

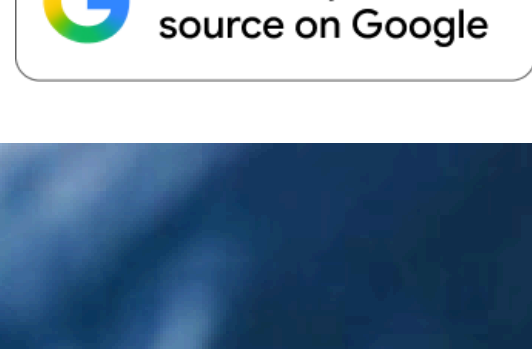
# Pregnancy increases the risk of UTIs: why and what you can do Premium

A quiet but clinically important condition is asymptomatic bacteriuria, where bacteria are present in the urine without the burning, urgency, or discomfort commonly associated with UTIs. During pregnancy it increases the risk of kidney infections, maternal sepsis, preterm labour, and low birth weight babies

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Slower urine flow and retained urine during pregnancy can create favourable conditions for bacteria to multiply. Image used for representational purposes only | Photo Credit: Getty Images

Urinary tract infections (UTIs) are among the most common bacterial infections seen during pregnancy, and yet, they are rarely part of conversations about antenatal health. What many expectant mothers may not realise is that pregnancy increases the likelihood of developing a UTI. In some cases, even after an infection has been contracted, there may be no noticeable symptoms. For obstetricians, this is an issue worth discussing and screening for early, because timely treatment prevents avoidable complications.

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## The pregnancy connection

Pregnancy changes the body in ways that are both dramatic and subtle. When progesterone levels rise, the smooth muscles of the urinary tract relax, slowing down the flow of urine. At the same time, the enlarging uterus presses against the bladder, reducing its capacity and sometimes leading to incomplete emptying.

This slower urine flow and retained urine can create favourable conditions for bacteria to multiply. Some women also have changes in urine composition during pregnancy, including higher glucose levels, which may further encourage bacterial growth. What starts as a lower urinary infection can, if ignored, travel upwards and affect the kidneys - a condition known as pyelonephritis, which is far more serious.

**Also Read:** Urinary tract infections are common in women, say doctors

## Symptoms absent or present

A quiet but clinically important condition is asymptomatic bacteriuria, where bacteria are present in the urine without the burning, urgency, or discomfort commonly associated with UTIs. Outside of pregnancy this is often benign, but during pregnancy it increases the risk of kidney infections, maternal sepsis, preterm contractions, and low birth weight babies. This is why routine urine testing is part of antenatal care - even when a woman feels completely well.

When symptoms do appear, they may include frequent urination of small volumes, burning pain while passing urine, mild lower abdominal discomfort, cloudy or foul-smelling urine, and fever or chills (suggesting the infection has moved to the kidneys). However, pregnancy on its own can cause frequent urination and pelvic pressure, especially in the later months. Because of this overlap, women may not immediately identify these signs as warnings.

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## Diagnosis and treatment

Diagnosing a UTI during pregnancy is simple. A urine culture can detect and confirm the presence of bacteria. Treatment generally involves antibiotics that are safe for both mother and baby. As always with antibiotics, it is crucial to complete the entire course of medication even if symptoms settle quickly. Follow-up testing is often advised to ensure the infection has cleared up. For women with recurrent UTIs, doctors may recommend closer monitoring or preventive strategies depending on individual patient history.

While not every UTI can be prevented, a few practical habits can reduce risk: drinking enough water, avoiding holding urine for long periods, choosing loose, breathable cotton underwear, practicing good personal hygiene and cutting back on sugary, carbonated and caffeinated beverages. Individually while these interventions may seem small, together they support urinary health throughout pregnancy.

**Also Read:** Rapid, diagnostic test for UTIs may help stem super bug crisis

## Why awareness matters

During pregnancy, most of the attention tends to naturally gravitate toward scans, nutrition, blood pressure, and glucose monitoring. UTIs fall down the list because they appear minor or easily fixable. However, the concern arises not from the infection itself but from delayed detection. With prompt treatment, UTIs in pregnancy are manageable and rarely affect long-term outcomes. Awareness simply ensures they don't get missed.

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