

## 8 myths about urinary tract infections (UTI) in nursing home residents

### MYTH #1

**A urinary dipstick positive for nitrites and / or leukocytes always means presence of a UTI in the resident**

**Reality:** A substantial number of nursing home residents have bacteria in their urine (asymptomatic bacteriuria) but finding bacteria in the urine does not necessarily mean that the resident has a UTI.



### MYTH #2

**UTI cannot be prevented.**

**Reality:** A UTI occurs when bacteria, such as those from the intestines or the skin surrounding the urethra, enter the urinary tract and cause symptoms. Good hygiene can prevent these bacteria from entering the urinary tract, which is why frequent diaper changes and regular anogenital care are important.



### MYTH #3

**Presence of bacteria in urine without symptoms always requires antibiotic treatment in nursing home residents.**

**Reality:** Up to 50% of older residents are colonized with bacteria in their urine without having symptoms of infection. This condition does not require treatment.



### MYTH #4

**Cognitive changes, agitation and confusion indicate high probability of UTI.**

**Reality:** There are several possible causes of cognitive changes in the multimorbid older residents, but UTI is not the most frequent one.



### MYTH #5

**When unsure of whether to prescribe an antibiotic or not ("better be safe than sorry"), the benefits of prescribing outweigh the harms of exposure to antibiotics.**

**Reality:** All antibiotics have side effects and may cause more harm than benefit, particularly in more vulnerable older people. Additionally, all use of antibiotics can lead to antimicrobial resistance. This means that antibiotics become ineffective and infections become increasingly difficult to treat.



### MYTH #6

**Dark or foul-smelling urine is a sign of a UTI.**

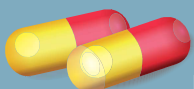
**Reality:** Not if it is not accompanied by specific signs of UTI, like frequent urination, burning sensation, or pain when urinating. Concentrated or foul-smelling urine is often just a sign of dehydration.



### MYTH #7

**Giving prophylactic antibiotics before changing the catheter in a resident with indwelling urinary catheter reduces the risk of UTI.**

**Reality:** Studies have shown that prophylactic antibiotics before changing a urinary catheter is not necessary and is therefore not recommended.



### MYTH #8

**Drinking more fluids is enough to prevent UTIs in nursing home residents.**

**Reality:** Hydration is important, but it alone is not sufficient to prevent UTIs in nursing homes. Good hygiene practices, appropriate toileting schedules and care strategies are essential for UTI prevention in this setting.

