

Infections of the lower urinary tract in the menopause

Urinary tract infections (UTIs) are more common in women than in men, and increase in incidence after the menopause. They are usually caused by bacteria from the gastrointestinal tract, most commonly *Escherichia coli*.

Investigations

The investigations for menopausal women presenting with symptoms of urinary tract infection include:

- urine dipstick for nitrites, leukocytes and red blood cells
- urine culture and sensitivity
- imaging – ultrasound, computed tomography (CT) scan
- cystoscopy

Treatment

- **Antibiotics** are prescribed, such as nitrofurantoin, sulfamethoxazole/trimethoprim, pivmecillinam, fosfomycin.
- **Analgesics** can be given for pain relief.
- It is important to ensure **fluid intake** is sufficient to avoid dehydration.

UTIs may be *simple* or *complicated*: simple UTIs occur women with a normal urinary tract and no co-morbidities; complicated UTIs are associated with an increased likelihood of complications.

Prevention

Any or all of the following may be useful for prevention:

- topical (vaginal) low-dose estrogen (which can also be taken by women who are using systemic menopausal hormone therapy)
- the use of water-based lubricants during sexual intercourse
- D-mannose
- antibiotic prophylaxis

There is a lack of evidence regarding ospemifene or prasterone, and no good-quality evidence for the preventive effects of cranberry juice or products.

Further information

Bono et al. (2023) Uncomplicated urinary tract infections PMID: 29261874

Jepson et al. (2023) Cranberries for treating urinary tract infections <https://doi.org/10.1002/14651858.CD001322.pub2>

National Institute for Health and Care Excellence (2023) Urinary tract infection (lower) – women: What is it? <https://cks.nice.org.uk/topics/urinary-tract-infection-lower-women/background-information/definition>