

Classification

Infection of the urinary tract may be present with or without clinical symptoms. As a result, the site of infection is often difficult to pinpoint with any degree of accuracy. Various terms used to describe urinary tract disorders include:

Bacteriuria: Presence of bacteria in the urine

Pyuria: Presence of white blood cells in the urine

Asymptomatic bacteriuria: Significant bacteriuria (usually defined as >100,000 colony-forming units [CFUs]) with no evidence of clinical infection

Symptomatic bacteriuria: Bacteriuria accompanied by physical signs of UTI (dysuria, suprapubic discomfort, hematuria, fever)

Recurrent UTI: Repeated episode of bacteriuria or symptomatic UTI

Persistent UTI: Persistence of bacteriuria despite antibiotic treatment

Febrile UTI: Bacteriuria accompanied by fever and other physical signs of UTI; presence of a fever typically implies pyelonephritis

Cystitis: Inflammation of the bladder

Urethritis: Inflammation of the urethra

Pyelonephritis: Inflammation of the upper urinary tract and kidneys

Urosepsis: Febrile UTI coexisting with systemic signs of bacterial illness; blood culture reveals presence of urinary pathogen

Etiology

A variety of organisms can be responsible for UTI. *Escherichia coli* remains the most common uropathogen overall, but the prevalence is higher in females (83%) than males (50%) ([Edlin](#), [Shapiro](#), [Hersh](#),