

Sustained Safety and Quality of Life with Long-Term Intermittent Catheterization

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INTRODUCTION:

Long-term intermittent catheterization (IC) is the recommended standard for bladder emptying in patients with neurogenic or non-neurogenic lower urinary tract dysfunction. While the short-term safety of hydrophilic catheters is well established, prospective evidence describing outcomes over many years of continued use remains limited.

AIM:

To evaluate the long-term safety, urological complications, quality of life and patient-reported outcomes associated with hydrophilic intermittent catheterization using LoFric during an additional five years of follow-up in experienced IC users.

METHODS:

Design: Prospective, non-interventional, observational cohort study conducted at three European centres.

Population: Adults (≥18 years) performing intermittent catheterisation using LoFric catheters for ≥6 years before enrolment.

Duration: 5 years.

Data collection:

Patient-reported outcomes (electronic questionnaires), Urological complications EQ-5D quality of life, Catheter satisfaction and IC perceptions.

Primary outcomes:

Changes in self-reported symptomatic UTI incidence and other urological complications over 5 years.

Secondary outcomes:

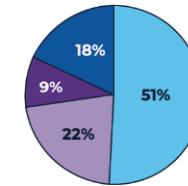
Quality of life, Treatment satisfaction, Adherence, Patient-reported outcomes.

RESULTS:

- 98 adults were enrolled (69% male; mean age 57 years).
- 49 participants completed the full 5-year follow-up.
- Duration of IC use before study: mean 13 years (range: 6–30 years).

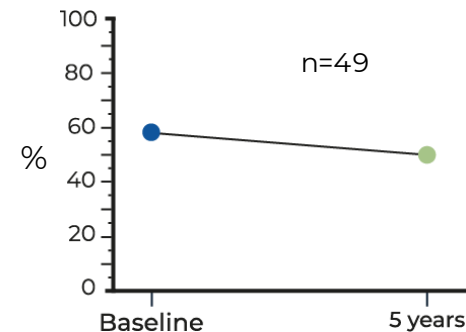
Study population (reason for requiring IC):

- 51% Neurological conditions
- 22% Urological conditions
- 9% Surgical conditions
- 18% Other causes



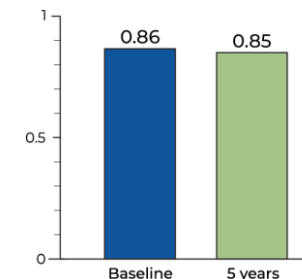
Symptomatic UTIs remained stable throughout follow-up.

Portion of participants (%) reporting symptomatic Urinary Tract Infection during last 12 months (PP):



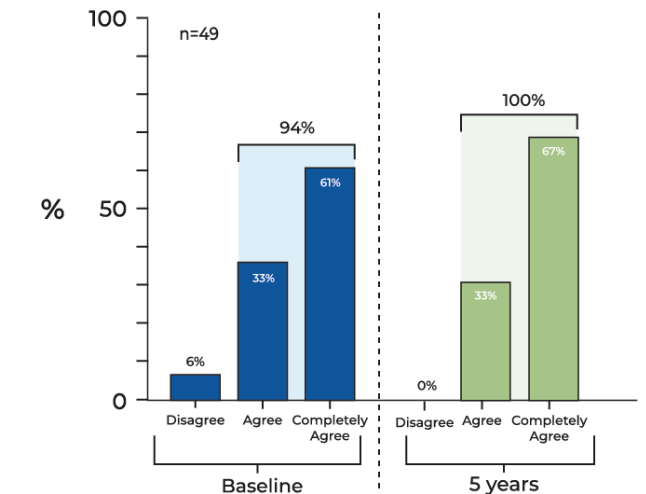
Quality of life remained stable over five years:

EQ-5D index remained unchanged throughout follow-up with **no statistically significant difference**.

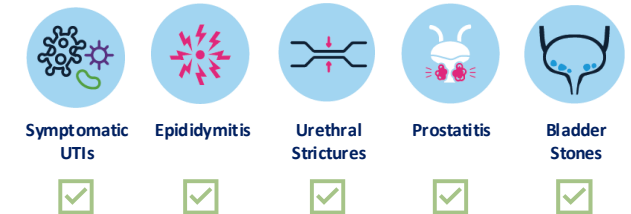


High satisfaction with catheter remained throughout follow-up:

100% agreed or strongly agreed they were satisfied with their catheter at Year 5.



Urological complications remained stable:



All comparisons baseline vs year 5 were not statistically significant.

CONCLUSION:

LoFric hydrophilic catheters were associated with stable urological outcomes, sustained quality of life and high patient satisfaction after more than a decade of use. These long-term prospective data provide important evidence supporting the safety of hydrophilic intermittent catheterization in patients who may depend on this therapy throughout their lives.