



The British Association of Urological Surgeons

Ketamine Bladder (Known as Ketamine Urinary Tract Syndrome) - What You Need to Know

You might have bladder problems because of using ketamine. We prefer the term “Ketamine Urinary Tract Syndrome” as Ketamine doesn’t just affect the bladder – it affects the kidneys and the tubes that drain them too. This leaflet explains why that happens and what you can do to feel better. It was written with the help of expert urologists (doctors who treat problems with the bladder, kidneys, and related parts) to make sure it follows the best care advice in the UK.

It’s here to help you understand what’s happening, but it doesn’t replace what your doctor or nurse tells you, always ask them if you're unsure.

We’ve tried our best to make sure everything in this leaflet is correct, but sometimes things change, or small mistakes can happen. BAUS (the British Association of Urological Surgeons) can’t be responsible if something in here isn’t right for you.

Please remember: The BAUS team are not doctors, so they can’t answer medical questions. If you’re worried or have any questions, speak to your Urologist, Specialist Nurse, or GP.

Important things to know

- Ketamine can damage your bladder;
- It can make you pee a lot;
- It can make you leak urine and mean you need to wear incontinence pads;
- It can feel painful;
- The best way to help your bladder is to stop using ketamine;
- If your bladder gets damaged it can also damage your kidneys;
- Damaged kidneys can be serious, and you could get very sick;
- Stopping ketamine can help your bladder heal. If it doesn’t get better, doctors can offer treatment; and

- The treatments won't work unless you stop using ketamine.

How ketamine hurts your body

Your kidneys make urine. The urine goes from your kidneys into your bladder. Your bladder holds the urine until you go to the toilet.

Ketamine damages the bladder, making it sore and stiff.

A damaged bladder can't hold much pee and may hurt when it fills up.

Using Ketamine can block the tubes that go from your kidneys to your bladder. This can lead to kidney failure which is a serious illness because it might mean dialysis or a kidney transplant if it isn't treated in time.

How much ketamine is too much?

No one knows the exact amount. Everyone is different. About three out of every 10 people who use ketamine get ketamine bladder. The damage can be permanent, so stopping early is best.

Signs of ketamine urinary tract syndrome

You might notice:

- Pain in your tummy, your back, or when you pee;
- Peeing a lot, even at night;
- Rushing to the toilet or leaking urine;
- Having no control of your bladder;
- Seeing blood, clots or bits in your urine;
- Smelly or cloudy pee and it hurts when you pee; and
- Feeling sick with fever. This could be a serious infection called sepsis.

Other problems caused by ketamine

- Liver damage. This can be dangerous and life threatening;
- Nose damage, if you snort it. This can make your nose bleed. You might get a nose infection, and it can be very painful;
- Stomach pain and ulcers;
- Constipation and piles from straining on the toilet; and
- You could get a rectal prolapse. This is where your bowel comes out of your backside.

The best way to get better is to stop taking ketamine

People with a drug problem often need help to stop. Your GP may be a good place to start. They can refer you to a local drug service. You can talk to the local drug service yourself.

Alternatively, visit the Talk to Frank website by clicking [here](#).

Tips to help you quit

- Make a list of reasons to stop. Keep the list with you. Look at it if you think you might want some ketamine;
- Know what makes you want to use. These are called your triggers. Triggers can be people, places, thoughts or feelings;
- Plan how you can deal with triggers or cravings. For example, spend time with friends who don't use drugs or go for a walk. Remember, cravings don't last forever;
- Do things that make you feel good without drugs. Walking, hobbies, or music might help; and
- Don't hang around with people who take ketamine.

If you're still using ketamine

- Never use it to stop bladder pain - it makes things worse;
- Drink lots of water and stay safe - don't have a bath while you are using as you might drown;
- Don't use it when you are alone;
- Use clean tools if you inject;
- Don't mix ketamine with alcohol or other drugs;
- Try not to take ketamine if you are feeling sad or anxious; and
- Look after yourself by eating well and getting fresh air and exercise.

Can doctors help?

Yes, but you must stop using ketamine first, otherwise treatments may only lessen some of the symptoms, and won't make them better. It can take six months for the symptoms to go away but most people start to notice an improvement after just a few weeks in terms of energy, pain, mental health and relationships with friends and family. If stopping doesn't help, these are other things the doctors can do:

Check for damage

- Check that your kidneys are healthy. Doctors can do this with blood tests and a scan; and
- Check that your bladder is healthy. This is often done in an operation using general anaesthetic. You will be asleep. The doctor will check how well your bladder is working. They may also take a small piece of your bladder to look at closely. We call this a biopsy. This can check for serious problems like cancer.

Test for ketamine

Your doctor might ask you to give a sample of urine. This is to check if there is any ketamine in your body. This is important. Some treatments won't work if you have used ketamine in the past six months

Below are the things that can help **when you have stopped using ketamine:**

- Drink more water or other non-alcoholic drinks. Avoid acidic drinks. This can make it more comfortable to pee;
- Some medications help you to pee less often help with rushing to the toilet. Your doctor will prescribe these;
- Your doctor may give you safe medicines to help with pain. There are a few types of medicines that might work. Your doctor will explain how to take them. You may have to start with a low dose and raise it slowly. You must never stop taking them suddenly. Your GP will help you to come off them safely if you need to;
- Your doctor may refer you to a specialist pain team. They might find other things that help the pain;
- Treatments to help your bladder heal. The doctor puts a soft tube into your body where your pee comes out. The tube puts medicine directly into your bladder. Then the tube comes out. This way the medicine will get exactly where it is needed. Some people learn how to give themselves this treatment at home. You can read more about this [here](#); and
- If nothing else works, the doctors might do surgery
 - They can make you a new bladder. This is made from part of your bowel; or
 - They can make a stoma to drain your urine into a bag. The bag will stick to your belly. The bag stays attached all the time. You will need to empty it. The nurses and doctors will teach you how to look after it. This is called an ileal conduit or a urostomy. You can read more about this [here](#).

What happens if your kidneys get blocked?

Sometimes the tubes that carry urine from your kidneys to your bladder get blocked. So, the doctors might put a tube into your kidneys to drain the urine. There are two ways to do this:

- **Nephrostomy tubes.** This is the best option if the kidneys get blocked. These tubes come out of your kidney, through your skin, to outside your body. The doctor puts the tubes in during an x-ray. You will have a local anaesthetic to make the area numb before they are put in. The tubes drain the urine from your kidneys into a bag. The bag will stay attached to you on a belt around your waist or your leg. You will need to empty the bag when it gets full. The nurses and doctors will teach you how to look after it. The tubes need to be changed every three to six months. You can read more about this [here](#). If one of the tubes falls out, you will have to visit hospital as an emergency to have a new tube inserted.
- **Stents.** These are small tubes that are put inside your body. The tubes will help the urine drain from your kidneys into your bladder. This is often done in an operation using general anaesthetic. You will be asleep. The stents will stay inside you. The doctor will need to change them every six months. This will stop them getting blocked. Stents can be painful and make symptoms worse and they too can get blocked so they aren't the best option when the kidneys are blocked. This treatment is only used when nothing else can be done. You can read more about this [here](#).

Remember

Stopping ketamine is the best way to help your bladder and stay healthy.

If you're ready to quit, there are people who can help. You're not alone.

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/1fm149>

Questions and notes

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