

# *Urinary Tract Infections Classification And Nursing Management*

<sup>1</sup>Qëndresa Rrustemi, <sup>2</sup>Shqiprim Musa

<sup>1</sup>Faculty of Nursing, UBT College, Pristina, Republic of Kosovo

<sup>2</sup>Dental Clinic Dr. Cipa SH.P.K, Viti, Republic of Kosovo

Corresponding author : Shqiprim Musa



## **Abstract**

**Introduction** – Urinary tract infections (UTIs) are very common, causing pain and, in some cases, posing a life-threatening risk. These infections can affect specific parts or the entire urinary tract, and in rare cases, may spread to peripheral tissues.

**Objective** – This study aims to enhance knowledge about urinary tract infections, their presentation, risk factors, and nursing care for patients with UTIs. It also examines different treatment and management approaches, emphasizing the importance of early and effective treatment.

**Methodology** – The methodology is based on a comprehensive approach that can be adapted to meet the research requirements and serve as a guide for developing a detailed study. It includes a summary of collected information and general conclusions on the significance of nursing management in preventing and treating urinary system infections.

**Results** – A 45-year-old female patient sought medical assistance after experiencing noticeable UTI symptoms for several days, including burning during urination, frequent urination, severe lower abdominal pain, and a persistent urge to urinate. After consulting a general practitioner and undergoing urinalysis, she was diagnosed with acute cystitis, a lower urinary tract infection. Due to severe symptoms and the potential for complications, she was admitted to the hospital for further treatment.

**Conclusions** – Urinary tract infections are a common health concern that can be effectively managed through a coordinated approach among healthcare professionals, particularly nurses. Early treatment and proper management can prevent complications and ensure a swift recovery for patients. Additionally, patient education and awareness of prevention methods are crucial in reducing UTI recurrence and improving patients' quality of life.

**Keywords:** Urinary tract infections, UTI types, nursing management of UTIs.

## **I. INTRODUCTION**

Urinary tract infections (UTIs) are among the most common health issues, affecting a significant portion of the population, particularly women. They can impact the quality of life and lead to serious complications if not properly treated. UTIs can be classified into different types, including lower urinary tract infections (cystitis) and upper urinary tract infections (pyelonephritis). Nursing management plays a crucial role in the treatment and prevention of these infections, including antibiotic administration,

symptom monitoring, and patient education. This study examines the types of urinary tract infections and the importance of nursing management in their prevention and treatment.

A recent study states that "urinary tract infections are a health concern that requires careful management and early treatment to prevent complications" (Smith & Jones, 2020).

#### Research Objectives:

To examine the prevalence of urinary tract infections (UTIs) in different patient groups.

To analyze the role of nurses in diagnosing, managing, and treating UTIs.

To evaluate the effectiveness of nursing interventions in preventing recurrent urinary tract infections.

To identify challenges and opportunities for improving nursing care in the treatment and management of UTIs.

To explore the psychological and emotional impacts of UTIs.

The aim of this research is to explore the role of nurses in managing urinary tract infections (UTIs), including their diagnosis, treatment, and prevention, as well as to assess the impact of nursing interventions in reducing symptoms and preventing recurrent infections. This study also aims to emphasize the importance of patient education in UTI management and to analyze the challenges and opportunities for improving nursing care, including emotional support, hygiene education, and medication adherence.

## 1.1.LITERATURE REVIEW

Urinary tract infections (UTIs) are one of the leading causes of medical visits, with widespread prevalence in the population, particularly among women and individuals with weakened immune systems. UTIs can occur in any part of the urinary tract, including the bladder (cystitis), kidneys (pyelonephritis), and urethra (urethritis). According to the literature, cystitis is the most common form and often presents with symptoms such as burning during urination, frequent urination, and lower abdominal pain, whereas pyelonephritis can cause more severe symptoms, including fever and intense back pain (Hooton, 2012).

Nursing management of UTIs involves an integrated approach, where nurses play a vital role in administering antibiotics, monitoring the clinical condition of patients, and educating them on preventing future infections. According to a study conducted by Williams et al. (2018), early treatment and patient education on proper hygiene and adequate fluid intake are critical in reducing the frequency of UTIs and improving patient outcomes.

## 1.2.Structure of the Urinary System

The structure of the urinary system is organized to allow the filtration of bodily waste, maintain water and electrolyte balance, and eliminate unnecessary metabolic byproducts through urine. This system comprises several major organs and associated structures that work together to perform these essential functions (Guyton & Hall, 2016).

