SpeediCath® Product Monograph
SpeediCath Product Monograph

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Intermittent catheterisation is an effective technique for people who need catheter-based bladder management.1 Intermittent catheterisation is considered the ‘gold-standard’ of care for bladder emptying,1,2 and this approach is supported by several international and national guidelines on urinary incontinence.3-5 People who benefit from intermittent catheterisation include those with neurogenic (spinal cord injury, spina bifida and multiple sclerosis) and non-neurogenic (infravesical obstruction due to prostate enlargement, urethral strictures and post-operative urinary retention) bladder disorders. The principles of using intermittent catheterisation are based on regular and complete emptying of the bladder to maintain a low bladder pressure and minimal residual urine volumes, consequently securing bladder and renal health.1,6,7 Correctly performed intermittent catheterisation is a safe method suitable for long-term use, minimising the risk of urological complications (e.g. those relating to bladder and kidney dysfunction, urinary tract infection [UTIs], urethral strictures and male infertility),1,6-14 and improving a person’s quality of life.8,9

The surface properties of a catheter are an important consideration. During insertion and withdrawal of a catheter, friction between the catheter surface and the urethra can irritate or damage the urethral mucosa. It has been shown that hydrophilic-coated catheters help reduce the risk of urethral micro-trauma by minimising friction force,15 lower the risk of developing UTIs,16,17 and are associated with increased levels of user preference compared with conventional uncoated catheters.15,18 To meet the different needs in individuals with neurogenic bladder and help overcome their challenges, Coloplast has developed the SpeediCath range of ready-to-use hydrophilic-coated catheters. Their hydrophilic coating, soft eyelets and packaging in a sterile saline solution make SpeediCath catheters safe, hygienic, comfortable, easy-to-use and convenient.15,16,19-21 These products have been specifically developed with the needs of individuals in mind, with products designed for men, women and/or children, as well as people with limited dexterity or mobility. Findings from studies have shown that people using SpeediCath are at lower risk of having urethral trauma15 and UTIs,16 compared with uncoated polyvinyl chloride (PVC) catheters. In addition, the ready-to-use concept of SpeediCath was preferred over conventional hydrophilic-coated catheters, specifically in terms of convenience, discretion and speed of use.20,22 Various urine collection bags are available for the SpeediCath range to further support the needs of the individual.

Executive summary
Chapter 1

Management of neurogenic bladder with urethral intermittent catheterisation

Intermittent catheterisation represents the ‘gold-standard’ in the management of bladder dysfunction.\textsuperscript{1,2,16} It is supported by both international and national guidelines on urinary incontinence.\textsuperscript{3-5} In particular, intermittent catheterisation is an effective technique for the urological management of people with neurogenic and non-neurogenic bladder. Correctly performed intermittent catheterisation provides a viable long-term and safe method of emptying the bladder, which can minimise urological complications and improve a person’s quality of life.\textsuperscript{8,9,11-14} Hydrophilic-coated catheters are the preferred option over conventional uncoated catheters for intermittent catheterisation, because of increased levels of ease-of-use, comfort and convenience.\textsuperscript{15,17-21,23,24}
1.1. Impact of neurogenic bladder
Neurogenic bladder disorders, including traumatic and non-traumatic spinal cord injury, spina bifida and multiple sclerosis, can disrupt a person’s ability to voluntarily pass urine, causing urinary retention and urine leakage. Urinary retention leads to a build-up of pressure in the bladder resulting in urine flowing back to the kidneys. Backflow of urine increases the risk of urinary tract infections (UTIs), urosepsis, and long-term bladder and renal damage. Depending on the severity, these conditions can severely compromise a person’s quality of life.

A number of options are currently available to manage urinary continence, including bladder catheters (intermittent or indwelling), absorbent products (pads, diapers and liners), medication, behavioural therapy and urisheaths, which can be individualised according to the needs of the person with neurogenic bladder.

1.2. Intermittent catheterisation – the ultimate in bladder management
From the first recorded use of a catheter, more than 5000 years ago (Figure 1), steps have been taken to refine catheterisation devices and technique. In 1966, intermittent catheterisation was revolutionised with the development of a sterile ‘non-touch’ technique practised by Guttmann. Despite this technique representing an advance over conventional catheterisation approaches, it was considered time consuming and costly. In the early 1970s, Lapides demonstrated that strict aseptic technique was unnecessary and that a simple, ‘clean intermittent catheterisation’ technique could be used successfully instead. This finding led to a more widespread use of intermittent catheterisation. The recent introduction of hydrophilic-coated catheters, such as the SpeediCath range, represents another major advance in intermittent catheterisation.

