

## Dementia - managing incontinence

Incontinence is the loss of control of bladder and/or bowel function. Incontinence may occur in people with dementia for many reasons.

Our brains send messages to our bladder and bowel telling them when it is necessary to empty them. Being in control of these functions depends on an awareness of bodily sensations – such as the feeling of having a full bladder – and the memory of how, when and where to respond. When there is a decline of intellect and memory as a result of dementia, incontinence may occur.

### There may be other causes for incontinence

People with dementia, just like other adults, are susceptible to other causes of incontinence, such as infection, constipation, hormonal changes and prostate enlargement. Many of these conditions are treatable, so the first step is always to consult the doctor to obtain a full medical assessment and find out why the incontinence is occurring.

### Changes in a person's ability

The changes in a person's brain that occur with dementia can interfere with a person's ability to:

- Recognise the need to go to the toilet
- Be able to wait until it is appropriate to go to the toilet
- Find the toilet
- Recognise the toilet
- Use the toilet properly.

### Caring for someone with incontinence

When caring for someone with dementia, incontinence may seem like the last straw. But there are measures that can be taken either to alleviate the problem itself or to make it less stressful.

It is important for the carer to seek professional help at an early stage and not try to struggle alone. They should let anyone else who is helping to care for the person with dementia know about the problem too.

Incontinence can be very distressing for the person with dementia. It helps if the carer remains calm, gentle, firm and patient. It is important that the carer tries to accept and get over their own embarrassment in having to help the person in such an intimate way. Sometimes a little humour can help.

### Information for the doctor

It is useful if the doctor can be provided with the following information:

- How often is the person incontinent?
- Is it urinary incontinence or faecal incontinence?
- When did the problem start?
- Is the person saturated or is it just a trickle?
- Has there been an increase in confusion or any change in behaviour?
- Has there been any fever or does the person appear to find it painful to go to the toilet?
- Is the person taking any medication?
- Does the person pass urine in strange places?

If medical assessment does not indicate any other medical reasons for the incontinence, then the cause is most likely to be the person's dementia.

## Suggestions for managing incontinence

If you are looking after someone with incontinence, it will help to:

- Be sure the person is drinking adequate fluids, preferably water (5 to 8 glasses daily – jelly, icecream or custard may be substituted). Many people with dementia forget to drink or no longer recognise the sensation of thirst.
- Consider reducing the person's caffeine intake by using decaffeinated coffee and tea.
- Observe the person's toileting patterns and suggest they use the toilet at regular times that follow their pattern.
- Try toileting before and after meals, and before bed.
- Try to establish a regular routine for the person to have something to drink with and between meals.
- There are many aids and appliances available to assist in managing incontinence.

## Communication

When discussing toileting, it may help to:

- Use short, simple words to give step-by-step instructions. For example, 'sit down'.
- Watch for non-verbal clues, such as pulling at clothes, agitation or a flushed face.
- Use words that are familiar to the person, such as 'pee' or 'tinkle'.
- Do not rush the person.
- Reassure them.

## Environment

Try to make the situation as simple as possible. Some things to consider include:

- Is the distance to the bathroom too far? A commode may help.
- The bed may be too high for the person to feel safe getting in and out.
- The floor and toilet seat may be the same colour. Try using contrasting colours.
- The person may have difficulty undressing.
- The lack of privacy may inhibit the person.
- Poor lighting may make the toilet difficult to find.
- Is the toilet clearly marked? Put a sign on the door, use a night-light or leave the door open.
- Can the door be opened if they fall?
- Can they lock themselves in?
- If the person is urinating in inappropriate places, try to remove any objects that may be mistaken for the toilet.
- When using a public toilet, the person will usually need help. Toilets for people with disabilities are usually for both sexes and there is plenty of room for two people.

## Clothing

Try to make getting clothes on and off as easy as possible.

- Use Velcro tape instead of buttons or zippers.
- Try elastic waistbands for trousers or wraparound skirts.
- Try not to let the person become accustomed to wet clothes.
- Select clothing that is washable and does not need ironing.
- Protective garments and disposable pads may be useful.

## In the toilet

- If the person is having trouble urinating, try giving them a drink of water or running the tap.
- If the person is restless or hyperactive and will not sit on the toilet, allow them to get up and down a few times. Music may have a calming effect. Try giving something to distract them while they are on the toilet.

## Bathroom aids

- A raised toilet seat and wall grab-bars may help the person get on and off the toilet.
- Make sure the seat is fastened securely to the toilet to reduce the risk of slipping.
- Avoid floor mats to prevent tripping.

## Skin care

- Skin care is very important. Wash the skin after an accident to keep it clean and dry, and to prevent rashes.
- Make sure the person's skin does not come into contact with protective plastics as this will cause soreness.

## Constipation

Try a high fibre diet. Other suggestions include:

- Be sure the person is drinking at least six to eight glasses of water a day.
- Plenty of regular exercise will help.
- Try and establish a routine to help keep track of the person's bowel movements. People with dementia may forget when they have gone to the toilet.
- If constipation persists, always see your doctor.

## Remember – respect privacy

It is important to respect privacy and dignity. Losing control can be humiliating and embarrassing, and caregivers need to be sensitive to these feelings. There are bound to be accidents, so try not to worry too much. Get help in managing the problem and make sure that you take adequate breaks.

## Where to get help

- Your doctor
- Your local community health service
- Your local council
- National Dementia Helpline Tel. 1800 100 500
- Commonwealth Carer Respite Centre Tel. 1800 059 059
- Carer Resource Centres Tel. 1800 242 636
- Aged Care Assessment Services – contact your regional Department of Human Services office
- Aged Care Information Line Tel. 1800 500 853
- National Continence Helpline Tel. 1800 33 00 66

## Things to remember

- Talk to your doctor about possible causes of incontinence.
- Incontinence can be very distressing for the person with dementia.
- There are bound to be accidents, so try not to worry too much.

**This page has been produced in consultation with, and approved by:**

Alzheimer's Australia Victoria

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