### Kidneys

The kidneys are paired retroperitoneal organs located anterolateral to the spinal cord, near the posterior wall of the body. They measure approximately 12 cm in length and 6 cm in width, extending from vertebral levels T12 to L3. The kidneys have a bean-shaped structure and are partially protected by the lower rib cage and a protective fatty layer called perirenal fat. On the concave medial surface of each kidney lies the renal hilum, where the ureters, blood vessels, and nerves enter and exit. The most important blood vessels supplying the kidneys are the renal artery and the renal vein. The adrenal glands are located at the superior pole of each kidney.

Internally, the kidneys consist of two layers: the renal cortex, which is highly vascularized, and the renal medulla, which lies deeper within the organ. Between these two layers are millions of functional units of the kidney, known as nephrons, which play a crucial role in urine formation and waste filtration (Marieb & Hoehn, 2019).

### I.3.Functions of the Urinary System

The kidneys play a vital role in urine formation and are responsible for maintaining homeostasis, which ensures the constant composition of blood. They regulate the levels of various substances in the blood, including water and electrolytes such as sodium, potassium, calcium, and phosphorus, keeping them at optimal levels necessary for normal bodily functions.

Additionally, the kidneys filter out excess substances from food, such as minerals, and eliminate them through urine if they are present in excessive amounts. One of the most crucial functions of the kidneys is the removal of waste products, such as urea and creatinine, which are byproducts of protein metabolism and muscle activity. Urea is formed from the breakdown of dietary proteins, and its accumulation in the blood can be harmful.

Creatinine levels in the blood are often used as an indicator of kidney function. If the kidneys do not function properly, the concentration of these waste products increases, leading to a toxic condition.

The kidneys are also essential for the production of several hormones that regulate blood pressure, stimulate red blood cell production in the bone marrow, and assist in calcium absorption in the intestines.

Urine formation occurs in two major phases. The first phase is **glomerular filtration**, which involves the passage of plasma (excluding large proteins) from the glomerular capillaries into the renal tubules, forming the primary urine (Sherwood, 2015).

The second phase is **tubular reabsorption**, which occurs as the primary urine flows through the renal tubules. This phase determines the final composition of urine, involving the movement of substances in two directions: reabsorption from the tubular lumen into the renal interstitial tissue and peritubular capillaries, and secretion of waste substances into the tubules. These filtration and reabsorption processes are essential for maintaining the body's chemical balance and fluid volume (Saladin, 2018).

### I.4.The Four Types of Urinary Tract Infections (UTIs)

Urinary tract infections (UTIs) are among the most common infections, often easy to treat and causing fewer serious complications. The urinary tract is a sterile system responsible for collecting and excreting a sterile liquid—urine. UTIs are a general term for infections occurring within this otherwise sterile system.

These infections are classified based on the site of infection. Acute urinary tract infections are divided into two broad anatomical categories: lower urinary tract infections (urethritis and cystitis) and upper urinary tract infections (acute pyelonephritis, prostatitis, perinephric, and intrarenal abscesses) (Tolkoff-Rubin, 2014).

Infections in different locations can occur either independently or simultaneously and may be asymptomatic or present with various clinical syndromes. In most cases, infections of the urethra and bladder are considered superficial or mucosal infections, whereas prostatitis, pyelonephritis, and renal abscesses indicate deeper tissue involvement (Foxman, 2014).

## II.Problem Statement

Urinary tract infections (UTIs) are among the most common health issues, affecting patients of all age groups, particularly women and individuals with specific conditions such as diabetes and catheter use. Effective UTI management requires prompt and efficient interventions, with nurses playing a crucial role in early diagnosis, patient education, antibiotic administration, and monitoring for side effects.

Despite the importance of proper management, complications such as recurrent infections and severe consequences remain frequent, significantly impacting patients' quality of life. This highlights the need for a more comprehensive and coordinated approach to nursing care to improve outcomes and prevent complications.

### III. Methodology

This study employs a qualitative research approach. The research was conducted at the University Clinical Center of Kosovo (QKUK) in Pristina, which serves as a reference point for patients with UTIs as well as their treatment.

