小兒泌尿道感染預防與治療

Prevention and treatment of urinary tract infection in children

泌尿道感染是指尿路中有細菌存在所引起的感染。一般來說,由於性別差異,一歲內男童明顯較多,大多數和先天尿路結構或功能異常有關,其中以膀胱輸尿管逆流最為常見。而隨著年齡增加,女童由於尿道結構較短,所以發生率較男童為高。

Urinary tract infection refers to infection caused by the presence of bacteria in the urinary tract. In general, due to gender differences, within one years old boys were significantly more, mostly related with congenital hypospadias or functional abnormalities, commonly found is vesico ureteral freflux. When getting older, girls due to shorter urinary tract structure, so the ratio of getting this become higher than the boys.

一、症狀:

First, the symptoms:

臨床表現以發燒為最常見,新生兒時期主要以**發燒、食慾不佳、腹瀉、**哭鬧不安、 延遲性黃疸、腹脹、生長遲滯及血尿等症狀表現。年紀較大的孩童的表現則為解小便疼 痛、下腹痛、頻尿及發燒等症狀。其次為畏寒、活力下降、食慾不好、腹脹等,甚至會 以腹瀉、嘔吐、若未予適當治療可能會引發敗血症為其臨床表現,易引發嚴重之併發症。

Most commonly seen of clinical condition is fever, Newborn mostly symptoms are fever, loss appetite, diarrhea, crying disturbed, delayed jaundice, abdominal distension, growth retardation and hematuria and other symptoms. The symptoms of older children is pain while take a pee, lower abdominal pain, frequent urination and fever, etc. Followed with aversion to cold, decreasing in vitality, loss appetite, abdominal distension, etc., and even will followed with diarrhea, vomiting, If it is not treated properly then it may lead to sepsis and there will be clinical condition symptoms above, it easily lead to severe complications.

二、造成泌尿道感染的原因:

Second, Causes of urinary tract infection:

幼兒泌尿道感染不明,常見致病細菌為大腸桿菌,細菌來源一般來自病人的糞便,或來自其他血行性感染所造成。女性因尿道較短,發生感染機率較高。幼兒之泌尿道系統常存在著先天性泌尿道異常。如腎盂輸尿管狹窄,引起之水腎,膀胱輸尿管回流,腎發育不全或單一腎等。若未經正確診斷和適當的處理,則患童不僅易發生反覆性感染,更會造成腎臟的損傷。所以,適當治療兒童泌尿道感染與詳細檢查泌尿道系統是相當重要的。Causes for Infants to get urinary tract infection is unknown, commonly found causative organisms is E. coli, bacterial sources generally comes

from the patient's feces, or others caused by hematogenous infection. Women due to shorter urinary tract, so having the higher probability getting infected. Children's urinary tract system often exists congenital abnormalities in their urinary tract. If Ureteral Stricture, then it can cause hydronephrosis, vesicoureteral reflux, kidney development not complete or only single kidney, etc. If not properly diagnosed and get appropriate treatment, the child will not only get infected repeatedly, but also cause damage in kidney. Therefore, the appropriate treatment of urinary tract infection in children with a detailed examination of the urinary tract system is very important.

三、相關的檢查:

Third, Relevant examinations:

- 1.尿液檢查、尿液培養。
- 1. Urine examination, urine culture.
- 2. 腎臟超音波檢查:檢查是否有水腎、腎臟膿瘍或泌尿道系統構造異常。
- 2.Kidney ultrasonography: Check whether there is hydronephrosis, abnormalities in renal abscess or urinary tract system.
- 3. 腎臟核子醫學檢查:檢查是否有急性腎盂腎炎或腎臟結痂和腎臟受損狀況。

Renal Nucleus Examination: Check whether there is acute pyelonephritis or kidney scab and kidney damage condition.

4.膀胱輸尿管回流攝影:評估是否有膀胱輸尿管回流。

vesicoureteral reflux photography: evaluate whether there is vesicoureteral reflux

四、治療方式:給予適當抗生素治療。

Fourth, Treatment methods: Give appropriate antibiotic treatment

存有膀胱輸尿管回流時,於輕度狀況下僅需低劑量之抗生素以預防再次感染,若回 流嚴重時,則需考慮手術矯正,以免腎臟長期受傷害。

When having vesicoureteral reflux, If it is only mild conditions then only need to give low doses of antibiotics to prevent re-infection, if reflux is a serious conditions, then you need to consider surgery to avoid long-term damage to the kidneys.

五、預防感染之方法:

Fifth, Prevention of infection methods:

1.嬰幼兒需勤換尿布,並以清水清洗會陰及臀部。

Infants and young children need to change the diaper properly, and clean perineum and hip with water

2.避免憋尿(至少3~4小時排尿一次),且每次應全部排空,避免有餘尿。 可將細菌沖離泌尿道,若尿液在膀胱中滯留時間超過4小時以上,感染的機率也就大幅昇高。

Avoid hold in urine (at least 3 - 4 hours need to take a pee once), and every time should emptied all urine from our body, to avoid there is urine left. It can wash away bacteria from urinary tract, If the urine in the bladder stays more than 4 hours, the probability of get infected also increased significantly.

3.攝取足夠水分; 蔓越莓汁 (cranberry juice) (小紅莓汁) 可酸化尿液以減少細菌 滋生。 若病童已就學,可請老師協助督促喝水及排尿。

Intake enough water; cranberry juice can acid up the urine that can reduce the bacteria from breeding. If the sick child has gone school, then can ask the teacher to help giving sick children enough water and urination.

4.養成良好衛生習慣:注意尿道口的清潔,指導女童清潔會陰時,應由前往後擦拭;男童應正確執行包皮清潔。男童沐浴時應將包皮往上推清洗龜頭。清洗後務必將包皮 往回推,以免太緊而導致缺血。

Develop a good hygiene habits: pay attention while cleaning urethra, guide the girls while clean the perineum should be wiped from front to back; the boy should know the correct way to clean foreskin of his penis. When the boy is bathing, he should push the foreskin while washing the glans penis. After cleaning must be pushed back to the foreskin, in order to avoid too tight and leading to ischemia.

5.洗澡最好採淋浴,避免泡澡與洗泡沫浴過久。

The best way for take a bath is shower, avoid bathing and soak in bathtub for too long 6.避免過緊的衣著或尿布;選擇棉質的內衣褲為佳。

Avoid wearing too tight clothes or diapers; choose cotton underwear is the best choice.

7.預防便秘,正常解便可使膀胱排空較完全。

Prevent constipation, If normal excretion then the bladder emptying more complete.

參考資料 Reference information

黄美智、蔣立琦總校訂(2018) · 兒科護理學 (6版) · 台北:永大。

若您想對以上的內容進一步了解,請洽諮詢電話:05-2756000轉

新生兒中重度病房分機 4507、4508

If you need further information about matters above, Please call telephone :05-2756000 turn

Pediatric intensive care unit extension 4505,4506

Newborn moderately severe disease ward extension 4507,4508

\$\fm\\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar}\mathbf{\bar

Revised in Octobder 2021