
Incontinence - tips for carers

Summary

- Incontinence is any involuntary or accidental leakage of urine (wee) or faeces (poo).
 - Incontinence is a challenging problem for carers, but help is available.
 - Your doctor is a good starting point for a referral to your local continence service.
 - An assessment at a continence service can help you meet the needs of the person you are caring for.
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Incontinence means any involuntary or accidental leakage of urine (wee) or faeces (poo). Incontinence can occur in men or women of any age, but people who are elderly or have a chronic health problem are at increased risk.

Incontinence is a challenging problem for carers, but help is available from a range of sources, so don't think you have to manage alone. Your doctor is a good starting point for a referral to your local continence service for assessment, management and advice

Help is available for carers of people with incontinence

Caring for an ill person is demanding and incontinence adds considerably to the stress. Many carers feel overwhelmed, frustrated, angry and upset about having to cope with a person's incontinence. These feelings are normal.

Remember that incontinence is not an inevitable part of ageing or disability. Effective treatments are available to help improve, manage or cure incontinence problems.

Continence assessment

There are different types and causes of incontinence. An assessment at a continence service (usually completed by a continence nurse) can help you establish a plan to meet the individual needs of the person you are caring for.

Information collected during a continence assessment may include:

- the person's medical history
- how often the person urinates (wees) and defecates (poos)
- a rough estimate of the amount of urine passed
- visual description of the faeces
- whether the leakage is urine or faeces
- details of diet and fluid intake
- list of medications including prescription, over-the-counter and herbal preparations
- current health concerns
- self-care abilities – for example, whether the person can feed, dress and bathe on their own
- whether or not the person recognises their need to go to the toilet or remembers the location of the toilet.

Tests or investigations performed during an assessment can include a urine test and an ultrasound of the bladder (performed on the skin surface below the belly button).

Management and treatment for incontinence

Treatment depends on the type and cause of the person's incontinence. Options may include:

- increased fluid intake of up to two litres a day
- high-fibre diet

- pelvic floor exercises
- bladder training
- training in good toilet habits
- medications, such as a short-term course of laxatives to treat constipation
- aids such as incontinence pads.

General tips for carers of people with incontinence

Treatment may take a while to work or it may manage the incontinence but not cure it. Be guided by your health professional, but general suggestions for carers include:

- The person you care for may be deeply distressed and ashamed about their incontinence. Aim to be calm and patient. Talk openly together about the situation.
- Try to accept your own discomfort and embarrassment. Humour can help.
- Despite effective treatment, accidents may happen from time to time. Try to keep a relaxed attitude as much as possible.
- Look after yourself too. Plan breaks from caring on a regular basis to give yourself time to recharge.

Practical suggestions for incontinence issues

Suggestions include:

- Pads for urinary or bowel incontinence are available. Call the Victorian Continence Resource Centre or the National Continence Helpline for advice about pads and funding.
- Change pads as required.
- Clothing with velcro fasteners or elasticised waistbands may be easier to manage than clothing with zippers or buttons.
- Choose machine-washable garments that don't require ironing.
- Protective garments (for example, plastic or rubber garments) may cause rashes if they contact the skin. Check the fit of protective garments and adjust if necessary.

Toileting suggestions for carers of people with incontinence

Suggestions include:

- Consider aids such as a raised toilet or a wall-mounted grab bar if the person is unsteady on their feet. Remove floor mats and make sure the seat is securely fastened to the toilet.
- Don't rush the person while they are on the toilet. Music can help create a calm and unhurried atmosphere.
- Run a tap or give the person water to sip if they have trouble urinating.
- Take note of the person's toileting patterns and suggest they visit the toilet at times that are appropriate to their pattern. Making notes on how often the person urinates and defecates can also help you and your doctor or continence professional to recognise and assess the severity of problems such as constipation.
- Consider keeping a portable commode by the bed if the toilet is too far away for the person to reliably reach in time.
- Use disabled toilets if they are available when you are out. A disabled toilet is usually unisex and has room to fit two people.
- Try to accommodate the person's need for privacy whenever possible. If privacy isn't possible, use a relaxed demeanour to set the mood. Humour may help to dispel embarrassment or upset.

Hygiene suggestions for carers of people with incontinence

Suggestions include:

- Wear disposable gloves (available from most supermarkets and pharmacies) when you are helping the person to clean up.
- Wash the person's skin afterwards with warm water. Pat dry and apply a barrier cream sparingly to prevent irritation.

- Wash your hands thoroughly with soap and water afterwards, even if you wore disposable gloves.
- Dispose of used pads and gloves appropriately. Do not flush pads or gloves down the toilet.

When to see the doctor for issues related to incontinence

Some events may need prompt medical attention including:

- inability to urinate
- sudden bedwetting or loss of urinary control
- chronic constipation
- diarrhoea that lasts longer than 24 hours
- persistent skin rash that doesn't respond to scrupulous hygiene and barrier creams
- strong negative emotions such as anger, stress or depression experienced by the person or the carer.

Where to get help

- Your **GP (doctor)**
- Local continence clinic or service
- **Victorian Continence Resource Centre** Tel. **(03) 9816 8266** or **1300 220 871**
- **National Continence Hotline** Tel. **1800 33 00 66**
- **Carers Australia** Tel. **1800 242 636**
- **My Aged Care Information Line** Tel. **1800 200 42**

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

Victorian Continence Resource Centre

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