

Urodynamics investigation

Bladder pressure test

Urology Clinical Nurse Specialists
01935 384 394
yeovilhospital.nhs.uk

What is a Urodynamic investigation?

It is a detailed investigation into the way your bladder works.

Why do I need this investigation?

To determine the cause of your bladder symptoms and enable us to plan appropriate treatment and/or surgery.

What are the risks of this investigation?

There is a one in 20 chance of you getting a bladder infection afterwards.

Important information for you prior to your investigation

Please read your appointment letter and contact the urology clinical nurse specialist on 01935 384394 if you have any of the medical conditions listed in the letter.

If you have symptoms of a bladder infection leading up to your investigation, please arrange to see your GP to exclude or treat any possible infection. These symptoms may include cystitis, stinging and burning when passing urine, feeling feverish or having smelly or cloudy urine.

If you are unable to attend for any reason, please inform us by telephoning 01935 384 394, so that we may offer the appointment to someone else.

Please allow up to one hour for the investigation to be completed. Occasionally the investigation can take longer than planned. On the day you should try to attend with your bladder comfortably full (unless you have a catheter).

You will be asked to do a flow test by filling in the frequency volume chart at the end of this leaflet. This will not be necessary if you have a catheter.

If you have been prescribed Trospium (Regurin), Oxybutinin (Ditropan), Propivevine (Detrunorm), Solifenacin (Vesticare) or Tolterodine (Detrusitol), you should not take the tablets for three days prior to the test. Please contact us for advice if you are unsure.

What happens during the investigation?

The clinical nurse specialist will conduct the investigation and will explain in detail, asking for your consent to proceed with the investigation. You will be given a hospital gown to change into.

The investigation requires the use of two small catheters, one inserted into the bladder and the second into the rectum. These catheters measure the pressure in the bladder and the abdomen. A small amount of lubricating or local anaesthetic jelly is introduced into your urethra (waterpipe), this sometimes gives mild discomfort. The catheter will be gently passed up into the bladder. This feels strange and may sting but the feeling quickly wears off.

The second catheter is then inserted into the rectum with lubricating gel. This should not cause any discomfort. These tubes are then attached to a machine which records pressure inside the bladder and rectum.

The bladder is slowly filled with water (through one of the catheters) then from the recorded pressures, we can see how the bladder is working. An ultrasound scan will be performed periodically to measure the amount of urine in your bladder. This simply involves placing some special gel on your tummy and then using a device resting on your skin, to take a picture of your bladder.

During the investigation you will be asked some questions about your bladder symptoms. Your answers will help us to produce a detailed report.

Towards the end of the investigation you will be asked to attempt to pass urine with the tubes in place. The catheters are then removed and a final ultrasound will assess whether your bladder has emptied normally.

What happens after the investigation?

You may experience slight stinging or burning when you pass urine for the rest of the day. These symptoms should quickly improve.

The first time you pass urine you may also pass a little blood. There is a small risk of developing a bladder infection after this test. If this happens, the stinging will get worse and you may become feverish, if so you should see your GP as soon as possible.

Following this procedure we recommend that you increase your fluid intake for 48 hours (an extra one litre a day). This will reduce the slight risk of infection following the procedure

We will usually arrange for you to be seen in outpatients to discuss the results.

Please contact us if you have any questions about the test , or wish to speak to the clinical nurse specialist - telephone 01935 384394

These tests are time consuming and costly. Therefore, if you are unable to attend your appointment for any reason, please inform us promptly on 01935 384 227 so we may offer your appointment to someone else.

If you have any questions or require further information or advice, please contact:

Urology nurses 01935 384 394

If you would like this leaflet in another format or in a different language, please ask a member of staff.

Frequency volume chart

Example	Day 1			
Time	Type of drink	Amount of drink	Amount of urine	Wet/pad changed
6.00am				
7.00am	<i>woke</i>			
8.00am	<i>tea</i>	250		
9.00am			240	
10.00am	<i>coffee</i>	250		
11.00am			180	
12 noon				
1.00pm	<i>water</i>	175		
2.00pm				
3.00pm			320	
4.00pm	<i>tea</i>	250		
5.00pm				
6.00pm				
7.00pm			280	<i>pad</i>
8.00pm	<i>wine</i>	175		
9.00pm				
10.00pm	<i>coffee</i>	150	130	
11.00pm	<i>bed</i>			
12 midnight				
1.00am				
2.00am				
3.00am			170	
4.00am				
5.00am				

Day 1

Time	Type of drink	Amount of drink	Amount of urine passed	Wet/pad changed
6am				
7am				
8am				
9am				
10am				
11am				
12pm				
1pm				
2pm				
3pm				
4pm				
5pm				
6pm				
7pm				
8pm				
9pm				
10pm				
11pm				
Midnight				
1am				
2am				
3am				
4am				
5am				
Totals				

Day 2

Time	Type of drink	Amount of drink	Amount of urine passed	Wet/pad changed
6am				
7am				
8am				
9am				
10am				
11am				
12pm				
1pm				
2pm				
3pm				
4pm				
5pm				
6pm				
7pm				
8pm				
9pm				
10pm				
11pm				
Midnight				
1am				
2am				
3am				
4am				
5am				
Totals				

Day 3

Time	Type of drink	Amount of drink	Amount of urine passed	Wet/pad changed
6am				
7am				
8am				
9am				
10am				
11am				
12pm				
1pm				
2pm				
3pm				
4pm				
5pm				
6pm				
7pm				
8pm				
9pm				
10pm				
11pm				
Midnight				
1am				
2am				
3am				
4am				
5am				
Totals				