



Adult and Pediatric Urology

NEOBLADDER HOME CARE INSTRUCTIONS

For men who have had a radical cystectomy and neobladder surgery, your bladder and pelvic lymph nodes and perhaps your prostate and seminal vesicles have been removed. For women, your bladder, uterus, and pelvic lymph nodes have been removed. A pouch to collect urine from your kidneys has been made from a piece of your intestine. To help you to heal more quickly and be more comfortable after the surgery, please follow these instructions carefully.

Your Foley catheter

After surgery while your new pouch is healing, a tube called a Foley catheter drains the urine from your pouch into a leg bag or a bedside bag. You will use a leg bag during the day and a larger bedside bag when you sleep at night. The catheter, which is held in place by a water filled balloon, is left in place 2 to 3 weeks after you are discharged from the hospital.

A few days more or less won't affect healing.

- Check to be sure that urine is collecting in your drainage bag.
- Bring a Depends (or similar) undergarment with you to the clinic the day the catheter is to be removed, and expect to wear pads for protection for several months.

Irrigating your Foley catheter

The intestine that was used to make your new bladder produces mucous. This is normal. It does not mean you have an infection. You will need to keep the inside of the catheter tube clean to prevent mucus from blocking the end of it that is in your bladder. This is called irrigating the tube. You will need to irrigate it every morning, afternoon and evening before bed. Irrigate it more often if it is not draining well, or if it becomes blocked. The catheter is blocked if you can see a lot of urine leaking around your catheter tube or if the urine does not drain into the urinary drainage bag.

Supplies you'll need:

*irrigation kit * normal saline * leg bag or bedside bag

1. Always wash your hands before and after irrigating.
2. Sit on the toilet.
3. Draw up 50 - 60 cc normal saline into the syringe.
4. Disconnect the tube from the leg bag or bedside bag.
5. Insert the syringe of normal saline into the tube.
6. Withdraw 30 - 40 cc of fluid from the tube and flush the fluid down the toilet.
7. Repeat these steps 2 -3 times until you pull back clear fluid. You'll probably have more mucus in the mornings.
8. Reconnect the tube to the leg bag or bedside bag.
9. Change your position if you have trouble irrigating

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Making Normal Saline at Home

Boil 1 quart of water for 10 minutes.

Add 2 teaspoons salt. Allow to cool and pour in to clean bottles. Store in refrigerator.

Activities at Home

- You may shower the day after you go home, but do not take tub baths. The main incision and the places where the drains were removed usually require no bandage.
- Avoid lifting anything that weighs over 5 - 10 pounds for six weeks, to allow your main incision to heal completely, and do not strain for six weeks. Daily exercises such as walking or climbing stairs will help you recover more quickly, but do not do any heavy exercise such as jogging, swimming, weight lifting or golf.
- Avoid sitting for long periods of time with your feet on the floor. Keep your feet propped up on a stool. Get up often to walk. This is important to help your blood circulate and help prevent blood clots.

Your diet and your bowels

- When you go home, eat the foods you normally eat. Because most people are a bit anemic after the operation, it is a good idea to eat iron-rich foods such as red meats, spinach, and other green leafy vegetables for the first month or two.
- It is common to have diarrhea. You can help control the diarrhea by eating high-fiber foods like vegetables, fruits and whole grains, and also by eating yogurt and drinking buttermilk. You can expect to lose 20 to 25 pounds after surgery. If you are concerned about weight loss, drink products like Ensure® or Carnation Instant Breakfast®. It is common to have a light appetite and feel full quickly. Eating 6 smaller, nutritious meals instead of 3 larger ones can also be helpful.

When your Foley catheter is removed

It takes some time for your bladder replacement to recover after it has been empty for the weeks while the catheter has been in place. As your bladder replacement learns to hold more urine, your control will improve. Some people regain urinary control quickly within the first several months, but for most people, it takes at least six months after the operation before daytime control is possible. You may want to wear a small absorbent pad inside a larger pad and change the smaller pad more often. It is usually a good idea to try nighttime control after your bladder can hold 4 hours worth of urine.

- Your new bladder replacement will not give you the same sensation of fullness as your normal bladder. Therefore, you must empty your new bladder regularly or by the clock. Urinate at least every two hours during the day and every three hours at night for the first week after catheter removal. Increase these time intervals to every three hours during the day and every four hours at night for the second week, and every four hours during the day and once a night for the third week and beyond.
- Your new bladder replacement does not actively expel urine as the old bladder did. You must use your abdominal muscles and strain to empty the new bladder.

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At the same time, it is critical to relax the external sphincter muscles of the new bladder before and during straining. It is important to empty your new bladder completely to prevent it from becoming over-distended (stretched) which may lead to infection.

- Toward evening, your leakage will probably be worse because your pelvic muscles tire. As the neobladder learns to hold more urine, your control will improve.
- You may have stress incontinence when you exercise vigorously, especially if your new bladder is full, you are tired, or if you drink alcohol.
- Some doctors recommend Kegel exercises, which people do by tightening and releasing the muscles surrounding the urethra. Research has shown they are not very helpful.
- Occasionally people who have had this surgery are unable to empty their new bladder and will need to learn in the clinic to catheterize themselves.

It is very important to avoid constipation.

- Drink at least 8 glasses of water or other fluids each day
- Do not drink alcohol if you are taking medication.
- If necessary, use 1-2 tablespoons of a mild laxative such as Milk of Magnesia at bedtime.
- A stool softener such as Colace once or twice a day, occasionally may be needed.

Returning to Work

Generally you should not plan to return to work for a least 6 weeks after surgery.

Call our office if:

- Fever more than 102 F
- Your feet or ankles are swollen
- Your calves are tender
- Redness, inflammation, or a foul smell around your wound
- You are unable to irrigate the Foley catheter
- Nausea, vomiting, or diarrhea
- Any concerns