A UK Multi-Centre Male ISC Patient Satisfaction Survey using HydroSil® Gripper

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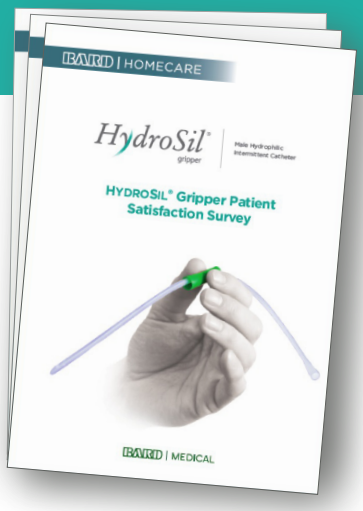

Introduction

Intermittent self catheterisation (ISC) is considered the gold standard treatment and highly recommended to patients living with urinary retention or a range of voiding dysfunction. Nurses involved in teaching ISC to assist with bladder emptying problems need to consider patient preference, therefore they need to explore the evidence to help inform decision making and to empower patients. Advancements in design, technology and innovation in materials used in manufacturing of intermittent catheters, has allowed companies to create more sophisticated 'patient friendly' products. Patient choice has become increasingly important in selecting the right catheter, taking into account lifestyle needs as well as clinical needs. Quality of life (QOL) for these patients is paramount as they aim to lead 'normal' lifestyles, integrating ISC and ensuring that catheterisation has a minimal impact on their day-to-day activities. Published research explores the different aspects and impacts of ISC including QOL, urethral trauma, pain, management of strictures and false passages etc *(Shaw, Logan and Webber, 2008)*. The impacts of using ISC can be categorised as:

- **Positive Impacts** – Alleviating the bladder related symptoms such as incomplete emptying, urgency, frequency and incontinence
- **Negative Impacts** – Social and daily activities including the challenges to find clean and appropriate public toilet facilities
- **Physical Impacts** – Re-occurring urinary tract infections and pain when inserting/removing the catheter
- **Psychological Impacts** – Fear of pain / discomfort, and concerns about hygiene

Patient QOL can be affected by many factors including the product itself and how well suited it is to the patient and their lifestyle. The teaching experience provided by the healthcare professional and how well informed the patient is when learning to catheterise, ultimately influences the technique the patient uses.

This multi-centre patient experience survey explores male patient perceptions and satisfaction of using the HydroSil® Gripper catheter (manufactured by Bard). It aimed to explore issues of discretion, comfort and handling when men are learning ISC. HydroSil® Gripper is an intermittent catheter designed specifically for men. It is the only hydrophilic catheter constructed from silicone, its special features and benefits to patients come from the fact that it is soft and comfortable, whilst sufficiently firm and resilient. This makes it the ideal material for a comfortable 'friction-free' catheterisation. It can also be indefinitely folded to fit into the patient's pocket for discretion.

HydroSil® Gripper - Male Hydrophilic Intermittent Catheter from Bard

Method

Urology Nurse Specialists (UNS) from 10 selected UK NHS sites (covering England, Wales and Scotland) recruited and interviewed 95 new male patients learning ISC. NHS ethical approval was not required for this evaluation, however, internal organisational Research & Development permissions were agreed and internal research governance protocols were followed. A structured patient satisfaction questionnaire was completed to record the data both at induction and follow-up at 4-6 weeks. This questionnaire was available as a paper copy or an online version. The following inclusion and exclusion criteria was followed to recruit male ISC patients to the study:

- Each patient should be 18 years of age and over
- Using a minimum of 2 catheters per day
- Not previously conducted ISC
- No urethral hypersensitivity
- No major urethral strictures or congenital abnormalities in the urinary tract
- No urinary tract infections (UTIs) or history of UTIs
- No patients with a urostomy
- Each patient should be able to respond to the survey / provide feedback

The first part of the survey captured data on the patient's initial impressions of the HydroSil® Gripper catheter exploring:

- How intimidating HydroSil® Gripper appeared when compared to a PVC catheter?
- How comfortable HydroSil® Gripper appeared when compared to a PVC catheter?
- How confident the patient felt in performing ISC with HydroSil® Gripper?

