack and cause a UTI.

Select the right catheter

Use a catheter with low friction. The theory is that high friction leads to micro trauma in the urethra, which can help bacteria to get a foothold in the mucous membrane. By decreasing friction, you decrease the risk of infection. The Ch size influence the urine flow, discuss with your HCP that you have a suitable catheter size.

A greener surface

We want our products to make a real difference for our users, but with as little environmental impact as possible. As part of our sustainability mission, we have improved the LoFric coating process, starting with the production site in Sweden.* The outcome is products with a smaller carbon footprint, but with the same unquestionably high quality LoFric surface, clinically tested and validated.

The new coating process uses 98% less water and emits a minimal amount of waste water. It also requires less chemicals and uses a 100% bio-based and renewable solvent.

**Producing LoFric Elle, LoFric Origo, LoFric Sense, LoFric Hydro-Kit and LoFric Primo.*

The world's first ecolabelled catheter*

The Swan is the official Nordic ecolabel. To obtain this, a product must adhere to strict environmental criteria which includes certain standards for type and ratio of chemical material.

The ecolabel also makes it easier for consumers to make environmentally friendly choices when choosing between products.

NORDIC SWAN ECOLABEL
3098 0002

**Applies to: LoFric Elle, LoFric Origo, LoFric Sense, LoFric Hydro-Kit and LoFric Primo.*

WELLSPECT WITH YOU

When choosing Wellspect you get much more than just high quality products. Wellspect With You is our vast service offer that gives you answers and support, every step of the way. No matter if you are the one using our products or need support for a family member, you can get quick assistance online or over the phone, as well as in person.

We have a wide range of services from home delivery and customer service to training and education. Through Wellspect With You we are here when you need us, but our ultimate goal is to help you forget your worries – *and just keep on living.*

Scan the QR code to read more about Wellspect With You and see our range of services.

Wellspect®
A REAL DIFFERENCE

At Wellspect we develop innovative continence care solutions that improve quality of life for people with bladder and bowel problems. We inspire our users to build self-confidence and independence as well as good health and well-being. We have been leading the industry for over 40 years with our product brands LoFric® and Navina™. We always aim to minimize the environmental impact of our products and passionately strive to become climate neutral. We work together with users and healthcare professionals to improve clinical outcome in a sustainable way, now and for the future.

Wellspect. A Real Difference.

For more information about our products and services, please visit Wellspect.com.

Join the conversation on LinkedIn, Twitter, Facebook and Instagram.

wellspect.com

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℞ Only