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**PREVALENCE OF URINARY TRACT
INFECTION AMONG OUTDOOR
PATIENTS**

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ABSTRACT:

A urinary tract infection (UTI) is an infection that affects part of the urinary tract. When it affects the lower urinary tract it is known as a bladder infection (cystitis) and when it affects the upper urinary tract it is known as a kidney infection (pyelonephritis). Symptoms from a lower urinary tract infection include pain with urination, frequent urination, and feeling the need to urinate despite having an empty bladder. This cross-sectional study was conducted among outdoor patients presenting in different hospitals. The sign, symptoms, severity of burning micturition and disease duration were noted. All the data was entered and analyzed with SPSS Ver. 23.0. There were 120 patients that were included in this study. The mean age of the patients was 34.12 ± 2.67 years. There were 60 (50%) males and 60 (50%) females included in this study. Out of 120 patients, thirty-four were having symptoms of urinary tract infection. The maximum disease duration was 2 years, and the minimum disease duration was 6 months.

KEYWORDS: URINARY TRACT INFECTION



INTRODUCTION:

A urinary tract infection (UTI) is an infection that affects part of the urinary tract. When it affects the lower urinary tract it is known as a bladder infection (cystitis) and when it affects the upper urinary tract it is known as a kidney infection (pyelonephritis). Symptoms from a lower urinary tract infection include pain with urination, frequent urination, and feeling the need to urinate despite having an empty bladder. Symptoms of a kidney infection include fever and flank pain usually in addition to the symptoms of a lower UTI. Rarely the urine may appear bloody. In the very old and the very young, symptoms may be vague or non-specific.

The most common cause of infection is *Escherichia coli*, though other bacteria or fungi may sometimes be the cause. Risk factors include female anatomy, sexual intercourse, diabetes, obesity, and family history. Although sexual intercourse is a risk factor, UTIs are not classified as

sexually transmitted infections (STIs). Kidney infection, if it occurs, usually follows a bladder infection but may also result from a blood-borne infection. Diagnosis in young healthy women can be based on symptoms alone. In those with vague symptoms, diagnosis can be difficult because bacteria may be present without there being an infection. In complicated cases or if treatment fails, a urine culture may be useful.

In uncomplicated cases, UTIs are treated with a short course of antibiotics such as nitrofurantoin or trimethoprim/sulfamethoxazole.

Resistance to many of the antibiotics used to treat this condition is increasing. In complicated cases, a longer course or intravenous antibiotics may be needed. If symptoms do not improve in two or three days, further diagnostic testing may be needed. Phenazopyridine may help with symptoms. In those who have bacteria or white blood cells in their urine but have no



symptoms, antibiotics are generally not needed, although during pregnancy is an exception. In those with frequent infections, a short course of antibiotics may be taken as soon as symptoms begin or long-term antibiotics may be used as a preventive measure.

About 150 million people develop a urinary tract infection in a given year. They are more common in women than men. In women, they are the most common form of bacterial infection. Up to 10% of women have a urinary tract infection in a given year, and half of women have at least one infection at some point in their lifetime (1-3). The objective of this study is to see the prevalence of urinary tract infection among outdoor patients.

MATERIAL OF METHODS:

This cross-sectional study was conducted among outdoor patients presenting in different hospitals. The sign, symptoms, severity of burning micturition and disease duration

were noted. All the data was entered and analyzed with SPSS Ver. 23.0. The quantitative variables were presented as mean and standard deviation. The qualitative variables were presented as frequency and percentages.

RESULTS:

There were 120 patients that were included in this study. The mean age of the patients was 34.12 ± 2.67 years. There were 60 (50%) males and 60 (50%) females included in this study. Out of 120 patients, thirty-four were having symptoms of urinary tract infection. The maximum disease duration was 2 years, and the minimum disease duration was 6 months.

DISCUSSION:

Lower urinary tract infection is also referred to as a bladder infection. The most common symptoms are burning with urination and having to urinate frequently (or an urge to urinate) in the absence of vaginal discharge and



significant pain. These symptoms may vary from mild to severe and in healthy women last an average of six days. Some pain above the pubic bone or in the lower back may be present. People experiencing an upper urinary tract infection, or pyelonephritis, may experience flank pain, fever, or nausea and vomiting in addition to the classic symptoms of a lower urinary tract infection. Rarely, the urine may appear bloody or contain visible pus in the urine. In young children, the only symptom of a urinary tract infection (UTI) may be a fever. Because of the lack of more obvious symptoms, when females under the age of two or uncircumcised males less than a year exhibit a fever, a culture of the urine is recommended by many medical associations. Infants may feed poorly, vomit, sleep more, or show signs of jaundice. In older children, new onset urinary incontinence (loss of bladder control) may occur. About 1 in 400 infants of

1 to 3 months of age with a UTI also have bacterial meningitis.

Urinary tract symptoms are frequently lacking in the elderly. The presentations may be vague with incontinence, a change in mental status, or fatigue as the only symptoms, while some present to a health care provider with sepsis, an infection of the blood, as the first symptoms. Diagnosis can be complicated by the fact that many elderly people have preexisting incontinence or dementia (4-6).

REFERENCES:

1. Brill, JR (1 April 2010). "Diagnosis and treatment of urethritis in men". *American Family Physician*. 81 (7): 873–8. PMID 20353145.
2. Franco, AV (December 2005). "Recurrent urinary tract infections". *Best Practice & Research. Clinical Obstetrics & Gynaecology*. 19(6): 861–73. doi:10.1016/j.bpobgyn.2005.08.003 . PMID 16298166.
3. Engleberg, N C; DiRita, V; Dermody, T S (2007). *Schaechter's Mechanism of Microbial Disease*. Baltimore: Lippincott Williams & Wilkins. ISBN 978-0-7817-5342-5.
4. Dielubanza, EJ; Schaeffer, AJ (January 2011). "Urinary tract



infections in women". *The Medical Clinics of North America*. 95(1): 27–41.

doi:10.1016/j.mcna.2010.08.023.

PMID 21095409.

5. Goldstein, I; Dicks, B; Kim, NN; Hartzell, R (December 2013). "Multidisciplinary overview of vaginal atrophy and associated genitourinary symptoms in postmenopausal women". *Sexual Medicine*. 1 (2): 44–53.

doi:10.1002/sm2.17. PMC 4184497.

PMID 25356287.

6. Holt, JD; Garrett, WA; McCurry, TK; Teichman, JM (15 February 2016). "Common Questions About Chronic Prostatitis". *American Family Physician*. 93 (4): 290–6. PMID 26926816.