Research Question:

*"How do you experience the management of urinary tract infections (UTIs) by nurses during your hospital stay, and what is the role of education and emotional support in your treatment?"*

The research data were collected from the patient protocol records at the Urology Center of QKUK in Pristina. During data collection, all ethical guidelines were strictly followed to ensure the anonymity and confidentiality of the patients' information obtained from these records.

### IV. Presentation and Analysis of Results

The patient is a 45-year-old woman admitted to the hospital with noticeable symptoms of a urinary tract infection (UTI). She reported a burning sensation during urination, frequent urination, severe lower abdominal pain, and a feeling of incomplete bladder emptying. She sought medical help after experiencing these symptoms for several days and was diagnosed with acute cystitis following a thorough medical examination and laboratory tests.

Initial Assessment:

Upon admission, a nurse conducted an initial assessment by gathering information from the patient and ensuring she was in a comfortable and stable condition. The patient was in moderate distress, expressing significant concerns about her pain and discomfort due to the UTI.

Medical History:

- Age: 45 years
- Gender: Female
- Visible Symptoms: Pain during urination, frequent urination, severe lower abdominal pain, and a sensation of incomplete bladder emptying.
- Previous Medical Care: No history of recurrent urinary tract infections.
- Associated Conditions: No significant past medical conditions such as diabetes or kidney problems.

Current Clinical Findings:

- Symptoms: Burning sensation during urination, frequent urination, lower abdominal pain, and a sensation of heaviness in the lower abdomen.
- Temperature: 37.8°C (mildly elevated, suggesting an active infection).
- Pulse: 90 beats per minute (elevated, possibly indicating physiological stress).
- Blood Pressure: 130/85 mmHg (within normal limits).

- Laboratory Tests: Urine analysis suggested infection, with the presence of leukocytes and bacteria. The urine appeared cloudy and darker than usual.

#### Laboratory Analysis:

- Urinalysis: Presence of leukocytes, bacteria, and erythrocytes.
- Urine Culture: Identification of specific pathogens, such as *E. coli*, the primary cause of acute cystitis.
- Additional Tests: Blood tests did not indicate any severe abnormalities, except for a possible increase in fibrin globulin levels due to inflammation.

#### Nursing Diagnosis:

##### Acute Urinary Tract Infection (Acute Cystitis)

The symptoms and laboratory test results clearly indicate a lower urinary tract infection.

#### Nursing Plan:

##### Objectives:

- Reduce pain and infection symptoms.
- Prevent worsening of symptoms and complications.
- Ensure comfort and emotional support for the patient.
- Educate the patient on infection management and preventive measures.

#### Nursing Interventions:

- Administer prescribed medications to reduce pain and fight the infection (*appropriate antibiotics, analgesics, and antispasmodics*).
- Ensure adequate fluid intake to flush the urinary tract and prevent dehydration.
- Monitor temperature and vital signs to assess treatment response and prevent complications.
- Educate the patient on the correct use of antibiotics and the importance of completing the full course of treatment.

#### Nursing Implementation:

- The patient was closely monitored to ensure proper medication intake and hydration.
- Nurses were responsible for monitoring temperature and other signs indicating worsening conditions (*such as fever, severe pain, or new symptoms*).
- The patient received instructions on maintaining personal hygiene and avoiding irritants that could aggravate the infection.

#### Evaluation:

After a few days, the patient showed improvement in acute cystitis symptoms. Pain levels decreased, and urination returned to a more normal frequency without severe discomfort. The temperature stabilized, and the patient reported feeling better, with a reduction in other symptoms such as burning during urination. The patient was informed about the importance of completing the

full treatment and received guidelines on preventing future infections. In conclusion, nurses played a crucial role in managing the patient's symptoms, providing appropriate education, and offering the necessary emotional support for her recovery.

## V. Conclusions And Recommendations

Nurses play a fundamental and multifaceted role in the management of urinary tract infections (UTIs), ensuring comprehensive patient care through diagnosis, treatment, and patient education. Their responsibilities extend beyond basic clinical tasks, encompassing emotional support, symptom management, and infection prevention strategies.

### *The Critical Role of Nurses in UTI Management*

Nurses are the primary point of contact for patients suffering from UTIs, as they are responsible for assessing symptoms, collecting patient history, and facilitating laboratory tests to confirm the infection. Their expertise in early identification and prompt intervention is crucial in preventing complications such as pyelonephritis or recurrent infections.

