

Use of Uro-Tainer® vs syringe

In comparison to the application of conventional syringe and saline solution in patients with indwelling catheters

Uro-Tainer®	Set with syringe and saline solution	Differences and possible consequences for syringe users
<p>Solution type the user has the choice among several specific solutions:</p> <ul style="list-style-type: none"> ▪ Saline (NaCl 0.9%) ▪ Citric acid to prevent/ combat encrustation: Suby G (3.23%) or Solutio R (6.0%) ▪ Polihexanide (0.02%) ▪ Chlorhexidine 	NaCl 0.9%	No possibility of therapy-specific choice, no chemical action on crystals, no activity on bacterial load on catheter, no anti infective drug.
Catheter maintenance tailored to the patient's needs	Only mechanical rinsing of catheter and bladder	No choice of profilaxis or treatment against encrustation or against bacterial load on the catheter, no choice of anti-bacterial solution
Gravity feed	Use of syringe = forceful physical pressure	Mechanical Irritation of the bladder, tissue damage, pain. The force used to mechanically flush the bladder can potentially endanger the interior bladder wall
Gravity reflux into the bag is possible	Syringe: take-up of liquid only through suction	The forceful physical suction can aspire particles of the urothelium, that then occlude the opening of the catheter. A repeat and more forcefull action is then the consequence with damage to the tissue.
Closed, sterile system, endotoxin free	Open System	Higher risk of infection caused by several handling steps (prepare the components, open these, fill the syringe, ...)
User-friendly and ready to use one-way system	Several components	More time needed for the nursing staff, self application by the patient impossible, higher costs, risk of infection and liquid spill

