

## <u>Helpful questions for your GP or healthcare provider to take</u> with you to your appointment

## 1. What are the typical symptoms of a UTI? Are there other issues that can be causing my discomfort

a. Can we rule out that my discomfort is not coming from any vaginal issues (BV, thrush), sexual transmitted infection, or a pelvic floor issue?

b. Could it be a mix of problems?

c. Are there any leakage problems, dryness or painful sex you would like to discuss as well?

Understanding what to look for and distinguishing symptoms from one another can help you identify how you can best tackle your discomfort.

## 2.What tests are needed to diagnose a UTI?

a. Is it possible to take a urine sample and culture it, rather than just relying on a dipstick test?

b. A negative dipstick test does not mean there is no UTI – could we do more advanced testing, such as sequencing (genomic testing) the sample, looking at the bacteria under a microscope, or doing extended cultures (growing bacteria for longer) to see if there are any bacteria in my urine?

c. Can we check what bacteria are present to ensure that the prescribed antibiotic is effective?

d. Maybe we should also take a vaginal swab?

Knowing all your options and what to expect can help you feel more comfortable during the diagnosis process and ensure you are properly tackling the issue.

## 3. What are the antibiotic treatment options for a UTI?

a. What duration of antibiotics is enough to ensure the clearance of an infection?

b. Does the antibiotic also work with a range of bacteria in case it is not only one type causing the infection?



Treatment can vary based on the severity of the infection and your specific health circumstances.

**4**. Is this medication likely to interact with my other current medications? Can I add other solutions to reduce the chance of recurrence? Discussing this with your GP could help them come up with a more tailored and effective treatment plan for your personal needs. UTIs can be complex, let's try to tackle them from different angles.

a. Are there other solutions you can take to support the chance of treatment success or wellbeing, such as the antimicrobial Hiprex, live bacteria, probiotics to support your microbiome, or alkalisers to reduce the burning sensation? Note: if taking alkalisers make sure Hiprex can work as well, as the urine needs to be acidic.

If you are taking other medications or birth control, it's crucial to know if there could be any potential interactions.

**5.** Are there any probiotics your GP would recommend during or after antibiotic use? There may be some over-the-counter solutions such as pain medication that can provide temporary relief and/or aid in treating your UTI, as we discussed above. Discuss this with your GP and maybe also check with a pharmacist to ensure there is good clinical evidence behind the products. Pharmacists can have great product insights. LiveUTIfree is also a great objective source of knowledge.

6. Should you get recurrent UTIs, can a clinician recommend further tests (e.g. an ultrasound scan)? This is to identify other potential functional issues with emptying the bladder, pelvic floor issues or kidney stones etc.

Knowing what is causing a recurrent UTI or a worsening UTI can help you seek medical attention promptly. If problems persist, check if your GP can refer you to a urogynaecologist or urologist to rule out other potential underlying issues.

7. Ask if your GP refer you to see a specialist or urogynaecologist should your UTI come back. It can be helpful to meet a specialist for more complicated cases or recurring infections to better understand what may be going on with your UTIs. See above.