

**Outpatient Urology Department** 

# **Urodynamics** test

Information for patients



# Why have I been given this leaflet?

This leaflet has been given to you because you are booked to have a urodynamics test. It answers some of the questions you may have about the test and will help you to prepare.

# Why am I having a urodynamics test?

A urodynamics test looks at the way your bladder is working and helps us to investigate the cause of your urinary (waterworks) symptoms. The results can help us to decide the best form of treatment for you. It can be useful:

- when an operation is being considered
- when previous treatments, such as medication, have not improved your symptoms.

# How do I prepare for the test?

You will need to complete the enclosed Bladder Diary. (If you have a catheter, then do not complete the output section.)

For one week before your urodynamics test you should stop taking any medication you have been given for your urinary symptoms. This includes the following:

- solifenacin (Vesicare®)
- tolterodine (Detrusitol®)
- mirabegron (Betmiga®)
- oxybutynin (Ditropan®)
- fesoterodine (Toviaz®)
- propiverine (Detrunorm®)
- trospium chloride (Regurin®)

If you are not sure what your tablets are for, please check with your GP surgery or one of the urology Advanced Nurse Practitioners before stopping any tablets.

If you think you have a urine infection, please contact the Advanced Nurse Practitioners, as we may need to reschedule your appointment.

#### On the day of your appointment

You can eat and drink as you would normally.

You should arrive for your appointment with a comfortably full bladder. If this is difficult because of your symptoms, you are welcome to arrive earlier than your appointment time. You can then drink some water in the waiting area.

You should expect to be in the department for approximately one and a half hours. You are welcome to bring someone with you to the department, but they will usually not be able to be in the room during the test.

### What happens during the test?

The nurse practitioner will explain the test to you and answer any questions you may have. They will also look at your Bladder Diary.

The test will begin with you being asked to pass urine into a specially adapted toilet, called a flow meter. This measures how much urine you pass, as well as the flow of the urine. You will be left alone in the room whilst you are doing this, for privacy and to help you feel more relaxed.

Your urine will be tested, as it is not advisable for us to continue with the test if you have signs of an infection. If there is no sign of an infection you will be asked to change into a hospital gown.

The next part of the test looks at the way your bladder works as it fills up. You will be asked to lie on a couch. When you are comfortable the Advanced Nurse Practitioner will insert some anaesthetic 'numbing' gel into your urethra (water pipe).

A fine hollow tube (called a catheter) will be passed into your bladder through your urethra. This may be uncomfortable while it is being passed but should not be painful. It should not be

uncomfortable once it is in place. The end of the catheter that remains outside of your body will be taped to your skin using medical tape.

A second fine hollow catheter tube will be inserted into your rectum (back passage). This measures the pressure in your abdomen so that it can be compared with the pressure in your bladder.

Once both of the catheters are in place, fluid will be run through the catheter into your bladder at a controlled rate. The fluid will slowly fill your bladder, while recordings are made onto a computer from sensors on the catheter tubes. The Advanced Nurse Practitioner carrying out the test will ask you questions about how your bladder feels as it fills, and when you feel you need to pass urine. If you are having your test in the radiology department (where the test is known as 'video urodynamics'), X-rays will be taken throughout the test to get pictures of your bladder as it fills.

The purpose of the test is to recreate symptoms that you are having at home, so if you leak or are incontinent please do not feel embarrassed. It is important for us to look at the activity on the computer screen while you are leaking, so that we can see what might be causing this.

The third part of the test involves passing urine into the flow rate toilet again, but this time with the catheters in place. This is so that we can measure the pressure in your bladder as you pass urine

#### After the test is completed

The catheter tubes will be removed and you will be left to wash and get dressed. The nurse practitioner will give you the results of the test and will tell you what the follow up arrangements will be. This will usually be going back to see the doctor who referred you for the test, in their outpatient clinic. This will not be on the same day as the urodynamics test, but you should be able to arrange an appointment at reception on your way out of the department. A copy of the test report and a letter will be sent to you and to your GP.

#### What can I expect after the test?

You may feel slight stinging or burning when you pass urine. You should drink plenty of fluids, mainly water, to help 'flush' your system through.

If you continue to experience burning or discomfort, your urine becomes cloudy or smelly, or you develop flu-like symptoms, then you should contact your GP or out of hours service urgently. This is because you may have a urine infection that needs testing and treating with antibiotics.

#### What if I have a catheter?

A new catheter will be inserted following the test. Please bring a spare catheter with you so that we can replace it with the same one that you would usually use.

#### How to contact us

If you have any questions please contact the urology Advanced Nurse Practitioners.

Email: urology.nurseprac@nhs.net

Tel: **01865 572 373** 

(Monday to Friday, 9.00am to 5.00pm)

There is an answerphone machine available so you can leave a message and we will call you back.

If you cannot make your appointment and need to re-arrange, please contact the urology outpatient's admin team:

Tel: **01865 234 444** 

(Monday to Friday, 8.00am to 4.00pm)

There is an answerphone available if you would like to leave a message.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk** 

Authors: Teresa Campbell/Helen Marshall, Urology Advanced Nurse Practitioners Heidi Tempest, Urology Consultant August 2015 Review: August 2018 Oxford University Hospitals NHS Trust Oxford OX3 9DU www.ouh.nhs.uk/information

