Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Urethral Dilatation v10

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Urethral Dilatation

Patient Information

Obstetrics & Gynaecology Department

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Urethral dilatation

The urethra is the tube that runs from the bladder to the outside, just in front of the vaginal opening, approximately 1½” (4cm) in length. If the tube becomes inflamed or narrowed it can make it difficult for you to empty your bladder completely and also give you the desire to pass water more frequently. The inflamed urethra can also cause discomfort after intercourse.

During the procedure urethral dilators (narrow rods of gradually increasing thickness) are passed to dilate (stretch) the urethra back to its normal width.

Urethral Dilatation can be performed under general anaesthetic (asleep) or using local anaesthetic gel in clinic.

If you have a general anaesthetic, you will have received information on fasting prior to surgery.

Benefits

Dilatation of the urethra should improve your urine flow rate. Following the procedure, you should experience improvement in your bladder symptoms and should be able to empty your bladder completely, but this may not be permanent, and the procedure does sometimes need to be repeated. If this is the case, then it may be possible to do it in clinic using local anaesthetic jelly rather than a general anaesthetic even if a general anaesthetic is used the first time.

Risks

You may notice after the operation that you have slight bleeding from the area and possibly some blood in your urine for one to two days. It may also be painful to pass urine during this time.

It is important therefore to drink plenty of fluids for a few days following the procedure. This will reduce the risk of infection. You may also be given a course of a low dose antibiotic for three months to treat any inflammation that may be present. Please complete the course prescribed. If you have been through the menopause (change of life) you may have low levels of oestrogen which can cause the urethra to become narrow so you may be given oestrogen treatment into the vagina, which can also treat the bladder and the urethra.

Alternatives

You may be advised to have urethral dilatation if other methods of treating your urinary symptoms such as antibiotics or anticholinergic tablets have failed to treat your symptoms.

Contact information

If you have questions about the procedure, contact the secretary of the consultant team looking after you by telephoning the **hospital switchboard 01942 244000** or:

Hanover Nurses Leigh Infirmary 01942 264961 (days)

Or

Swinley Ward, Wigan Infirmary 01942 822568 (nights and weekends)



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