1.3. Role of intermittent catheterisation
Intermittent catheterisation is considered the ‘gold-standard’ in the management of bladder dysfunction, and its acceptance as a viable method for restoring urinary continence is increasing. The use of intermittent catheterisation is supported by several international and national guidelines on urinary incontinence. In particular, the Consortium for Spinal Cord Medicine (CSCM), European Association of Urology Nurses (EAUN), Royal College of Nursing (RCN), support intermittent catheterisation in the urological management of neurogenic bladder (e.g., spinal cord injury, spina bifida and multiple sclerosis). Intermittent catheterisation is also applicable for non-neurogenic urinary retention, e.g., associated with infravesical obstruction due to prostate enlargement, recurrent urethral stricture (a narrowing of the urethra that impedes the flow of urine), and surgical interventions.

1.4. Benefits of intermittent catheterisation
Correctly performed intermittent catheterisation is a viable long-term option in people with bladder dysfunction. The principles of successful intermittent catheterisation are based on regular and complete emptying of the bladder, leading to a persistently low bladder pressure, minimal volumes of residual urine and a reduced risk of backflow of urine, consequently minimising bladder and renal complications.
Minimising the risk of urinary tract infections

Although UTIs can affect patients of any age, women tend to be more susceptible due to anatomical characteristics. Common types of UTI are urethritis (infection-induced inflammation of the urethra), cystitis (infection of the bladder) and pyelonephritis (kidney infection).

A key goal of intermittent catheterisation is to reduce UTIs; however, it is apparent that UTIs are also a complication associated with catheterisation in general. Therefore, it is vital to understand the types of catheter and catheterisation techniques that can help minimise UTIs. For example, intermittent catheterisation was shown to be a safer practice, with a lower rate of infection and complications, than indwelling catheters in people with neurogenic bladders. Fewer upper urethral tract complications were also observed with intermittent catheterisation than mechanical methods of bladder emptying (e.g., tapping) in individuals with spinal cord injury. Similarly, compared with indwelling catheterisation, intermittent catheterisation was associated with a lower risk of UTIs in elderly people with urinary retention following surgery for hip fractures.

1. Increased independency
   - Promotes autonomy through increased security, sense of freedom and self-esteem
   - Increases the person’s ability to participate in social and sporting activities
   - Allows the person to take control of their bladder management
   - Spares the inconvenience of wearing an indwelling catheter and drainage bag

2. Relief from symptoms and complications associated with urinary voiding difficulties
   - Decreases daytime frequency and urge
   - Improves sleep quality in those with nocturia
   - Minimises risk of complications and UTIs

3. Increased sexuality
   - Indwelling catheters interfere with a person’s expression of sexuality and their ability to have sexual intercourse: “The hardest part is, with a Foley [type of indwelling catheter], you can’t have normal sex.”
   - Intermittent catheterisation enhances a person’s sense and expression of their own sexuality, because of:
     - Improved self-image
     - An absence of incontinence episodes
     - Not having to wear a penile sheath or leg bag
   - Male infertility is a common problem in spinal cord injury: individuals managing their neuropathic bladder by catheterisation were shown to have a higher proportion of motile sperm, compared with voiding by manual reflex or straining.

1.5. Hydrophilic-coated catheters versus uncoated catheters

The characteristic feature of hydrophilic-coated catheters is a layer of polymer coating that absorbs water to form a lubricated surface on the catheter, thereby facilitating catheterisation. In contrast, conventional uncoated polyvinyl chloride (PVC) catheters that require application of a lubricant, such as a gel, increase the possibility of inadequate lubricant coverage. Having a uniform coating of lubricant minimises friction between the surface of the catheter and the urethral mucosa, during insertion and withdrawal of the catheter. Too much friction can cause irritation or damage to the urethral mucosa that leads to micro-trauma and inflammation of the urethra. Findings indicate that hydrophilic-coated catheters have a lower friction force than uncoated PVC catheters; thereby causing less urethral trauma and inflammatory response. Consequently, hydrophilic-coated catheters can have a long-term preventative effect on urethral trauma.