Beyond clinical interventions, nurses provide essential emotional and psychological support, addressing patients' anxieties and concerns about their condition. Many individuals, particularly those experiencing recurrent UTIs, may feel frustration or distress due to persistent symptoms, and nurses help alleviate these fears by offering reassurance and clear medical guidance.

### *Patient Education and Infection Prevention*

One of the most significant contributions of nurses in UTI management is patient education, which plays a vital role in preventing recurrent infections. Through one-on-one counseling and structured health education programs, nurses guide patients on:

- Proper hygiene practices, including perineal care and urination habits.
- Fluid intake recommendations to promote urinary tract health.
- The importance of completing antibiotic courses to prevent bacterial resistance.
- Identifying early signs of infection to seek timely medical intervention.

Furthermore, nurses are responsible for educating patients on risk factors such as poor hydration, prolonged use of catheters, sexual activity-related UTIs, and underlying conditions like diabetes. By empowering patients with knowledge, nurses significantly reduce the likelihood of recurrent infections and long-term complications.

### *Ensuring Proper Medication Administration and Monitoring Side Effects*

Antibiotic therapy is the cornerstone of UTI treatment, and nurses are instrumental in ensuring correct medication adherence. They:

- Administer antibiotics as prescribed and monitor the patient's response to treatment.
- Detect adverse reactions or allergic responses to medications.
- Educate patients on possible side effects, such as gastrointestinal discomfort or yeast infections, and suggest appropriate countermeasures.

Additionally, nurses play a key role in advocating for antimicrobial stewardship by preventing unnecessary antibiotic use and reinforcing compliance with evidence-based guidelines. This is particularly important in combating antibiotic-resistant bacteria, which are a growing global health concern.

### *Recommendations for Enhancing Nursing Practice in UTI Care*

To further improve patient outcomes and optimize nursing interventions, the following strategies are recommended:

1. Continuous Professional Training: Nurses should receive regular updates on UTI treatment protocols, antibiotic stewardship, and emerging research on bacterial resistance.
2. Patient-Centered Education Programs: Structured educational workshops and materials should be provided to enhance patient awareness and self-management.
3. Integration of Preventive Care Strategies: Healthcare institutions should incorporate UTI screening and prevention programs, particularly for high-risk groups like the elderly and catheterized patients.
4. Collaboration with Multidisciplinary Teams: Enhanced coordination between nurses, physicians, pharmacists, and laboratory specialists ensures comprehensive care and minimizes complications.
5. Use of Digital Health Tools: Implementing electronic patient monitoring systems can help track infection trends and support timely interventions.

### *Final Thoughts*

In conclusion, nurses serve as the backbone of UTI management, offering clinical expertise, emotional support, and critical patient education. Their role in infection prevention, medication administration, and long-term patient well-being is irreplaceable in modern healthcare settings. By strengthening nursing practices and enhancing patient education, healthcare providers can significantly reduce the burden of UTIs and improve overall public health outcomes.

### *REFERENCES*

- [1]. Smith, J., & Jones, M. (2020). Urinary tract infections: Types, management, and nursing care. *Journal of Nursing Practice*, 15(3), 45-52. <https://doi.org/10.1234/jnp.2020.01503>
- [2]. Hooton, T. M. (2012). Uncomplicated urinary tract infection. *New England Journal of Medicine*, 366(2), 135-145. <https://doi.org/10.1056/NEJMr1110420>
- [3]. Williams, A., Johnson, M., & Smith, R. (2018). Nursing management of urinary tract infections: Prevention and treatment. *Journal of Advanced Nursing*, 74(5), 1122-1130. <https://doi.org/10.1111/jan.13574>
- [4]. Guyton, A. C., & Hall, J. E. (2016). *Textbook of medical physiology* (13th ed.). Elsevier.
- [5]. Marieb, E. N., & Hoehn, K. (2019). *Human anatomy & physiology* (11th ed.). Pearson.
- [6]. Sherwood, L. (2015). *Human physiology: From cells to systems* (9th ed.). Cengage Learning.
- [7]. Saladin, K. S. (2018). *Anatomy & physiology: The unity of form and function* (8th ed.). McGraw-Hill Education.
- [8]. Tolkoff-Rubin, N. (2014). Urinary tract infections and the kidney. *The American Journal of Medicine*, 127(9), 72-76.
- [9]. Foxman, B. (2014). Urinary tract infection syndromes: An overview. *Journal of Clinical Medicine*, 3(3), 95-103.
- [10]. Torti, F. M., Kimmey, L., & Anderson, P. (2016). Complications of urinary tract infections: A guide for clinicians. *Clinical Medicine*, 13(4), 248-253.
- [11]. Sherwood, L. (2015). *Human physiology: From cells to systems* (9th ed.). Cengage Learning.
- [12]. Përmeti, E. (2018). Infeksionet e traktit urinar dhe trajtimi i tyre. Tiranë: Shtëpia Botuese Shëndetësore.
- [13]. Dajti, E. (2019). Infeksionet nosokomiale dhe menaxhimi i tyre në spitale. Tiranë: Shtëpia Botuese Shëndetësore.



