Red Kite
HEALTH SOLUTIONS CIC

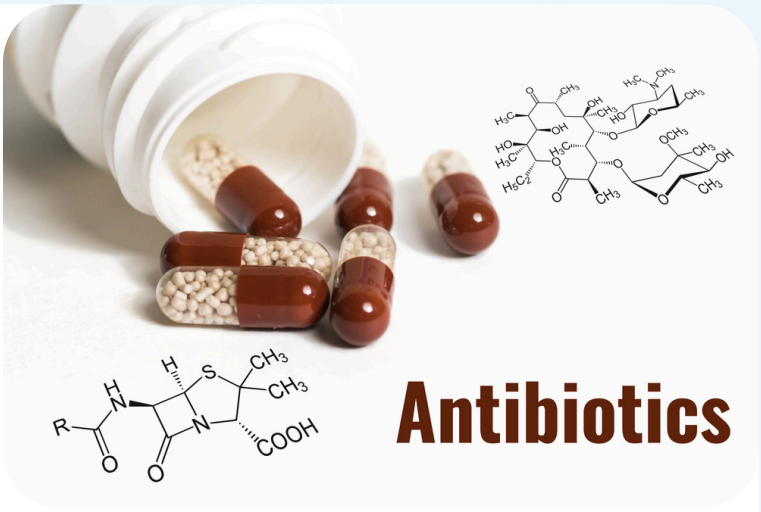
Understanding Antibiotics & UTI Prevention

Find out why a planned break from long-term antibiotics is part of good clinical care for recurrent UTIs, what to expect during the process, and how you can help reduce future infections through simple daily habits.

Essential information for primary care patients

This leaflet explains why your GP may suggest a trial break from long-term, low-dose antibiotics after six months of treatment for recurrent urinary tract infections (UTIs). It also provides guidance on what to expect, how to manage any symptoms, and when to seek further help.

Recurrent urinary tract infections (UTIs) are common and are usually defined as having three or more infections within a year, or two or more within six months. In these cases, your doctor may recommend preventive treatment to help reduce the risk of further infections. This can include a low daily dose of antibiotics or a non-antibiotic option such as methenamine hippurate. While antibiotics can be helpful in preventing infections, taking them for long periods can sometimes lead to problems, such as antibiotic resistance, side effects, or a gradual loss of benefit over time.



Why consider stopping antibiotics after 6 months?

Taking a break from antibiotics after about six months isn't about giving up — it's a carefully planned way to see if you can stay free from infections without needing ongoing treatment.

THE MAIN BENEFITS ARE:

Reducing resistance

Using antibiotics too often or for too long can cause bacteria to become resistant, meaning the medicine may stop working as well in the future. Taking a planned break helps protect both you and others from infections that are harder to treat later on.

Avoiding long-term side effects

Even at low doses, taking antibiotics for long periods can sometimes cause unwanted effects such as stomach upset, allergic reactions, or, in rare cases, problems with the lungs, liver, or kidneys. Stopping when it's safe to do so reduces these risks and helps your body stay in balance.

Reducing unnecessary medication

Taking daily antibiotics for a few months gives your bladder time to heal and recover from repeated infections. Once this happens, your body often no longer needs continuous antibiotics to stay well. A healthy bladder can usually protect itself naturally, helping to lower the risk of future infections.

What to Expect During a Trial Stop

What may happen

Everyone's experience is a little different. You may stay free from infections for many months, or you might develop another UTI. Either way, this trial helps you and your clinician determine whether long-term antibiotics are still necessary or if an alternative approach might be more effective for you.

What's planned

During your trial stop, you'll pause your daily antibiotic while continuing with your usual self-care habits — such as good hydration, hygiene, and regular bladder emptying. You'll also keep an eye out for any symptoms. If you do develop signs of a UTI, you'll be asked to provide a urine sample so we can make sure the right bacteria are being treated. Your clinician will review the results and decide on the next steps. Sometimes, a "rescue" antibiotic may be provided for quick access if needed.
All decisions will be based on your symptoms, test results, and individual risk factors.

What You Can Do

During this time, it's important to stay aware of any symptoms such as burning when passing urine, urgency, frequency, or new pain. Continue with non-antibiotic measures by keeping well-hydrated, maintaining good hygiene, and going to the toilet regularly.
Keep in touch with your clinician and let them know straight away if you notice any symptoms or changes.

How You Can Help Stay Infection-Free

There are simple things you can do to help protect yourself from future infections — whether or not you're taking antibiotics. Try to drink plenty of fluids (around one and a half litres a day, unless your doctor advises otherwise) and don't delay going to the toilet when you need to. Passing urine soon after sexual activity can also help if this tends to trigger infections for you. Good hygiene is important too — wipe from front to back, wash with plain water, and avoid perfumed soaps or sprays. Managing other health conditions such as diabetes or constipation can also make a difference. If you are post-menopausal, speak to your doctor about whether vaginal oestrogen might help reduce your risk of UTIs. And finally, stay aware of any symptoms and contact your clinician promptly if they appear.

When to Contact Your Clinician Urgently

Get in touch with your doctor or nurse as soon as possible if you develop a fever, chills, nausea, vomiting, or pain in your back or side — these could be signs of a kidney infection. You should also seek help if your symptoms get worse or don't start to improve within 48 hours, if you notice blood in your urine, or if you experience any new or unusual urinary symptoms compared with your usual infections. Always follow any specific advice your clinician has given you about when to seek medical help.

Looking Ahead

We hope this leaflet reassures you that taking a break from antibiotics is a planned and safe part of routine treatment review and good clinical practice. A member of your healthcare team will be in touch shortly to discuss your options — this may include a trial stop of your antibiotic or arranging a GP appointment to explore suitable alternatives. If any of your symptoms return, please contact your healthcare team so we can decide together on the best and most appropriate way to manage them.

References

- National Institute for Health and Care Excellence (NICE). Urinary Tract Infection (Recurrent): Antimicrobial Prescribing (NG112). Updated 2024.
- Royal College of General Practitioners (RCGP) TARGET Toolkit. UTI Resource Suite, 2021.
- Cheshire and Merseyside Area Prescribing Group. Recurrent Urinary Tract Infection (UTI) Guidelines, 2025.