



ACTREEN® TIEMANN CATHETERS AND SETS THE ROUTE TO SUCCESS!

Did you know that Tiemann catheters are your best ally for difficult catheterizations?

Out of 189 nurses who were surveyed*, 80% only use Tiemann catheters when they have trouble inserting Nelaton catheters into the urethra. The second criterion of use is patients with a medical history.



Rew M. The use of Tiemann tip catheters for male intermittent self-catheterization. British Journal of Nursing. April 2018

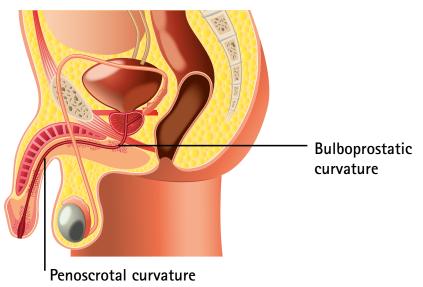
TO WHOM ACTREEN® TIEMANN CATHETERS ARE ADRESSED? The target

Tiemann catheters are primarily used in men to easily cross the bulboprostatic curvature.

Catheterization may sometimes be complicated, in particular in certain situations, such as with a hypertrophic prostate or an obstruction of the lower urinary tract.

With an aging population, we tend to see an increase in complications related to catheterization, adding stress to the healthcare services and resources that are already too much solicited. According to the 2013 NICE report, urinary problems increase in elderly men, affecting 30%⁽¹⁾ of men over 65 years old.

(1) NICE clinical guideline 161, Assessment and prevention of falls in older people, June 2013



Associated conditions

Benign prostatic hyperplasia (BHP) (1)

• BHP is a common, benign condition that causes lower urinary tract symptoms (LUTS) that alter quality of life. It can also be the cause of potentially serious complications, notably urinary retention. This is a frequent condition onset by aging, defined by a sub-bladder obstacle related to the hyperplasia of the periurethral prostate glands. This interferes with urine flow (obstructive signs) and may lead to a reaction in the bladder wall (bladder hyperactivity).

Urethral stenosis (2)

• Stenosis is a tightening of the urethra. Consequently, the bladder does not empty correctly by natural means due to an obstacle located in the urethra. Stenosis needs to be treated in order to prevent complications, such as a urinary infection, a blockage (retention) or even the deterioration of bladder and kidney function.

(1) Seisen T and Xylinas E : Benign Prostatic Hypertrophia. Curriculum Statement n° 10, French Urological Association, 2016-2018. Référentiel du Collège Français des Urologues, Chapitre 10 - Hypetrophie bénigne de la prostate. https://www.urofrance.org/

⁽²⁾ French Urological Association : Surgical Resection of a Urethral Stenosis. Résection - Anastomose d'une sténose urétrale. 2012. https://www.urofrance.org/

THE ADVANTAGE OF OUR ACTREEN® TIEMANN CATHETERS

The Tiemann tip

• The curved and olive tip helps to bypass obstacles in the urethra in order to make catheterization easier and more comfortable for the patient.

Ready to use

• Our Actreen[®] Hi–Lite intermittent catheterization solutions are ready to use: pre–lubricated catheters with hydrophilic lubricant. • No prior preparation, no need for water.

Easy to use

• Visual marker on the connector for easy use: all you need to do is place the marker facing up.
• About Hi Lite Set, the connector can be used as a Tiemann guide, by keeping the upward position during the insertion and removal.

They are available in different French gauges to meet all the patients' needs

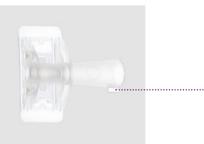
- Actreen[®] Hi-Lite Cath catheters: CH08 to CH18
- Actreen[®] Hi-Lite sets: CH10 to CH18





Curved tip

Its curved shape helps move through the curves of the urethra more easily. Its olive-shaped end helps move around obstacles encountered in the urethra: it is more comfortable and less traumatic.



Visual marker to insert the catheter

The Actreen Hi–Lite Cath have an insertion guide in the connector, which makes it possible to correctly position the catheter before inserting it into the urinary meatus. When the catheter reaches it, the indicator must be positioned upwards in order for the curved tip to be pointing towards its nose. There is a saying for this: "Tip up to the nose, not down to the toes!"

Source: Rew M. The use of Tiemann tip catheters for male intermittent self-catheterization. British Journal of Nursing. April 2018

A Tiemann tip with the benefits of of the Actreen[®] Hi–Lite Range :

The Actreen® Hi-Lite Tiemann catheters and sets have the same features as the Nelaton catheters:

- Biocompatible catheter, PVC-free
- o Ready-to-use: Prelubricated catheter with hydrophilic lubricant, no water management
- Lubricant does not dry out during more than 60 min after opening*
- o Non-traumatic eyes to effectively empty the bladder

* For safety and hygienic reasons we advise you to use the product in the shortest possible time after opening.

