

Treatment with Cystistat for interstitial (chronic) or recurrent cystitis

Introduction

You have been asked to come into the hospital to have treatment called Cystistat. This is a clear liquid that is used as a temporary replacement of the bladder lining. Cystistat contains sodium hyaluronate, which occurs naturally in the fluids of the eyes, the joints and in the glycosaminoglycan (GAG) layer of the bladder lining. This layer - which is deficient in many patients with chronic cystitis and other painful bladder conditions - is believed to provide the bladder wall with a protective coating against irritants in the urine.

This leaflet explains what the treatment entails and any risks or benefits of using Cystistat.

What is interstitial cystitis?

Interstitial cystitis is a chronic (long term) inflammation (irritation) of the bladder wall. It results in recurring discomfort or pain in the bladder and the surrounding pelvic region along with a frequent and urgent need to urinate, often only producing small amounts of urine. It can also result in sleep disruption, lower back ache, pain during intercourse and tiredness.

What causes interstitial cystitis?

It is generally believed that there are several different causes. Urinary tract infections (UTIs) may be partly responsible but another possibility is damage to the waterproof lining of the bladder, possibly from something originating in the bladder.

What to expect before the treatment.

Please reduce your fluid intake before you come to Urology Procedures for your appointment, and stop drinking at least one hour beforehand. This will improve the effect of Cystistat on your bladder lining. On arrival you will be asked to provide a urine sample to test to see if you have a UTI. If you do your treatment may be postponed for a week while your urine sample is sent off to the pathology laboratory and you may get treated with antibiotics. You will be asked to empty your bladder before the treatment starts. If you are pregnant or intend to get pregnant you need to inform the nurse before you start as treatment will be postponed.

Giving consent

We want to involve you in all the decisions about your care and treatment. If you decide to go ahead you will be asked to give your consent verbally. This confirms that you agree to have the treatment and understand what it involves.

What does the treatment involve?

You will be asked to undress from the waist down and will be given a dignity cover for your bottom half. You will then be asked to lie on a couch where a thin tube called a catheter will be passed through the urethra (the tube by which urine is passed) into the bladder. Then any remaining urine will be drained out and 50 mls of Cystistat solution is then inserted via the catheter into your bladder. The catheter is then removed leaving the solution inside your bladder coating the bladder wall.

Some patients learn to insert a catheter and self-administer Cystistat at home. The nursing team will teach you how to do this if you wish to learn.

For best results, Cystistat should be retained in your bladder for as long as possible - **a minimum of 30 minutes and up to 2 hours.**

While the solution is in your bladder you should **avoid drinking large volumes** so the solution is as concentrated as possible to make it as effective as possible.

You can empty your bladder after a minimum of 30 minutes but the longer you can leave it the better.

What happens after the treatment?

Once the treatment has been completed you will be able to go home.

After you have emptied your bladder you should drink plenty of fluid (2-3 litres) daily for a few days after the treatment. You should continue any medication which has been prescribed for your symptoms during this period.

How will I feel after the treatment?

Some patients experience discomfort due to insertion of the catheter and an urgency to pass urine for a short time after the treatment. If you feel unwell with a fever, high temperature shivery, if your urine is cloudy or blood stained or offensively smelling or it stings to pass urine, then consult your GP immediately as these are symptoms of a UTI..

Are there any side effects?

Cystistat is a naturally occurring substance found in the human body. It is usually well tolerated and causes few, if any, adverse reactions. Occasionally, patients will experience localised irritation as a result of the catheterisation itself and may notice some discomfort on passing urine. These symptoms usually clear within 24 hours.

How often will I need the treatment?

Cystistat is administered initially once a week for six weeks. Then you will be seen in the Urology Outpatient department by a member of the urology team six weeks after the treatment to see if the treatment has helped. If it did help while you were having it and your symptoms returned when you were not having it then monthly treatment can continue until symptoms clear up completely, after discussion with a doctor.

How long will it take to notice an improvement in my symptoms?

Results may not be apparent for the first five or six doses but this will vary for individual patients so some may see improvements sooner or later than this.

Are there any alternative treatments?

There are lifestyle changes which may help to reduce the frequency of infection and irritation to the bladder, for example:

- Regularly drinking plenty of fluids.
- Avoiding certain foods like; citrus fruits, tomatoes, chocolate, caffeinated drinks, fizzy drinks, alcohol, spicy foods and artificial sweeteners.
- Avoiding detergents in baths.
- Wearing loose undergarments.
- Passing urine before and after sexual intercourse.

Other helpful measures to discuss with your doctor include:

- The risk of recurrent urinary tract infections in post-menopausal women has been shown to be reduced with the use of topical vaginal oestrogen preparations (patches/creams).
- Long term low-dose antibiotics, typically used for six to twelve months, have been shown to reduce the risk of recurrent UTIs.
- Amitriptyline can reduce the symptoms of urinary urgency and frequency.
- Antihistamines can help to relieve bladder inflammation and pain, urinary frequency, and night time visits to pass urine.

The Urology Procedures Department can be contacted for advice on weekdays between 8.30am – 4.30pm via the Urology Clinical Admin Team 0118 322 8629 or Hopkins Ward on 0118 322 7771 at other times.

Further information

The Cystitis and Overactive Bladder Foundation provides information and support to sufferers of bladder problems, including Interstitial cystitis, bacterial cystitis and overactive bladder. www.cobfoundation.org

More information is available on the Trust website www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.

Written by I Hunter, May 2019. Review due: May 2021