

# Be a UTI Superhero

Diagnosing and Treating Urinary Tract  
Infection (UTI) in older people



## Did you Know?

Asymptomatic bacteriuria (ASB) is the presence of bacteria in urine without typical signs or symptoms of UTI. Treating ASB with unnecessary antibiotics can lead to harm in 1 out of 3 elderly patients

# SUSPECT TREAT REVIEW

## Suspect

Positive urine dipsticks are frequently used to diagnose UTIs. However, performing urine dipstick in the elderly is not a reliable marker of infection as contaminated samples and ASB will both cause a positive dipstick result.

Diagnose UTI if there are 2 or more of the following clinical symptoms or signs:

- Dysuria
- Fever or hypothermia
- Urinary urgency, frequency or new incontinence
- New or worsening confusion
- Raised WCC or CRP with no alternative cause
- Flank or suprapubic pain
- Visible haematuria

More than 50% of older people have ASB and do not need antibiotics

## Treat

- Use Trust guideline for empirical choice
- OR
- Review if any recent positive urine to guideline antibiotic choice

## Did you Know?

Pivmecillinam is now recommended as a first line agent for UTI in cases where nitrofurantoin is not appropriate.

## Review

- Review empirical antibiotic with sensitivities result from urine culture
- Duration of antibiotic based on guidelines, avoid prolonged course
- If the patient has a urinary catheter, review need, remove and replace if clinically indicated.