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Adherence to Clean Intermittent Catheterization Treatment in Pediatric Patients: A Comprehensive Review of Literature

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**Adherence to Clean Intermittent Catheterization Treatment in Pediatric Patients: A Comprehensive Review of Literature**

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**PATIENT CARE ISSUE**

**Background & Significance:**
- Clean Intermittent Catheterization (CIC) was first introduced by Lapides et al. in 1972 and has revolutionized management of voiding dysfunction through decreasing urological complications (10).
- CIC is an invasive procedure where a clean catheter is introduced into the bladder in order to empty it. The procedure can be done by the patient or caregiver and is usually performed 4-5 times a day.
- The World Health Organization defines adherence as the extent to which a person’s behavior corresponds with agreed recommendations from a health care professional” (10).
- Non-adherence to CIC causes many urological complications, including UTIs, epididymitis, and decreasing renal function (2,3).

**EVIDENCE-BASED PRACTICE QUESTION**

**Question:** What barriers prevent adherence to CIC in pediatric patients?

- **P-** Population is pediatric patients who utilize CIC
- **I-** Intervention is to promote adherence to CIC
- **C-** Comparison of interventions reveals: that barriers should be acknowledged and appropriate interventions should be performed by nurses
- **O-** Outcome desired is adherence to CIC

**REGISTERED NURSE INTERVIEW**

Pediatric charge nurse at The Children’s Medical Center of Dayton discussed:
- Self-catheterization encouraged in children of appropriate age and developmental stage
- Discharge teaching papers given to patients and caregivers
- Good hygiene encouraged with CIC
- Instructional DVDs available

**METHODS**

- CINAHL and PubMed
  - 83 articles total, 11 articles used
- Inclusion: CIC, quality of life for CIC patients, all ages
- Exclusion: technical aspects of CIC, not focused on patient experience
- Limits: published between 2007-2012, full-text articles, articles in English
- Keywords: urinary catheterization, clean intermittent catheterization, pediatric, adherence, and CIC

**RESULTS**

Our review suggests that there are many barriers to adherence to CIC. The nursing intervention that can have the most positive impact on CIC adherence is individualized education that addresses the named barriers.

**SYNTHESIS OF EVIDENCE**

**LIMITATIONS**

There were few studies done for the pediatric population, so while aspects of the adult studies can be applied to our population, they should be applied conservatively.

**REFERENCES**