Peezy At Ease:

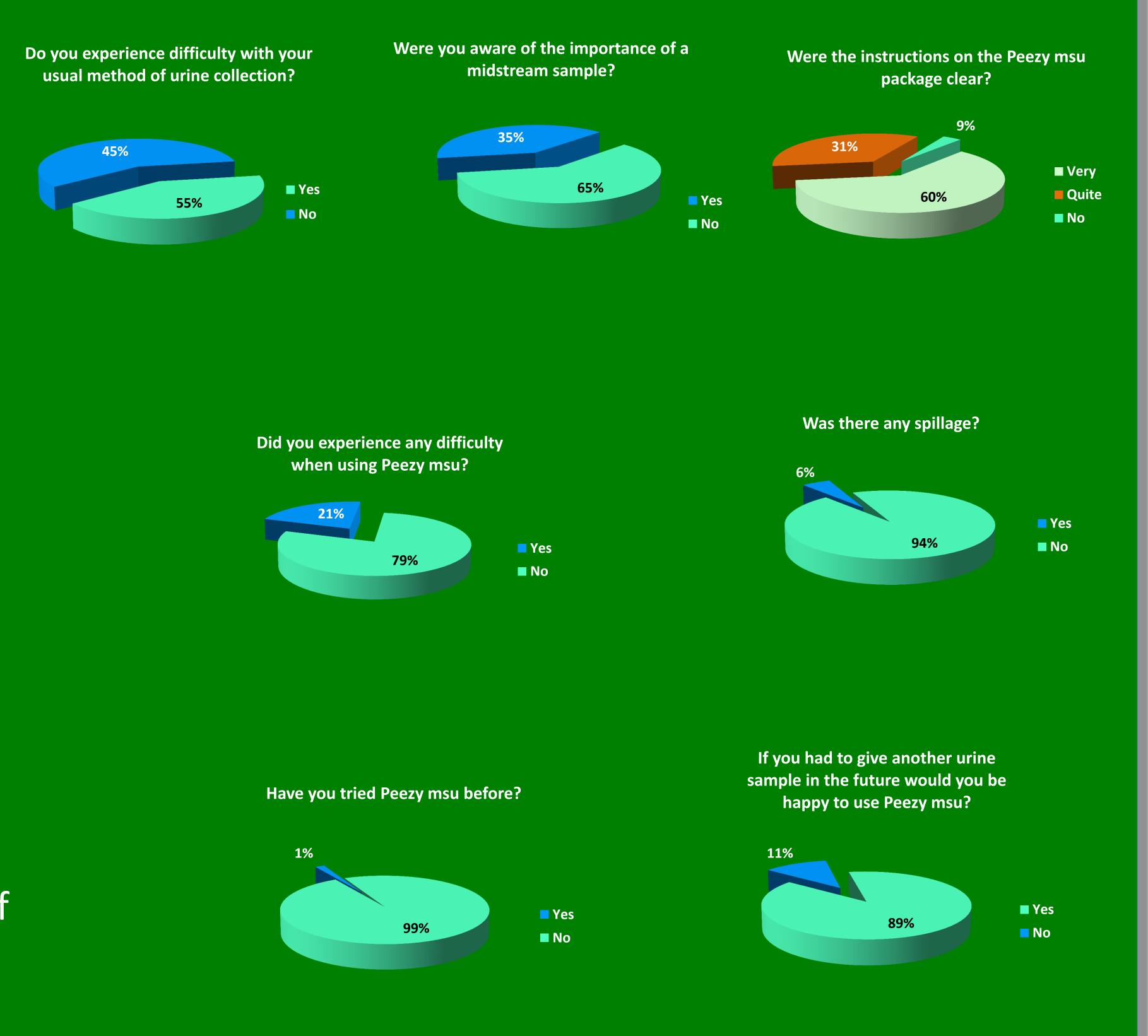
Our initial 106 patients' experience on an innovative device for collection of midstream urine (MSU)

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Introduction and Objectives: Collection of a valid midstream urine (MSU) sample is pivotal in the initial assessment of lower urinary tract symptoms (LUTS). Contamination resulted from inappropriate handling and spillage from conventional methods poses risks of unreliable results, delay in diagnosis of an infection or bacteriuria, thus preventing appropriate treatments, and incurring unnecessary expenses in repeated sample assessment. We present a patient satisfaction survey of 106 patients who used the new Peezy msu device.

Materials and Methods: 106 (76males, 30 females) consecutive patients who attended a urology clinic were given the new Peezy msu device for standard collection of a MSU sample. Written instructions of use were given, collection was accomplished by patients subsequently without further aid and a questionnaire was given for completion prior to leaving the clinic. Examination of the exterior surface of the specimen bottle was recorded. Microscopy and microbiological culture reports were obtained subsequently.

Results: 55% of all patients (male 28%, temale 80%) reported problems mainly in spillage with existing method of MSU collection. 65% of patients (M59%, F43%) were not aware of the importance of a MSU sample as initial assessment of their LUTS. When given the Peezy msu device for MSU collection, 90% of patients (M62%, F100%) found the instructions clear, 21% (M24%, F13%) experienced problems with the new device. Spillage occurred in 6% of the subjects (M5%, F7%). Although the device was new to 99% of the patients (M99%, F100%), 89% of them (M84%, F100%) would prefer to use Peezy msu in future instead of the previous methods. MSU bacteriology suggested possible contamination in only 7 specimens (6.5%) as opposed to the 22.9% of reported incidence in the local laboratory.



Conclusion: The patient satisfaction survey indicates that the Peezy msu is a welcome innovation by patients. Spillage is minimized, and hence toilet hygiene is maintained for general infection prevention. The improvement in possible unreliable results was impressive suggesting a significant financial saving due to the common nature of the investigation in LUTS assessment.



