

Patient decision aid

Cystitis: taking an antibiotic

Information to help women who are not pregnant discuss the options with their healthcare professionals.

Published November 2018. Last updated April 2022

Cystitis is usually caused by bacteria (germs) from your gut getting into your bladder. Cystitis is also called lower urinary tract infection or UTI. Sometimes symptoms get better by themselves, but many people will need antibiotic treatment.

What are the options?

It's not always clear when an antibiotic is needed so, for some women with cystitis, NICE recommends that you could either:

- start taking an antibiotic straightaway, **or**
- wait, and see if your symptoms start to get better by themselves. If they do not get better within 48 hours, or get worse at any time, you should start taking the antibiotic.

You can choose whether to wait and see if your symptoms improve on their own, or start taking an antibiotic straightaway.

There are pros and cons to both options, which this decision aid will help to explain. If you start taking an antibiotic straightaway you'll be doing the most you can to treat your cystitis, but you may be taking an antibiotic when you do not need to. If you choose to wait and find you do not need to take the antibiotic, you would avoid the problems that can come with antibiotics.

Other ways to help your symptoms

Whichever option you choose you can use paracetamol for pain or, if you prefer and it's suitable for you, ibuprofen. You should also drink enough fluids to avoid becoming dehydrated.

Information about how this decision aid was produced and the evidence on which it is based is available on the [NICE website](#).

Is it better to start taking an antibiotic straightaway or choose to wait and see if the symptoms get better without one?

There's not much good evidence to answer that question. One small study looked at what happened to women who started antibiotics for cystitis straightaway compared with those who had the option to wait and see. It did not find convincing evidence that there was any difference in how long their symptoms lasted or how bad they were.

Complications from cystitis, such as developing a kidney infection, can sometimes happen, but fewer than 1 in 100 normally healthy women who are not pregnant get these (so more than 99 in 100 do not). There's no good evidence to know whether taking an antibiotic straightaway or waiting to take an antibiotic makes a difference to the chance of getting complications.

It is not possible to know in advance what will happen to any individual person.

What are the disadvantages of taking an antibiotic for cystitis?

Antibiotics can cause side effects, but not everyone gets them. About 10 to 20 people in 100 get side effects with antibiotics for cystitis, and about 80 to 90 do not. Different antibiotics for cystitis have different side effects, but the common ones may include:

- yellow-coloured or brown-coloured urine if you take the antibiotic called nitrofurantoin (this is harmless)
- diarrhoea
- feeling sick or being sick
- thrush
- a rash.

Rarely, antibiotics can cause more serious side effects, for example, affecting the skin, blood, lungs or liver.

Some antibiotics are best avoided in pregnancy. Speak to your healthcare professional if you are pregnant, could be pregnant or you are trying for a baby.

Antibiotic resistance

Taking antibiotics increases the chance of bacteria becoming resistant to them. This means that they may not work as well for you or other people in the future, for cystitis or other infections.