Hydrophilic-coated catheters are the preferred choice for intermittent catheterisation because of their advantages over conventional uncoated PVC catheters, including increased levels of safety, comfort, convenience, ease-of-use and satisfaction. In addition, findings from studies indicate that hydrophilic-coated catheters are associated with a lower risk of UTIs, compared with their uncoated PVC counterparts. Therefore, hydrophilic-coated catheters may be more suitable in those who have previously experienced a high rate of UTIs.
Intermittent catheterisation should be performed 4–6 times daily to reduce the risk of UTIs. Concordance with intermittent catheterisation is vital to maintain long-term bladder health.

Both the CSCM and EAUN guidelines support the recommendation that intermittent catheterisation should be performed 4–6 times per day in people who are unable to void normally. Less frequent catheterisation can lead to greater bladder-storage volumes and increased risk of UTIs. The importance of training individuals on correct technique and the provision of regular follow-up visits are highlighted by the CSCM and RCN guidelines. Patients with voiding dysfunction generally find intermittent catheterisation to be a relatively straightforward procedure that does not overly interfere with daily or work activities.

As the main clinical benefits of intermittent catheterisation rely on frequent and complete bladder emptying, concordance with intermittent catheterisation is essential to ensure long-term bladder health. Many individuals with neurogenic bladder are able to maintain intermittent catheterisation over time, with studies reporting 71–80% of individuals continuing to manage their bladder health with intermittent catheterisation after 5 to 6 years of use. To achieve long-term concordance with intermittent catheterisation, people with neurogenic bladder need appropriate education and instruction on correct technique. Additionally, individuals with neurogenic bladder require supporting materials, such as booklets and videos. They provide step-by-step instructions to explain correct technique and highlight the benefits of intermittent catheterisation, as well as the risks of not following the recommended regimen. Individuals also deserve regular, personalised follow-up with a healthcare professional. This may include evaluation of kidney function and upper tract anatomy, and a review of their intermittent catheterisation technique to ensure they are performing it correctly. This level of support applies not only during the initial stages while people adapt to intermittent catheterisation, but also during longer-term rehabilitation.
Key features of the SpeediCath family

The SpeediCath catheter family is an innovative range of single-use, hydrophilic-coated catheters for intermittent catheterisation. They are packaged in a sterile saline solution – making them ready-to-use. SpeediCath catheters are safe, hygienic and offer ease-of-use, greater comfort and minimal risk of urethral micro-trauma for individuals who require catheterisation.\textsuperscript{15,16,19-21} SpeediCath catheters are phthalate- and PVC-free to minimise the impact on the environment and avoid potential health concerns associated with phthalates.
3.1. Hydrophilic coating

SpeediCath catheters have a hydrophilic polymer coating consisting of polyvinylpyrrolidone (PVP) that is bound to the surface of the catheter. The coating absorbs and binds water, resulting in a slippery surface that ensures complete lubrication as the catheter is passed through the urethra into the bladder.

The high-quality, evenly-spread hydrophilic coating of SpeediCath has a lower withdrawal friction force than both a conventional uncoated and hydrophilic-coated catheter. It has been suggested that the use of hydrophilic-coated catheters might lower the risk of long-term urethral complications that, otherwise, may be exacerbated by repeated insertions of a catheter.

3.2. Tube

The tube of SpeediCath catheters is made from polyurethane that is free from PVC and phthalates. Polyurethane catheters have a better level of stiffness compared with those made from PVC or phthalate. Moreover, frequent exposure to phthalates has been shown to lead to their accumulation in the human body and possible alteration of the endocrine system. Therefore, the potential health risks associated with this material are avoided by using phthalate-free devices. The incineration of PVC has a potential environmental impact, due to the formation of hydrochloric acid that can contribute to ‘acid rain’ unless it is effectively neutralised during the incineration process.

3.3. Eyelets

The SpeediCath range of products have soft eyelets that allow the urethral mucosa to slide over the eyelets without being drawn into the lumen during insertion. This feature of the SpeediCath range aims to minimise discomfort and the risk of urethral micro-trauma. The edges of each eyelet are finished prior to applying the hydrophilic coating, using a process developed specifically for SpeediCath, to create a perfectly smooth transition between eyelet and catheter surface.

