

# Caring for Someone with Incontinence

Incontinence is not just a problem for older people or people with disability. Despite this, people from these two groups are at greater risk of developing bladder or bowel control problems. This is because of poor mobility (ability to get around), memory problems and chronic health problems such as Parkinson's disease, stroke, dementia and multiple sclerosis.

The most important thing to remember when caring for someone with incontinence is that it is not 'normal' or 'inevitable'. Options for preventing, treating, managing and curing incontinence are available, so it is very important to seek professional help sooner rather than later.

## Where to seek help

If the person you are caring for is incontinent, the most important step for you to take is to seek professional help. The National Continence Helpline 1800 33 00 66 is a free and confidential service available to anyone living in Australia. The Helpline is staffed by continence nurse advisors, who can provide you with practical information and advice including access to a wide range of information resources or details of a continence clinic located close to the person you are caring for.

## Continence assessment

The first step required to effectively manage a person's incontinence is a professional continence assessment. A continence assessment helps identify the type and causes of the problems being experienced by the person and assists the continence advisor to tailor an individual management strategy. There are a number of different types of incontinence. Management of each of these will differ and also take into account the living environment and lifestyle of both caregiver and cared-for person.

You can help the doctor make an accurate assessment and diagnosis by providing as much information as possible during the appointment. For a week prior to seeing the health professional, make note of the following:

1. Keep a urine **bladder diary** for the person in your care during the seven days prior to the doctor's visit. Document the signs and patterns of voids including:
  - time of day incontinence usually occurs
  - behaviours or activities preceding incontinence
  - location where loss of bladder control happens most often – for example: toilet, hallway, bedroom, stairway, away from home, etc
  - amount of liquid consumed
2. Any special diets or changes in diet
3. Any prescription and over-the-counter medications
4. Any behaviours that you suspect may be a side effect of medications
5. Are incontinent episodes becoming progressively worse?

## What you can do

There are a range of management options available to people with incontinence, which largely depend on the type of incontinence they have and outcomes they hope to achieve. An incontinence management plan will usually consist of several of the following options:

- adequate fluid intake (1500-2000ml each day)
- adequate diet (a fibre rich diet to prevent constipation)
- a pelvic floor muscle exercise program
- a bladder retraining program
- a toileting program
- medication, and
- continence aids (pads, condom drainage or catheters)

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### Practical tips whilst waiting for assistance

#### Bladder problems:

- find a pad that will keep the person's clothing or bedding dry for about three to six hours
- if the problem comes on suddenly, see your doctor to make sure it is not an infection
- if the person suddenly CANNOT pass urine, see your doctor as this may be a medical emergency
- make sure the person is drinking adequate amounts of fluid – 1500-2000ml spread evenly throughout the day
- if the person is constipated, see your doctor about different treatment options, as constipation can impact bladder control
- seek professional help on the cause and treatment of the incontinence

#### Bowel problems:

- use a continence pad for comfort and security
- use a barrier cream to protect the person's skin (bowel leakage can make skin red and sore very quickly)
- see your doctor if diarrhea persists for more than 24 hours (the cause of the diarrhea could be food poisoning, or certain kinds of medicine such as antibiotics)
- wear disposable gloves (available from supermarkets or chemists) to protect yourself
- wash your hands carefully (even if you wear gloves) after you have had any contact with bodily fluids such as urine or faeces
- if the person is constipated, see your doctor about different treatment options

### Carers and incontinence

Many carers find caring for a person with incontinence to be one of the most difficult aspects of caring. Incontinence can be unpredictable, add dramatically to your workload and be very costly. Many carers report feeling angry, frustrated, lonely, and not coping as they try to manage alone. It is not always easy to care for a person with incontinence, but the right advice and support from a health professional may make it more manageable for you.

### Who to contact for advice and support

- The National Continence Helpline **1800 33 00 66** – for information and advice about bladder and bowel control problems
- State or territory Commonwealth Carers Resource Centres **1800 242 636** – for advice and support relating to caring
- Carers Australia website **www.carersaustralia.com.au** for links to state or territory Carers Associations

For more information on bladder or bowel weakness, or **DEPEND®** or **POISE®** absorbent products, **phone 1800 028 334**

or visit

[www.depend.com.au](http://www.depend.com.au)

[www.poise.com.au](http://www.poise.com.au)

Health professionals visit

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