

Burning when you urinate: it isn't always an infection

Burning during urination tells you tissue somewhere along the urinary tract is irritated, but not why. Infection is common, yet menopausal tissue change, stones, pelvic-floor tension, sexually transmitted infection and irritants can feel identical, so repeated negative cultures are a reason to look further, not to keep repeating antibiotics.



Figure 9.1. Why Urination Burns.

Key points

- Burning is a symptom of irritated tissue; the diagnosis depends on what is causing the irritation.
- When burning happens during urination (at the start, throughout, at the end or afterward) is a clue to where it comes from.
- In a stable person with recurring burning, a properly collected culture before another antibiotic can be one of the most valuable steps.
- A negative culture does not mean the pain is imagined; it means bacteria are a less convincing explanation.
- In women after menopause, thinner, more fragile tissue is a common non-bacterial cause of chronic burning.
- Treating the wrong disease well is still the wrong treatment.

Get prompt care if you notice

- High fever or shaking chills
- Severe flank pain or vomiting
- Confusion or profound weakness
- Inability to urinate
- Heavy bleeding with clots
- Rapid genital swelling, severe pain or skin changes

Questions to ask your urologist

- Do my urinalysis and culture support bacteria as the cause?
- If my cultures are negative, what else are you considering, such as pelvic-floor dysfunction, low-estrogen tissue change or a stone?
- Should we get a culture before I take another antibiotic?
- What question will any further test answer?
- Which warning signs mean I need urgent care?

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