

CHILDREN
WITH

a urinary tract infection



Children with a urinary tract infection

General information:

An infection of the urinary tract means that there are bacteria in the urine, urethra, bladder and/or kidneys. Between 1 and 2% of all children contract a urinary tract infection. In most cases the infection is caused by the child's own, often intestinal, bacteria. As the urethra in girls is very short, they have a higher risk of contracting urinary infections in comparison with boys, and some girls repeatedly contract infections. In most cases it is a bladder infection but if the bacteria spread from the bladder to the kidneys it will develop into pyelitis. In this case, the child's general condition will be affected and accompanied by fever.

How is it contracted?

- Urinary tract infections are not contagious
- One occurrence does not protect against urinary tract infection

Symptoms:

- Pain/stinging pain when urinating
- Frequent urination
- Problems with urinary incontinence during the day and/or night
- Foul-smelling urine, cloudy urine, and occasionally bloody urine
- Stomach ache
- Generalised malaise
- Stomach/flank pain, vomiting
- The child's temperature may be normal or above normal.

Children under the age of 2 often show uncharacteristic symptoms such as generalised malaise, vomiting, diarrhoea, apathy, paleness and poor level of well-being.

Good advice:

- Offer the child plenty to drink to "flush" the urinary tract.
- Offer the child liquids that it likes
- You may give the child painkillers as agreed with a doctor if the child is in pain when urinating.

When to see a doctor?

- If the child has symptoms of a urinary tract infection, contact your general practitioner (or the doctor on call). A urinary sample (mid stream urine) will be taken and cultivated

Treatment:

- Urinary tract infections are treated with antibiotics as tablets

or mixture based on the cultivation of the urinary sample. In some cases, the child will have to be admitted to hospital.

Prevention:

- Help the child to drink approx. 1 litre of fluid daily, of which two thirds should be drunk before 4 p.m.
- Teach the child good toilet habits: going to the toilet regularly and taking time to empty the bladder completely
- Teach girls to wipe from the front and backwards after having passed stools
- Avoid constipation.

Good toilet habits:

- The child should urinate approx. every 3 hours
- Teach the child to react to the urge to go to the toilet at once and take enough time
- The child should have a relaxed sitting posture; young children may place a little stool under their feet. Note, that boys who stand up when urinating must pull down their trousers so that the penis is free of the trousers.
- The urine must be passed in an even stream and not be squeezed off. The child should not press when urinating.

Childcare:

The child can return to childcare when the fever has gone and the child feels well again.

Parental guidelines

These guidelines have been prepared by a working group set up by the departments of paediatrics in Herning, Randers, Skejby and Viborg.

The intention with these guidelines is to provide parents with advice across the following sectors: health visitors, general practitioners, doctors on call, and the staff at paediatric admission wards in the Central Denmark Region.

The parental guidelines can be seen and downloaded from the internet on the web site www.fv.rm.dk

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