

Patient information

Asymptomatic Bacteriuria

What is it?

Guidelines from the National Institute for Health and Care Excellence (NICE) on antenatal care recommend that 'Women should be offered routine screening for asymptomatic bacteriuria by midstream urine culture early in pregnancy' (NICE 2008).

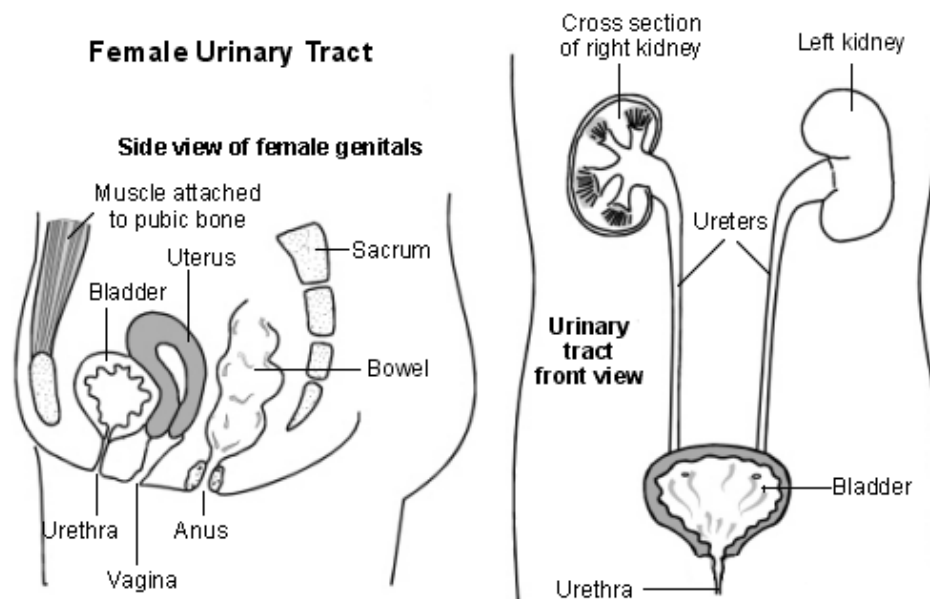
Why is it important?

Identification and treatment of asymptomatic bacteriuria reduces the risk of preterm delivery and kidney infection (pyelonephritis) (NICE 2008).

Women are more prone than men to urine infections, as their urethra is shorter and opens nearer the anus. Pregnant women are also more prone than non-pregnant women to urine infections. This is partly due to the hormonal changes of pregnancy which affect the urinary tract and tend to slow down the flow of urine. It also may be that the enlarged womb (uterus) presses on the bladder and prevents it draining as well. If urine does not drain quickly from the bladder, germs are more able to multiply and cause an infection.

Understanding the urinary tract

There are two kidneys, one on each side of the tummy (abdomen). They make urine which drains down tubes called ureters into the bladder. Urine is stored in the bladder. It is passed out through a tube (the urethra) which carries urine from the bladder when we go to the toilet.



When is my urine checked during pregnancy?

- You will be offered a Mid-Stream Urine (MSU) test by your midwife at the booking appointment. Treatment is advised if any bacteria are found - even if you have no symptoms.
- You will also be asked to bring a urine sample at each of your antenatal appointments.
- You should have your urine tested if you develop symptoms of bladder infection (cystitis) or kidney infection at any stage during pregnancy.

How do I do a midstream specimen of urine?

The aim is to obtain a sample (specimen) of urine from the middle of your bladder. Urine does not normally have any germs (bacteria) in it (urine should be sterile). If bacteria are found in the sample, it means that the urine is infected. A midstream specimen of urine (MSU) is best, as the first bit of urine that you pass may be contaminated with bacteria from the skin.

Before doing an MSU:

- Wash your hands and your genitals well
- Hold open the entrance to the vagina (your labia)

- Once you have enough urine in the bottle, finish off passing the rest of your urine into the toilet

Do not open the sterile bottle until you are ready to take the sample. Avoid touching any part of your genitals with the bottle, as this will increase the risk of contamination. Put the cap back on the container. The specimen bottles contain a powder which helps the sample last longer for testing (a preservative). The sooner the sample is given in to the doctor's surgery, the better. Within two hours is best. If that is not possible, put the sample in the fridge until you take it to the doctor or laboratory. The result of an MSU takes 2 - 7 days.

What happens next?

The results will take a few days to be returned to be ready. If the result is positive your midwife will contact you directly by phone and recommend treatment. Treatment will be a course of appropriate antibiotics for one week.

Is repeat testing necessary?

If your first sample showed an infection and you were given antibiotics, we will ask you to collect a repeat mid-stream urine specimen one-week after finishing the antibiotics to ensure the infection has gone.

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) <https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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