The second part of the survey captured information at the follow-up visit, 4-6 weeks later. Data was collected by the UNS either in person or over the phone with the patient. This section explored the following themes in relation to patient experience of using HydroSil® Gripper:

- Length of time to learn ISC
- How easy the packaging was to open
- Handling the catheter before insertion / removal
- Feeling and sensation of catheter insertion / removal
- Comfort of catheterisation
- Helpfulness of Gripper for catheter insertion / removal
- Confidence of performing catheterisation after 1 week
- Discretion of the catheter including if it was portable and foldable

Results

The data collected was analysed to look for trends in patient satisfaction and experience. At interim analysis, 95 patients completed survey questionnaires at initial assessment for ISC training and follow-up visits.

Initial visit questionnaires demonstrated that:

- **76%** perceived that HydroSil® Gripper appeared less intimidating than a PVC catheter
- **81%** thought that HydroSil® Gripper looked more comfortable than a PVC catheter
- **93%** felt more confident to proceed with catheterisation with HydroSil® Gripper

The follow-up visit survey results demonstrate that:

On Learning ISC:

- **87%** said that it only took them 2 days to master ISC with HydroSil® Gripper
- **93%** of patients developed confidence with performing ISC after the first few weeks of usage

Handling the catheter:

- **86%** found the packaging easy or very easy to open
- **82%** found handling HydroSil® Gripper easy or very easy before insertion
- **81%** found insertion of HydroSil® Gripper easy or very easy
- **75%** rarely or never touched the catheter during insertion (not the Gripper)
- **Only 9%** found the Gripper was not useful during the removal of the catheter
- **84%** did not find withdrawal of HydroSil® Gripper difficult

Pain / Comfort:

- **93%** experienced no pain during insertion of the catheter
- **Only 7%** found catheterisation with HydroSil® Gripper uncomfortable
- **Only 9%** found the removal of the catheter uncomfortable
- **85%** rarely or never experienced discomfort after the catheter was removed

Discretion:

- **Only 1** patient found HydroSil® Gripper indiscreet
- **84%** agreed that the softness/flexibily of HydroSil® Gripper made it easily foldable and easier to carry
- **Only 7%** of patients remembered that HydroSil® Gripper was with them when carrying it around

Compliance and Recommendation:

- **92%** would choose to continue using HydroSil® Gripper
- **84%** would recommend HydroSil® Gripper

Discussion

These preliminary results demonstrate the importance of patient perceptions of a catheter and how it can influence choice before use, when catheterising for the first time. Nurses that teach ISC know only too well how frightening and daunting the first self catheterisation can be and this survey has highlighted feelings and thoughts experienced by men learning ISC. The results help us to better understand the thought processes and considered judgement men make around the comfort factor of a potential catheter, which influences how confident or reticent they may be to proceed to insertion. The general appearance and softness of the silicone catheter, HydroSil® Gripper was viewed as a positive feature. Interestingly participants believed it to be less intimidating to insert into the penis when compared to a PVC catheter. These early results help to gain insight about men's expectations in relation to comfort and ease of use of a catheter. Patients expressed they felt more confident to proceed catheterising with HydroSil® Gripper due to its softer, more flexible appearance.

The majority of men mastered ISC within two days and within a few weeks had gained sufficient confidence to continue catheterising with HydroSil® Gripper. Packaging is another factor that influences patient choice in terms of discretion and handling. Patients found the HydroSil® Gripper packaging easy to open and its softer, more flexible material enabled them to fold it up and carry it in their pocket. This is important for patients when out of the home environment.

Precision and good catheterisation technique and handling of the catheter during urethral insertion/withdrawal are important aspects and these were found to be additional benefits of this product. The participants thought the Gripper feature was useful to guide the catheter in and out, easing insertion and removal of the catheter. Patients used the Gripper to avoid handling the catheter surface directly, which can help minimise the risk of urinary tract infections.

The majority of respondents found the insertion, removal and catheterisation process pain free and comfortable with HydroSil® Gripper. The survey demonstrates that 9 patients out of every 10, had a pain free experience, possibly attributed to the softness of the silicone material which includes a slippery hydrophilic coating. Pain and discomfort significantly influences compliance, as patients can become anxious and easily put off this therapy if they experience any pain or discomfort.

Ultimately, 9 patients out of every 10 said they would continue to use HydroSil® Gripper and 84% would recommend the product to other patients. There are currently 100+ patients enrolled in the survey and recruitment continues in order to confirm findings.

Conclusion

This patient experience survey of using HydroSil® Gripper shows that the unique features of this catheter are user friendly and well received by men who are learning to catheterise for the first time. Nurses involved in teaching ISC can be confident that this catheter will be effective and provide a comfortable experience to their patients. Furthermore it helps to grow the body of knowledge around the patient experience of ISC enabling nurses to be more aware of patients expectations and help them to empower their patients.

References

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