

Urinary tract infections (UTIs) and cystitis

UTIs refer to infections of your bladder (cystitis), the urethra (the tube which carries urine out of your body) and your kidneys, and they can affect more than half of women at some time in their lives¹. Some women suffer with recurrent episodes, and UTIs can become more frequent and troublesome in the perimenopause and postmenopause phase of life. This is because a lack of estrogen can cause the lining of your urethra and your bladder to become thinner and more susceptible to harmful bacteria. The natural balance of bacteria in your vagina may also change, leaving your urinary system more vulnerable to a spread of infection from this area.

What are the signs of a UTI?

When you have a UTI, the lining of your bladder and/or urethra can become inflamed, and your urethra can be very sensitive. Common symptoms include:

- Discomfort, pain or a stinging/burning sensation when you pass urine
- Needing to pass urine more frequently or suddenly feeling very desperate to go
- Needing to pass urine more at night time
- A constant feeling that you need to pass urine, even when your bladder is almost empty
- An ache in your lower tummy
- Cloudy, dark and / or strong-smelling urine, which may contain blood
- You may experience confusion or heightened 'brain fog'
- You may have signs of a high temperature or unusually low temperature
- If the infection spreads to your kidneys you may feel more unwell, with fever, nausea and vomiting. If this happens it's important to see your GP

What causes UTIs?

The most common cause is bacteria (often from faeces) entering your urinary tract. Cystitis for example, is often caused by E. coli bacterium, which are often found in your bowel (where they do no harm), and on the skin around your anus and vagina. Because your urethra, vagina and anus are close together, the bacteria can enter your urinary tract quite easily, and cause an infection.

A lack of estrogen in perimenopause and menopause can make the lining of your urinary tract more susceptible to harmful bacteria as there is less of the good bacteria to fight off an infection. You may also have thinning and soreness of the tissue around your urethra, vulva and vagina and you may change your wiping habits after using the toilet because it causes discomfort.

Sometimes UTIs, like cystitis, can also be triggered after sexual intercourse.

How to treat UTIs when you have one

There are a few self-help measures that can help ease the symptoms of a UTI and reduce the risk of recurrence.

- When you first notice symptoms, try to drink plenty of water

- Avoid strong coffee, tea, acidic fruit juices and fizzy drinks, as these can make symptoms worse
- Take a painkiller such as paracetamol or ibuprofen

If your symptoms persist or you feel unwell then see your doctor as you may need to take antibiotics. Don't be tempted to take any antibiotics that you have left over from previous infections.

If you suffer from recurrent UTIs and your doctor has prescribed 'self-start' antibiotics, you can begin to take these if that has been an agreed plan with your doctor.

How to prevent UTIs from occurring

You can help to reduce the chance of getting a UTI if you:

- Aim to drink around two litres of water each day
- Wipe from front to back after using the toilet
- Keep your genital area clean and dry from urine (if using liners due to leaks of urine, change them regularly)
- Consider taking HRT
- Consider vaginal estrogen. This can be prescribed as a cream, or pessary, that you insert 2-3 times a week at night time, or via a flexible ring that sits inside the vagina for 90 days and is then replaced.
- Use a plain, gentle, unperfumed soap when washing intimate areas
- Avoid bubble baths, talcum powder and feminine wipes as these can all cause irritation
- Avoid tight fitting underwear, especially from synthetic material
- Wash genital area before and after sex
- Try to pass urine after sex to help flush away any bacteria
- Avoid using condoms or diaphragms with spermicidal lube, use non-spermicidal lube instead
- Limit intake of alcohol, and sugary foods and drinks

When to see your GP

If your symptoms persist, or you begin to feel unwell with fever, nausea or vomiting, you should contact your GP. You may need to take antibiotics. You will usually be asked to supply a sample of 'mid-stream' urine, that's when you're midway through emptying your bladder, rather than at the beginning or the end.

If you are prescribed antibiotics, it's important to finish the course to reduce the risk of another attack.

Further resources

British Society for Sexual Medicine (2021) position statement for management of genitourinary syndrome of the menopause (GSM) <http://.bssm.uk/resources/>

References:

1. The Urology Foundation, 'Urinary tract infections (UTIs)', <https://www.theurologyfoundation.org/urologyhealth/bladder/uti> (accessed August 2022)

This factsheet has been reviewed by healthcare professionals.

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