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Cystitis (Urine Infection) in Women

A urine infection in the bladder (cystitis) is common in women. A short course of medicines called antibiotics is the usual treatment. Occasionally it may improve without the need for antibiotics. Cystitis clears quickly without complications in most cases.

What is cystitis?

Cystitis means inflammation of the bladder. It is usually caused by a urine infection. Typical symptoms are pain when you pass urine, and passing urine frequently. You may also have pain in your lower tummy (abdomen), blood in your urine and a high temperature (fever). Your urine may also become cloudy and may become smelly.

Most urine infections are due to germs (bacteria) that come from your own bowel. Some bacteria lie around your back passage (anus) after you pass a stool (faeces). These bacteria can sometimes travel to your urethra (the tube from the bladder that passes out urine) and into your bladder. Some bacteria thrive in urine and multiply quickly to cause infection.

Note: other causes of cystitis include radiotherapy and certain chemicals. This leaflet will only discuss cystitis caused by an infection.

Who develops cystitis?

Women are eight times more likely to have cystitis than men, as the tube that passes out urine from a woman's bladder (the urethra) is shorter and opens nearer the back passage (anus).

Up to 15% of women have cystitis each year and about half of women have at least one bout of cystitis in their life.

Other risk factors for cystitis include having diabetes mellitus, being pregnant and being sexually active.

Can I be sure it is cystitis?

Some conditions cause symptoms that may be mistaken for cystitis. For example, [vaginal thrush](#). Also, soaps, deodorants, bubble baths, etc may irritate your genital area and cause mild pain when you pass urine.

Your doctor or nurse may do a simple dipstick test on a [urine sample](#) to check for cystitis. This can detect bacteria in your urine. It is fairly reliable and usually no further test is needed. If the infection improves but then returns in two weeks, a urine sample is sent to the laboratory to find out which germ (bacterium) is causing the infection.

What is the treatment for cystitis?

Treatment options include the following:

- **Antibiotic medication.** A three- to five-day course is a common treatment for most women. Symptoms usually improve within a day or so after starting treatment. On average, taking antibiotics shortens the duration of symptoms by around one day. One option is that your doctor may offer you a delayed prescription for antibiotics. You then need only cash in the prescription if your symptoms worsen, or do not improve, over the following few days.

- **Not taking any treatment** may be an option (if you are not pregnant or if you have no other illnesses). Your immune system can often clear the infection. Without antibiotics, cystitis (particularly mild cases), may go away on its own in a few days. However, symptoms can sometimes last for a week or so if you do not take antibiotics.
- **Paracetamol or ibuprofen**. These ease pain or discomfort and can also lower a high temperature (fever).

Have lots to drink is traditional advice to 'flush out the bladder'. However, there is no proof that this is helpful. Some doctors feel that it does not help and drinking lots may just cause more (painful) toilet trips. Therefore, it is difficult to give confident advice on whether to drink lots, or just to drink normally.

There is no strong evidence that drinking cranberry juice or taking products that alkalise your urine (such as potassium citrate or bicarbonate) improve the symptoms of cystitis. These sorts of products are sometimes sold as a treatment for cystitis.

If your symptoms worsen or you develop a high fever then you should see your doctor. In addition, if your symptoms do not improve by the end of taking the course of antibiotics or if your symptoms recur within two weeks after taking antibiotics then you should see your doctor.

Note: if you are pregnant or have certain other medical conditions, you should **always** be treated with antibiotics to prevent possible complications.

What is the outlook (prognosis)?

The vast majority of women improve within a few days of developing cystitis. However, if your symptoms do not improve despite taking antibiotics then you may need an alternative antibiotic. Some germs (bacteria) causing cystitis can be resistant to some types of antibiotic.

You should see a doctor if you have recurring bouts of cystitis, to discuss ways of preventing it. See separate leaflet called **Recurrent Cystitis in Women** for more information.

Further help & information

The Cystitis and Overactive Bladder Foundation

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Further reading & references

- **Guidelines on Urological Infections**; European Association of Urology (Mar 2013)
- **Management of suspected bacterial urinary tract infection in adults**; Scottish Intercollegiate Guidelines Network - SIGN (updated guidelines 2012)
- **Little P, Turner S, Rumsby K, et al**; Dipsticks and diagnostic algorithms in urinary tract infection: development and Health Technol Assess. 2009 Mar;13(19):iii-iv, ix-xi, 1-73.
- **Colgan R, Williams M**; Diagnosis and treatment of acute uncomplicated cystitis. Am Fam Physician. 2011 Oct 1;84(7):771-6.

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