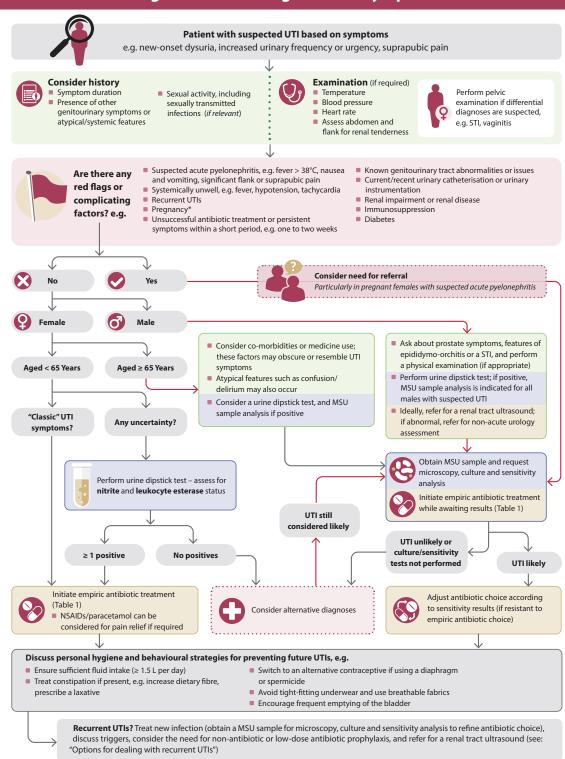




An overview of the diagnosis and management of symptomatic lower UTIs in adults



www.bpac.org.nz May 2025 **1**

Table 1. Empiric antibiotic regimens for uncomplicated lower UTIs in adults. N.B. Treat for **seven days** in pregnant females and in all males, regardless of antibiotic choice.

	Antibiotic	Dose
First line	Nitrofurantoin*†	Modified-release (Macrobid): 100 mg, twice daily, for five days Immediate-release (Nifuran): 50 mg, four times daily, for five days
Alternatives (see note below)	Cefalexin	500 mg, twice daily, for three days
	Trimethoprim [‡]	300 mg, once daily at night, for three days

N.B. Regional guidelines differ in alternative antibiotic recommendations. This may be due to local resistance and sensitivity patterns. If an alternative antibiotic is needed, check for local advice, e.g. HealthPathways, and follow corresponding recommendations if available.

- * Prescribe by brand name to reduce errors as there are two different formulations
- † Avoid after 36 weeks gestation in pregnant patients and in those with creatinine clearance < 60 mL/min due to the risk of peripheral neuropathy
- ‡ Avoid during the first trimester of pregnancy



B-QuiCK provides short clinical summaries from some of the full articles available on our website. Relevant sections from these resources have been condensed into "notepad pages" or algorithms designed to offer rapid access to practical clinical advice and knowledge. It is strongly recommended to review the original resource at your convenience for full details of recommendations and evidence. See full article here: **Urinary tract infections (UTIs)** – **an overview of lower UTI management in adults**

www.bpac.org.nz/b-quick

2 May 2025 www.bpac.org.nz