Transanal Irrigation Reduces Recurrent Urinary Tract Infections in Patients with Bowel Dysfunction: A Prospective Functional Study

Gubbiotti M.[1], Rosadi S.[1]

1. Valdarno Hospital, Dept. of Urology, USL Toscana Sud-Est, Italy

www.ics.org/2026/abstract/ Abstract #426

INTRODUCTION

Bowel and lower urinary tract dysfunction share common risk factors. Transanal irrigation (TAI) is effective for chronic constipation and neurogenic bowel dysfunction, but its role in preventing recurrent urinary tract infections (r-UTIs) remains unclear.

AIM of the Study: ***to evaluate the impact of TAI on r-UTI frequency in patients with concomitant bowel dysfunction.***

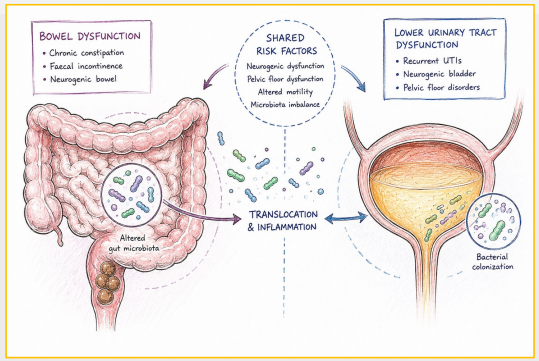

Figure 1. Functional interplay between bowel dysfunction and r-UTIs

METHODS

Patients with documented r-UTIs and chronic constipation or neurogenic bowel dysfunction were prospectively enrolled in a structured TAI program. Assessment at baseline and at 1, 3 and 6 months included:

- r-UTI frequency (urinalysis, urine culture)
- Antibiotic and laxative use
- Wexner and Bristol Stool Form Scale
- VAS score
- Treatment adherence and safety

RESULTS

Thirty patients were included: 9 M, 21 F; mean age: 61.4 ± 18.8 y.o.

At baseline, mean r-UTI frequency was 6 episodes/year. ***After TAI, infections decreased to:***

- 2.1 at 1 month
- 1.4 at 3 months
- 0.9 at 6 months
- $p < 0.001$

Additional outcomes at 6 months:

- Wexner score: 18.2 ± 4.6 → 7.1 ± 3.9
- Normal stool consistency: 24/30 patients (80%)
- Reduced antibiotic use: 22/30 patients (73%)
- VAS: 7.2 ± 1.4 → 3.1 ± 1.6
- Treatment adherence: 85%
- No major adverse events

CONCLUSIONS

TAI significantly reduced r-UTI frequency and antibiotic use while improving bowel function. These findings support an integrated bowel–bladder approach in patients with recurrent UTIs and bowel dysfunction.