Clinical evidence suggests it’s time to change the approach, not just the catheter.

Superiority of suprapubic vs. transurethral catheterization:
- Significantly lower infection rates (up to 87% reduction)
- Fewer complications and lower treatment cost
- Higher patient preference (89%)
- Suprapubic catheters do not affect CAUTI scoring
- ACA reimbursement & payment penalties for transurethral CAUTI events
- Full payment (SPC) vs. $5,914 average payment penalty per CAUTI (TUC)

The suprapubic option is no longer the last resort. 
**T-SPeC® enables safe suprapubic catheter placement.**
Clinical studies prove suprapubic approach is superior to transurethral catheterization.

86.6% CAUTI Reduction:
Prospective randomized controlled trial of urethral versus suprapubic catheterization.

“We propose that, when catheterization is required during a general surgical procedure, the suprapubic route is to be preferred.”

77.8% CAUTI Reduction:
Suprapubic or urethral catheter: what is the optimal method of bladder drainage after radical hysterectomy.

“...suprapubic catheterization is associated with a lower rate of UTI and an earlier trial of voiding...”

73% CAUTI Reduction:
Suprapubic Percutaneous Cystostomy versus Urethral Catheterisation in Abdominal Surgery: A Prospective Randomised Controlled Study.

“SPC is a simple and safe method for draining the urinary bladder. It allows prompt re-establishment of normal micturition, is better tolerated by the patients and has a lower risk of complications.”
Botsios D. · Demetriades Ch. · Goulamis I. · Kandilias I. · Dadoskis I. · 4th Surgical Department, Aristotelian University of Thessaloniki, G. Papanicolaou General Hospital, Thessaloniki, Greece, Dig Surg 1997;14:404–408 (DOI:10.1159/000172563)

65% CAUTI Reduction:
Suprapubic Bladder Drainage in General Surgery.

“The results reported favor suprapubic over urethral catheterization in that urinary tract infections are reduced. 35% incidence of bacteriuria (100% for urethral catheters inserted an equal length of time).”

55% CAUTI Reduction:
Acute urinary retention. Comparison of suprapubic and urethral catheterisation.

“We recommend that the use of suprapubic catheters should become the preferred initial treatment for acute urinary retention.”

54% CAUTI Reduction:

“SPC is a valuable option of urinary management for quadriplegic patients...”

43.3% CAUTI Reduction:
Suprapubic bladder drainage versus a transurethral catheter in patients following anterior colporrhaphy.

“The additional time required for placing the suprapubic catheter postoperatively is by far outweighed by the advantages of this system, such as shorter hospitalization and a lower incidence of urinary tract infections.”

Less pain and discomfort with SPC:
Published evidence favors the use of suprapubic catheters in pelvic colorectal surgery.

“The results reported favor suprapubic over urethral catheterization in that urinary tract infections are reduced.”

Coated catheters do not significantly reduce CAUTI:
Antimicrobial Catheters for Reduction of Symptomatic Urinary Tract Infection in Adults Requiring Short-term Catheterisation in Hospital: A Multicentre Randomised Controlled Trial.

“The reduction we noted in CAUTI associated with nitrofural-impregnated catheters was less than that regarded as clinically important.”