



The British Association of Urological Surgeons

Instillations for painful bladder conditions

Putting medicine into the bladder to help pain

This leaflet gives you simple, easy-to-read details about this treatment. Expert doctors in the UK have written it. Please also remember the advice your own doctor or nurse has already given you.

Key points

- The doctor puts a soft tube into your bladder. The medical team call this a catheter.
- Liquid medicine goes up the tube into your bladder.
- The medicine helps ease the pain in your bladder.
- It can also help people who keep getting bladder infections.
- The medicine is like the body's own fluids. It helps protect the bladder from harmful things in your pee.
- You may need a few treatments at first. Then you may need regular top-up sessions.
- The most common problems are bladder pain and infection.

Why do you need this treatment?

This treatment helps to ease pain and discomfort caused by bladder problems. These problems may be interstitial cystitis or bladder infections that keep coming back.

What does this treatment involve?

Your doctor or nurse passes a soft plastic tube into your bladder. This tube is called a catheter. It is put in through the tube where your pee comes out. We call this your urethra. A small amount of liquid medicine goes through the catheter into your bladder.

You may need a few treatments. These will be spaced 1 to 4 weeks apart.

The medicine may contain:

- chondroitin sulphate
- sodium hyaluronate
- both

These are natural substances found in the body. They make a soft layer inside your bladder. This protects it from the chemicals in your pee that can cause pain or irritation.

Before starting treatment, your doctor or nurse will talk to you about which medicine is best for you.

What are your other options?

There are other things that may help. Each one has good points and bad points. Your doctor will help you choose what is best for you.

- **Pain control and self-care.** You can:
 - use painkillers
 - avoid food and drinks that make symptoms worse
 - do relaxation or gentle exercise, such as yoga
- **Pain tablets.** You can take mild pain-relief medicines, such as paracetamol. If these do not work, you can try stronger medicines. These work on the nerves that cause pain.
- **Bladder stretching.** This is an operation that gently stretches your bladder to make it bigger.
- **Take your bladder out.** If your symptoms are bad and do not get better with other treatments, your doctor may talk to you about removing your bladder. If this happens, pee will leave your body through a small opening in your tummy. This is called a stoma. This procedure is called “a simple cystectomy and urinary diversion”. You can find out more about this [here](#).

Your doctor will talk to you about which option may work best for your symptoms.

What happens on the day of the treatment?

- You should drink less in the 4 hours before your treatment.
- If you take water pills, do not take them on the morning of your appointment. These pills are called diuretics. They have names like frusemide and spironolactone.
- You can take other tablets as normal. Do this unless your doctor tells you not to.

What happens before the treatment?

- You will be asked to pee into a sample pot. The nurse will check this for infection.
- If they find an infection, they may delay the treatment. You will have antibiotics. You can have the treatment when your infection has cleared.
- Your doctor will talk to you about your medical record. They will also make sure that you understand and agree to the treatment. You will hear this called “giving your consent”.

What happens during the treatment?

- The area around your urethra is cleaned with salt water or a special liquid.
- A small amount of numbing or lubricating gel is placed into your urethra. This will make the treatment more comfortable.
- You will be awake for the procedure.
- The doctor will gently pass a catheter into your bladder. It will drain any pee left inside.
- The medicine is slowly put into your bladder through the tube.
- The tube is then removed.

- You will be asked not to pee for at least 15 minutes. Try to wait for 1 to 2 hours. This gives time for the medicine to reach all areas of your bladder.
- You can then pee as normal.

Your doctor or nurse will tell you how many treatments you need and how far apart they will be. This depends on how your bladder reacts to the first few treatments.

Possible after-effects of the treatment

Most people recover well, but there are some things that can happen. Everyone is different. Your doctor will talk with you about what these risks might mean for you.

Common problems. These happen to more than 1 out of every 10 people:

- Burning or stinging when you pee. This may last for a few days.
- Needing to pee more often or urgently. This may last for a few days.
- Your bladder pain does not get better.

Occasional problems. These happen to about 1 out of every 50 people:

- You may get an infection in your bladder. We treat this with antibiotics.

Rare problems. These only happen to about 1 out of every 250 people:

- You may have an allergic reaction to the soft tube used in the procedure. You should contact your doctor straight away if you get:
 - pain
 - fever
 - backache
 - smelly pee

What happens before you go home?

You should:

- ask questions. You should know what has been done
- be told what solution was used
- ask the doctor or nurse if everything went as planned
- let the staff know if you have any pain or discomfort
- ask what you can and cannot do at home
- make sure you know what happens next
- get advice about how to look after yourself at home
- be told what to look out for when you get home
- ask when you can start doing the things you normally do
- be told who to contact if you have problems

What should you expect when you get home?

- You will get a summary of your hospital stay. Your GP will get a copy too.

- Any medicines you need will be provided.
- Your medical team will give you an appointment for your next treatment.
- You should drink plenty of fluids for the first 2 days. This will help to flush your system. It can also help stop infections.
- If you think you may have an infection, contact your doctor straight away. Look out for the signs:
 - pain when you pee
 - needing to pee often
 - smelly pee
 - you feel feverish
 - you have back pain

General information about your treatment

Before your treatment

- Tell your team if you have implants. These are things like:
 - a pacemaker
 - a joint replacement
- Tell your doctor if you take blood-thinning tablets.
- Tell your doctor if you may be pregnant (if you are female).
- If you have ever had MRSA, you should tell your doctor.
- You should tell your doctor if you may be at risk of variant-CJD. This might be if you have had:
 - a corneal transplant
 - a neurosurgical dural transplant
 - human growth hormone treatment
- You can ask your doctor about their own results and experience with this operation.

Important

We have worked hard to make this leaflet clear and correct. But it cannot replace advice from your own doctor or nurse. Always ask them if you are worried or unsure.

What should you do with this leaflet?

You can keep this leaflet. If you have more questions, ask your doctor or nurse. They can explain more.

Online access

You can see this leaflet on the internet. Scan the special picture (QR code).

Feedback

We'd love to know what you think! You can share your thoughts by emailing us at admin@baus.org.uk



<https://rb.gy/pa39m3>

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