3.4. Tip and connector

The types of tips for the SpeediCath range include a Nelaton or Tiemann tip, depending on the type of catheter selected (see Appendix). The Nelaton tip is straight and rounded, while the Tiemann tip is stiffer and slightly curved to facilitate insertion through especially narrow passages, such as enlarged prostatic tissue.

The connector is made of polyurethane (the same material as the catheter tube), and the design and stiffness of the connector have been designed to allow collection of urine in a urine bag. The colour of the connector indicates its size, based on international standards that use the Charière (CH) sizing system (see Appendix), making it easier to identify the correct size and enhancing safety, as mistakes are easily avoided.

3.5. Packaging

SpeediCath catheters are packaged in a small volume (5–10 ml) of sterile saline solution. This eliminates the need to prepare the catheter using an external water source prior to catheterisation and reduces the total number of steps required to complete the catheterisation process. The packet can also be adhered to the wall so that the catheter does not need to come into contact with any unclean surfaces.
The SpeediCath catheter family is an innovative range of single-use, hydrophilic-coated catheters for intermittent catheterisation. They are packaged in a sterile saline solution – making them ready-to-use. The SpeediCath family covers a range of catheters, each of which have been developed in accordance with specified user needs. SpeediCath catheters are also available in different sizes to further suit individual needs (see Appendix). The SpeediCath family is supported by a range of accessories for urine collection. SpeediCath catheters are of the highest quality, easy to use and convenient.
4.1. Standard SpeediCath Catheter

The standard SpeediCath catheter belongs to an innovative range of hydrophilic-coated catheters, specifically designed for people with urinary retention. The SpeediCath is a ready-to-use, sterile, pre-lubricated catheter for intermittent catheterisation for single-use only. The SpeediCath is individually wrapped and packaged in a sterile saline solution that eliminates the need to prepare the catheter before use.

It is foldable for discreet storage in bag or pocket for up to 3 hours before use and is available in many different sizes to suit individual needs. The hydrophilic coating and soft eyelets make catheterisation more comfortable and minimise the risk of urethral microtrauma.15

4.2. SpeediCath Compact

Being only 7 cm in length, SpeediCath Compact is tailor-made for the female anatomy. It has all of the unique qualities and safety aspects of a SpeediCath catheter and, in addition, takes up very little space. Unopened, it is the size of a lipstick. SpeediCath Compact comes in a range of different Charière sizes for use by females of all ages, including girls aged 0-3 years. By having a built-in, firm, dry handle, it is possible to catheterize without having to touch the actual coating, which helps maintain good levels of hygiene. In a study conducted by Biering-Sorensen et al., (2007), the majority of women with neurogenic bladder dysfunction who used SpeediCath Compact found it easy and effective to use, and were satisfied with its handling.56

4.3. SpeediCath Compact Plus

At 9 cm in length, SpeediCath Compact Plus is almost double the length of the female urethra and yet still very discreet compared with conventional female catheters. SpeediCath Compact Plus offers an extra 2 cm length for women who prefer a slightly longer catheter.

4.4. SpeediCath Control

SpeediCath Control has been developed to offer extra control during insertion of the catheter. It has a stiffer part at the connector end that improves control over the catheter tip and allows single-handed insertion, making it easier and faster to catheterise. This stiffer end also allows better manoeuvrability, making catheter insertion and aiming into the toilet easier, especially for people with low dexterity. This feature also makes it easier to catheterise without touching the coated part of the catheter during insertion.

4.5. SpeediCath Complete

SpeediCath Complete is all-in-one, ‘closed’ system comprising a ready-to-use SpeediCath catheter, handy insertion guide, 1-litre urine collection bag and saline solution. With no preparation time necessary, SpeediCath Complete is ready immediately. The integral collection bag of SpeediCath Complete allows catheterisation anytime, anywhere. It is ideal for catheterisation in bed and away from the toilet because it is designed to prevent back-flow of urine when catheterising lying down. The insertion guide allows ‘non-touch’ technique by eliminating the need to directly touch the catheter during catheterisation; thereby ensuring that insertion of the catheter is safe and hygienic. The design and the material of the bag
also ensure control of urine when emptying the bag. SpeediCath Complete was found to be superior to another catheter set, in terms of ease-of-use and quality,\textsuperscript{57} with the majority (65.5\%) of individuals preferring to continue using SpeediCath Complete in the future.\textsuperscript{57}

4.6. SpeediCath accessories
Coloplast manufactures a range of urine collection bags, including SpeediBag Compact and the Conveen range of leg bags, for use with SpeediCath catheters.

