Bladder Care after a Brain Injury

Definitions

- **Incontinence**: No control over when you pass your urine
- **Indwelling catheter**: A tube which stays in the bladder to drain the urine.
- **Intermittent catheterization (IMC)**: A tube that is put into the bladder only long enough to drain urine. Once the bladder is empty, the tube is removed. Also called a **straight cath** or **self catheterization**.
- **Post void residual (PVR)**: Amount of urine that remains in the bladder after urinating. It is determined by inserting a tube into the bladder or with an ultrasound machine.
- **Retention**: Inability to empty the bladder completely of urine.

What are possible bladder problems after a brain injury?

- Incontinence that may result from:
  - Bladder infections
  - Using an indwelling catheter for too long after a brain injury
  - The brain is not able to recognize that the bladder is full
  - Not able to think through the steps needed to empty the bladder
  - Not able to use the toilet due to weakness
  - Not able to let someone know of your need to urinate
  - Confusion

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Retention may be due to:
- Weakness of the bladder muscle
- Block in the flow of urine
- Infection in the bladder or kidney (urinary tract) can occur.

What can you do to help correct your bladder problems?

When you have incontinence
- Write down your pattern of passing urine. Include:
  - Time
  - Amount
  - If it was planned or you were incontinent
- Follow your bladder retraining or toileting schedule
  - Use the toilet every 2 to 3 hours during the day and night
  - Limit your fluids during evening hours
- Take your prescribed medicines to help prevent incontinence (Examples: ditropan, probanthine).
- Use products available for managing wetness while you plan your bladder care
  - Adult diapers, panty pads
  - Condom and leg bag for men
  - Soap and water for cleaning after wetness
- Be patient and consistent. Incontinence is a manageable problem that can be resolved. Incontinence at night may take longer to manage.

When you have retention
- Take your medicine to help empty your bladder (Example: urecholine).
- Do self catheterization, often for only a short time.
- Do a Post Void Residual to see if your bladder has emptied completely.
• **When you have a bladder or kidney infection**
  - Check for symptoms.
    - Cloudy urine
    - Fever
    - Foul smelling urine
    - Urge to urinate more often
  - Drink more fluid.
  - Use the toilet more often.
  - Call your doctor.

**What are some other helpful hints?**

- Allow time for privacy.
- Do not use a bedpan, but sit on bedside commode or toilet.
- Allow time for relaxation.

Talk to your doctor or others on your health care team if you have questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.