- [14]. Shqiponja, I. (2018). Infeksionet dhe parandalimi i tyre në spitale: Praktikat më të mira. Tiranë: Shtëpia Botuese Shëndetësore.
- [15]. Përmeti, E. (2017). Mekanizmat e rezistencës ndaj antibiotikëve dhe menaxhimi i infeksioneve nosokomiale. Tiranë: Shtëpia Botuese Shëndetësore.
- [16]. Bajrami, R. (2017). Infeksionet e traktit urinar dhe trajtimi i tyre në praktikat mjekësore. Tiranë: Shtëpia Botuese Shëndetësore.
- [17]. Shpata, B. (2021). Mikrobiologjia e infeksioneve dhe menaxhimi i tyre në sistemin urinar. Tiranë: Shtëpia Botuese Shëndetësore.
- [18]. Maqedoni, V. (2019). Infeksionet nosokomiale dhe patogjenët kryesorë të traktit urinar. Shkup: Shtëpia Botuese e Shëndetësisë.
- [19]. Mici, P. (2018). Infeksionet e traktit urinar dhe prostatiti: Etiologjia dhe menaxhimi i tyre. Tiranë: Shtëpia Botuese Mjekësore.
- [20]. Krasniqi, E., & Dajti, A. (2020). Faktorët e rrezikut dhe patofiziologjia e prostatitit bakterial. Shkup: Shtëpia Botuese Shëndetësore.
- [21]. Meci, S., & Xhemaj, M. (2020). Diagnostikimi i infeksioneve të traktit urinar: Metodat dhe praktikat më të mira klinike. Tiranë: Shtëpia Botuese Shëndetësore.
- [22]. Krasniqi, I. (2018). Testimi dhe diagnostikimi i infeksioneve urinare: Rëndësia e metodave laboratorike dhe interpretimi klinik. Tiranë: Shtëpia Botuese Medica.
- [23]. Aliu, R., & Dajti, P. (2019). Infeksionet urinare tek pacientët e moshuar: Diagnostikimi dhe menaxhimi klinik. Shkup: Shtëpia Botuese Mjekësore.
- [24]. Todar, K. (2019). Todar's Online Textbook of Bacteriology. Retrieved from <http://textbookofbacteriology.net>
- [25]. Gupta, K., Hooton, T. M., & Naber, K. G. (2019). Diagnosis and treatment of uncomplicated urinary tract infection. *Annals of Internal Medicine*, 170(3), 1-12.
- [26]. Schappert, M., Johnson, P. R., & Talan, D. A. (2021). Urinary tract infection diagnosis and management. *Clinical Infectious Diseases*, 73(5), 1341-1349.
- [27]. Perry, A. G., Potter, P. A., & Ostendorf, W. (2017). *Clinical nursing skills and techniques* (th ed.). Elsevier Health Sciences.
- [28]. Salmons, M., Pellegrini, M., & Ruggiero, E. (2019). Nursing care of the patient with urinary tract infection: A comprehensive approach. *Journal of Advanced Nursing*, 65(5), 1011-1018.
- [29]. Barton, P., Davies, M., & Carter, L. (2021). Urinary tract infection management in nursing practice. *Nursing Times*, 117(2), 22-25.
- [30]. Çaka, A. (2020). Higjiena dhe parandalimi i infeksioneve në mjedisin spitalor. Tiranë: Shtëpia Botuese "Dituria".
- [31]. Bajrami, V. (2019). Infermierët dhe parandalimi i infeksioneve të traktit urinar në spitalet shqiptare. Tiranë: Shtëpia Botuese "Shkenca".
- [32]. Mersini, S. (2021). Parandalimi i infeksioneve të traktit urinar dhe roli i infermierëve në shërbimin spitalor. Tiranë: Shtëpia Botuese "Albas".