4.6.1. SpeediBag Compact
The SpeediBag Compact is a urine bag for use with SpeediCath Compact catheter. The urine bag connects easily to the catheter and safely stores both the catheter and up to 700 ml urine after use. With SpeediBag Compact, it is now possible to use SpeediCath Compact away from a toilet. Both SpeediCath Compact and SpeediBag Compact are for single-use and offer a catheter and urine bag solution that is discreet, easy-to-use and dispose of. Both products are compactly packaged, thus, as well as being discrete, reduces the amount of waste.

4.6.2. Conveen collecting bags
The Conveen urine collecting bags (small and large capacity bags are available) can be connected to the SpeediCath catheters.
Evidence from clinical studies showed that SpeediCath catheters have a number of benefits compared with uncoated PVC or other hydrophilic-coated catheters.\textsuperscript{15,16,20,22} Benefits of SpeediCath catheters include less urethral trauma and friction during withdrawal,\textsuperscript{15} and a reduced incidence of UTIs,\textsuperscript{16} compared with their uncoated counterparts. In addition, favourable characteristics associated with SpeediCath, such as greater speed-of-use, convenience, discretion and its ready-to-use nature, make it the preferred choice for intermittent catheterisation over uncoated or hydrophilic-coated catheters.\textsuperscript{15,20,22}
5.1. Specific benefits of using SpeediCath

Friction force and urethral trauma

In a randomised, crossover study in healthy male volunteers, conducted by Stensballe et al., (2005), the SpeediCath catheter exerted significantly less mean withdrawal friction force than a traditional hydrophilic-coated catheter, and an uncoated PVC catheter (p<0.05 for both; Table 1). This study also showed that the SpeediCath catheter caused significantly less microscopic haematuria (the appearance of blood in the urine that represents a measure of urethral trauma) than the uncoated PVC catheter (p=0.006). Therefore, the use of SpeediCath catheters may help reduce the risk of damage to the urethra over the long-term.

**Table 1. The SpeediCath catheter exerted significantly less friction force than both a traditional hydrophilic-coated catheter and an uncoated PVC catheter.**

<table>
<thead>
<tr>
<th>Catheter</th>
<th>n</th>
<th>Average friction force (Newtons)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>SpeediCath catheter</td>
<td>80</td>
<td>0.142*</td>
<td>0.029</td>
</tr>
<tr>
<td>Uncoated PVC catheter</td>
<td>80</td>
<td>0.204</td>
<td>0.055</td>
</tr>
<tr>
<td>Traditional hydrophilic catheter</td>
<td>80</td>
<td>0.284</td>
<td>0.129</td>
</tr>
</tbody>
</table>

*p<0.05 compared with both the traditional hydrophilic-coated catheter and the uncoated PVC catheter

Urinary tract infection

The use of a SpeediCath hydrophilic-coated catheter for intermittent catheterisation has been associated with a beneficial effect in terms of minimising the incidence of symptomatic UTIs. De Ridder et al., (2005), reported results from a 1-year randomised study of 123 men with neurogenic bladder due to spinal cord injury, which showed that twice as many individuals using SpeediCath catheters were free of UTIs compared with those using uncoated PVC catheters (36% vs 18%; p=0.02; Figure 2).

Catheter characteristics

The favourable characteristics of SpeediCath catheter make it a preferred choice for intermittent catheterisation. Findings from the randomised study in healthy male volunteers, conducted by Stensballe et al., (2005), showed that SpeediCath was associated with significantly greater levels of preference, in terms of sensation during insertion (p<0.0001) and withdrawal (p=0.012), compared with an uncoated PVC catheter. Overall, 53% of patients preferred SpeediCath compared with only 2% for the uncoated catheter. Findings from another randomised study by Pascoe & Clovis (2001) showed that individuals preferred SpeediCath to a traditional hydrophilic-coated catheter, particularly in terms of speed-of-use (68% of patients reported ‘shorter than usual’ catheterisation time when using the SpeediCath catheter), convenience and discretion (Table 2). Individuals also appreciated the concept of including water as an integral part of the packaging.
Table 2. The SpeediCath catheter was preferred to a traditional hydrophilic-coated catheter.\textsuperscript{20}