Source: 1) Rapport de test 7.5.AC.059.2 2) Rapport de test 7.5.AA.100. They are also:

- DISCREET & FOLDABLE : due to the white packaging and the portable case provided in each box to transport the device discreetly. The CH10 cannot be folded.
- EASY TO OPEN: Several possible openings in the catheter packaging, to be chosen based on the user and his/her dexterity.
- SAFE: "No Touch" system for safe catheterization Sterile catheter Anti-reflux valve on the set
- ECO-FRIENDLY: thanks to its lightweight packaging and the little waste it generates

BENEFITS OF OUR ACTREEN® HI-LITE TIEMANN CATHETER

If catheterizations are repeatedly unsuccessful, there are certain risks, such as trauma, pain and stress for the patient and the healthcare professional, and even the possibility of urethral stenosis or distortion. Therefore Actreen Hi–Lite Tiemann cahteters sould be considered:

For patients:

- Less painful
- Less traumatic for the urethra
- Avoid further complications



For the healthcare professional:

- Better pain management
- Help patients with «insertion issues»
- Fewer catheterization failures
- O Cost effective



IN THE SCIENTIFIC LITERATURE



In its issue of May 2018, the BJN has published an article concerning the use of Tiemann catheters. Written by Maggie Rew, a B. Braun nurse advisor, this article promotes these specific catheters with the support of a survey of 200 nurses in France and England.

The aim was to understand the use of Tiemann catheters by answering questions like the reasons of why did they use them or not, in which medical conditions do they use it them, or the easiness of use of these catheters. The article highlights the high efficiency of the Tiemann tip and a good understanding of its benefits.

On the other hand, these catheters remain underused, for fear of inflicting damage on the patients. One of the causes of this reaction is due to the lack of training for the nurses. In most cases, they use them as a last resort, when it is difficult to perform male catheterization with a Nelaton catheter.

The habits of the nursing staff are also a brake on the use of Tiemann catheters.

Therefore this is an opportunity for B. Braun to remove the barriers by increasing awareness around Tiemann catheters for both patients and nurses, going through training and communication.



Two interesting cases studies illustrate the nurses' experiences of using Tiemann tip catheters with their patients, helping to understand the importance of proposing Tiemann catheters.

Case 1:

Mr. S, 63 years old, was received in the emergency room for urinary retention. It was a shock for him because he never noticed any symptoms. Despite an enlarge but otherwise normal prostate, Mr S was not able to drain his bladder properly without a catheter. He therefore chooses to be operated as quickly as possible, finding that it is constraining to live with catheters.

While waiting for the surgery, Mr S was offered the choice of the ISC. Despite the fact that this technique makes him anxious because of his difficult experience with catheterization before, he wanted an alternative to the indwelling catheter.

After a training on ISC, a Tiemann catheter was chosen by the nurse, by taking into consideration the difficulty of inserting a catheter through the urethra. A few days later, Mr. S was very comfortable with the ISC, due to the efficency and the ease of insertion of the catheter. Furthermore the ISC allowed him to have normal sexual activity, something that he could potentially no longer hope for due to the complications of transurethral resection of prostate.

That's why Mr S finally asked for not undergoing the surgery and decided to keep living with ISC, performing it 3 times a day.

Case 2:

This story is about a General Practioner who had to perform Intermittent Self Catheterization after a BPH diagnosis. With time it became harder to perform catheterization and he often used 4 or 5 catheters before succeed.

He though of having a break with ISC by opting to have an indwelling catheter instead.

During the appointment, an urology nurse suggested him to use a Tiemann catheter by arguing about its ease of insertion. The try was a success, as he managed to insert the catheter at the first time and didn't felt any pain.

At the end, the Tiemann catheters avoid the need to use an indwelling catheter and prevent the associated risks. It also helps to not waste catheters, by increasing the success of introduction.

WHAT DO THE GUIDELINES SAY

The use of Tiemann catheter is now part of the guideline. The European Association of Urology Nurses (EAUN) recommends to use Tiemann catheter when it is difficult to perform male catheterization. Guidelines admit that it is easier to insert the curved and tapered tip through obstructed areas, which is particularly useful in individuals with urethral stricture, blockage or an enlarged prostate.



Actreen[®] Hi-Lite Cath

	CH	ø (mm)	Units/box	Ref.
TIEMANN - 41 cm				
	80	2,7	30 + 1 discreet pouch	238108*
Comment of the second s	1 0	3,3	30 + 1 discreet pouch	238110*
	□ 12	4,0	30 + 1 discreet pouch	238112*
	14	4,7	30 + 1 discreet pouch	238114*
	16	5,3	30 + 1 discreet pouch	238116*
	18	6,0	30	238118*

Actreen® Hi-Lite Set

	CH	ø (mm)	Units/box	Ref.
TIEMANN - 37 cm				
	1 0	3,3	30 + 1 discreet pouch	242110*
	□ 12	4,0	30 + 1 discreet pouch	242112*
	14	4,7	30 + 1 discreet pouch	242114*
	1 6	5,3	30 + 1 discreet pouch	242116*
	18	6,0	30	242118*

* For each country, a specific letter is added at the end of the reference radical.

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