<table>
<thead>
<tr>
<th>Parameter</th>
<th>% Preference</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SpeediCath</td>
<td>Traditional hydrophilic-coated catheter</td>
</tr>
<tr>
<td>Convenience</td>
<td>88</td>
<td>12</td>
</tr>
<tr>
<td>Discretion</td>
<td>88</td>
<td>12</td>
</tr>
<tr>
<td>Speed-of-use</td>
<td>76</td>
<td>24</td>
</tr>
<tr>
<td>Overall</td>
<td>78</td>
<td>22</td>
</tr>
</tbody>
</table>

In another study by van Kuppevelt et al., (2004), 75% of patients expressed a preference for the ready-to-use aspect of the SpeediCath catheter, compared with two traditional hydrophilic-coated catheters.\textsuperscript{22} User friendliness (measured using a numerical scale between 1 and 10) of the SpeediCath catheter was ranked significantly higher than two traditional hydrophilic-coated catheters (7.76 vs 6.94 and 6.75, respectively; p=0.003).\textsuperscript{22}
Coloplast is committed to minimising the negative impact on the environment from the production and use of products to their packaging and disposal. During product development, Coloplast assesses the environmental impact of the materials and processes used, as well as seeking ways to reduce any environmental impact.

The SpeediCath range uses a minimum of packaging and although the aluminium packaging for regular SpeediCath (Control, Complete and Straight) cannot be recycled, all the SpeediCath catheters, as well as the retail and transport boxes, are fully recyclable. Additionally the SpeediCath Catheter range is PVC- and phthalate-free.
## SpeediCath catheter range

<table>
<thead>
<tr>
<th>Product</th>
<th>Individuals’ profile</th>
<th>Key benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SpeediCath catheters for intermittent catheterisation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard SpeediCath</td>
<td>People with neurogenic and non-neurogenic bladder dysfunctions</td>
<td>• Belongs to an innovative range of hydrophilic-coated catheters*&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The hydrophilic coating creates minimal friction when inserting and removing the catheter, ensuring catheterisation is comfortable*&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Pre-lubricated – ready-to-use*&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Safe and easy to use*&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Sterile, individually wrapped for single use only*&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td>SpeediCath Compact</td>
<td>Females with neurogenic and non-neurogenic bladder dysfunctions who want discretion</td>
<td>• Compact catheter designed specifically for the length of the female urethra</td>
</tr>
<tr>
<td>SpeediCath Compact Plus</td>
<td>Females with neurogenic and non-neurogenic bladder dysfunctions who want a slightly longer catheter, without compromising discretion</td>
<td>• Has all the attributes of SpeediCath Compact</td>
</tr>
<tr>
<td>SpeediCath Compact Plus</td>
<td>Females with neurogenic and non-neurogenic bladder dysfunctions who want a slightly longer catheter, without compromising discretion</td>
<td>• 2 cm longer than SpeediCath Compact, yet still very discrete compared with conventional female catheters</td>
</tr>
<tr>
<td>SpeediCath Control</td>
<td>Men with neurogenic and non-neurogenic bladder dysfunctions with limited dexterity</td>
<td>• Allows single-handed catheterisation and so helps the person to avoid touching the catheter</td>
</tr>
<tr>
<td>SpeediCath Control</td>
<td>Men with neurogenic and non-neurogenic bladder dysfunctions with limited dexterity</td>
<td>• Has a stiffer part at the connector end, which has been designed to improve manoeuvrability and control</td>
</tr>
</tbody>
</table>
**SpeediCath Complete**

For people with neurogenic and non-neurogenic bladder dysfunctions unable to reach a toilet

- Ready-to-use intermittent catheter set
- An all-in-one ‘closed’ system with a catheter, bag and saline solution, which is ready-to-use anywhere
- Ideal for catheterisation in bed and away from the toilet because it is designed to prevent back-flow of urine when catheterising lying down
- Has an insertion guide, allowing ‘non-touch’ insertion by eliminating the need to directly touch the catheter during catheterisation
- Design and material of bag ensures control of urine when emptying bag

**Urine collecting bags**

**SpeediBag Compact**

Females not wanting or unable to transfer to a toilet, but still needing a discrete solution

- Collection bag for the SpeediCath Compact
- Designed to be discreet and compact
- Connects easily to the catheter and stores the urine and catheter after use
- Safe and easy to use, with a capacity of 700 ml

**Conveen urine drainage bags**

Males and females

- Coloplast offers a wide selection of drainable urinary leg bags with a capacity of 350–750 ml
- Collecting bags can be connected to SpeediCath catheters using a bag connector and tube, in order to safely store urine
- All drainage bags come with a standard connector for safe and easy attachment to a catheter or a urisheath

*These are mutual for the SpeediCath range.*
SpeediCath Assortment

The SpeediCath catheter is available in packs of 30 and in many different sizes to suit individual needs.

<table>
<thead>
<tr>
<th>Colour code</th>
<th>Male (40 cm)</th>
<th>Female (18 cm)</th>
<th>Paediatric (25 cm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CH 6</td>
<td>Green</td>
<td>–</td>
<td>X</td>
</tr>
<tr>
<td>CH 8</td>
<td>Blue</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>CH 10</td>
<td>Black</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>CH 12</td>
<td>White</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>CH 14</td>
<td>Green</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>CH 16</td>
<td>Orange</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>CH 18</td>
<td>Red</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

CH, Charière size

Supporting and educational material

Guide to using a urethral catheter animation
This animation film explains why a catheter is used and the practical steps for using a catheter.
- Helpful to watch before starting bladder emptying
- Link to website: http://www.coloplast.com/UrologyAndContinenceCare/Topics/Management_Solutions/Pages/CatheterGuide.aspx
A parents’ guide

This guide highlights the important role and responsibility of a parent taking care of a child aged 0–5 years old with spina bifida.

- Benefits
  - Supports parents who are often overwhelmed by the fact of getting a child that is not well and have to deal with special bladder and bowel issues
  - Provides joint support for both bladder and bowel management
  - Promotes compliance with good bladder and bowel management routines

- Description
  - Provides basic anatomical and physiological education
  - Provides detailed step by step descriptions of good daily practices
  - Provides tips and tricks
  - Includes bladder and bowel management diaries
  - Available both in a hard copy format and in a Web format

The Wee Game – for children

The Wee game for boys and girls is a fun and motivating way for children to learn and take responsibility for their toilet habits.

- Designed to help the parent and child learning about going to the toilet and emptying the bladder in a fun way
- Simple to use and can easily be made more challenging as the child gets the hang of it
- Facilitates parents in ‘letting go’, leaving the responsibility of proper bladder and bowel management to their child as he/she grows up
- Promotes concordance with good bladder and bowel management routines
**A teenager guide**
A guide for teenagers (aged 12–18 years) in a young and appealing magazine style (A3) that highlights the message: ‘As a teenager, it is your responsibility to look after yourself.’

- **Benefits**
  - Reminds the teenager of good daily bladder and bowel management practice
  - Reminds the teenager of the consequences of poor concordance
  - Supports the development of a healthy independent identity

- **Description**
  - Includes tips and tricks
  - Includes a case of a teenager
  - Includes detailed step-by-step guidance on bowel management techniques
  - Is available both in hard copy format and as Web content

**Bladder emptying diary**
It is a good idea to keep a record of how much is drunk each day and how much urine is produced.

- This is done by emptying the urine that comes out of the catheter into a measuring cup and writing the amount on a chart
- Link to website: [http://www.coloplast.com/UrologyAndContinenceCare/Topics/Education/Boys0_5/Documents/Coloplast_Bladder_Emptying_Diary.pdf](http://www.coloplast.com/UrologyAndContinenceCare/Topics/Education/Boys0_5/Documents/Coloplast_Bladder_Emptying_Diary.pdf)
References


The Coloplast story began back in 1954. Elise Sørensen is a nurse. Her sister Thora has just had an ostomy operation and is afraid to go out, fearing that her stoma might leak in public. Listening to her sister’s problems, Elise creates the world’s first adhesive ostomy bag. A bag that does not leak, giving Thora – and thousands of people like her – the chance to return to their normal life.

A simple solution with great significance.

Today, our business includes ostomy care, urology and continence care and wound and skin care. But our way of doing business still follows Elise’s example: we listen, we learn and we respond with products and services that make life easier for people with intimate healthcare needs.