Going to the toilet in hospital

**Summary**

- Continence means controlling your bladder (wee) or bowels (poo).
- Tell a nurse or doctor if you notice changes or have any concerns about your bowel or bladder movements.
- Get out of bed and use the toilet (rather than a bedpan) if you can – this can help prevent pressure sores.
- Ask hospital staff if you need help with getting to, using or going to the toilet.
- If you have been asked to remain in bed, or are unable to get up, toileting aids such as bed pans and urine bottles can be used.

When you are in hospital, ask hospital staff if you need help with getting to, using or going to the toilet. It is important to talk with your healthcare professionals about any continence issues you may experience when you are in hospital, so staff can investigate and help to solve the problem.

Continence means controlling your bladder (wee) or bowels (poo). Incontinence is when you have trouble with this control. Incontinence is not a normal part of ageing. There are many things that can affect how well your bladder works, such as not being able to move around easily, diabetes, urinary tract infections (UTIs), constipation, being overweight and some medication.

Incontinence can increase the risk of falling (when rushing to get to the toilet), of developing skin problems like pressure ulcers (from remaining in bed, without moving, for a long time) and delirium (acute confusion can arise as a result of a urinary tract infection).

If you have a continence problem, ask for a referral to a continence nurse or specialist. There are many ways to treat and manage incontinence. There are specialists on the hospital staff who can help you with bladder and bowel problems.

**Concerns about going to the toilet in hospital**

Some people may feel a bit nervous about going to the toilet while in hospital. For patients who have limited mobility, the distance from the bed to the toilet can be daunting, and the possibility of having an accident in unfamiliar surroundings may make them feel anxious. Many people are worried about how they will reach the toilet after a surgical procedure, or how they will use a bedpan if they have to remain in bed. Hospital staff deal with this concern every day. They are professional, understanding and supportive, and you will find that they will help you in your toileting without making you feel embarrassed. If you have concerns, ask the nursing staff when you arrive about what will happen when you need to go to the toilet.

**Incontinence in hospital**

In hospital, a patient may involuntarily leak urine (urinary incontinence) or pass stool (faecal incontinence). In some cases, incontinence may result from the environment rather than from the person’s physical condition.

Some reasons that this may occur include:

- being restricted to bed rest
- being given diuretics (medication that increases the amount of water and sodium that is excreted as urine), which causes the bladder to fill more often with urine
- having trouble getting out of bed because the bed is too low or high or because the patient is weak or unwell
- having a condition, or having had surgery, which makes walking difficult or painful
- having equipment, such as drip lines or oxygen tubing, heart monitors and catheters in the way.

Getting to a toilet can become complicated and may take more time and planning than usual. Don’t hesitate to ask

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the nursing staff for help. If you have incontinence problems while you are in bed, tell the staff straight away so they can clean you and make you comfortable again. Otherwise your skin can become irritated.

Going to the toilet in hospital – planning ahead
There are a few things you can do to prepare yourself for a hospital visit if you are worried about incontinence issues. It is a good idea to:

- Find out where the closest toilets are when you arrive.
- Know where the nursing call bell is and make sure it is within reach at all times, in case you need assistance to go to the toilet.
- Always use your walking frame, stick or other mobility aid, if you need one. Make sure you can reach it at all times.
- Don’t rush – try to leave yourself plenty of time to walk to the toilet, rushing could result in a fall.
- Tell a nurse or doctor if you use laxatives or continence pads at home.
- Use the continence aids (such as pads) provided, even if they are different to the ones you use at home.

Going to the toilet in hospital – practising good bladder and bowel habits
Ask hospital staff for help if you need help with getting to, using or going to the toilet (they will respect your privacy), or if you can’t reach your nursing call bell or walking aid.

Good bladder habits can improve bladder control problems. When in hospital, try these things:

- Drink plenty of water (unless the doctor tells you not to).
- Try to stay away from coffee, alcohol and soft drinks; they irritate the bladder.
- Completely empty your bladder each time you go to the toilet.
- Try to maintain your regular toilet routine.

If you don’t normally need continence aids, such as pads, you probably won’t need them when you are in hospital.

Good bowel habits include:

- Use a good toilet position. Lean forward while sitting on the toilet, with a straight back and your forearms on your thighs. Your feet should be raised so that your legs are angled slightly upward and away from your body. A footstool may help you to find the best angle.
- Try to walk and be active while in hospital. Exercise contributes to good bowel movement.
- Drink plenty of water (unless the doctor tells you not to).
- Eat high-fibre foods. Fibre, the roughage in plant foods, increases the bulk and softness of stools, making them easier to pass.
- Avoid relying on laxatives and use them only when needed.

Going to the toilet in hospital – changes to your bladder and bowel habits
If you start having problems, ask about whether any medication you are taking could be contributing to bowel or bladder problems.

Tell a nurse or doctor if you notice changes or have any concerns about your:

- bladder habits – if you have to go to the toilet to pass urine more often, if urination is painful, you have to rush to make it to the toilet, or you leak urine
- bowel movements – if they become hard, too loose, or more or less frequent.

Going to the toilet in hospital when you have limited mobility
Hospital staff are used to dealing with the toileting needs of patients who are confined to bed or who have limited mobility.

It is best to get up and use the toilet (rather than a bed pan or urine bottle) if you can. Sitting on the toilet makes it
easier to empty your bladder or bowel. However, if you can’t move very much, there are a number of toileting aids available in hospitals.

Commode chairs placed by the bed can help if you cannot walk to the toilet. These chairs have a built-in toilet pan and are suitable for patients who can get out of bed but have limited ability to walk to the toilet. Nursing staff will always help you to get on and off the commode if needed.

If you can’t get out of bed, you can use bed pans and urine bottles. These aids are usually made of metal, or plastic.

- Bed pans can be used for both urine (wee) and faecal matter (poo).
- Urine bottles are an option for men when they need to urinate (wee) while confined to bed. They are usually made from plastic that allows staff to measure the colour and amount of urine. This can be important when staff need to monitor a patient’s fluid input and output.

Mattress protectors can help protect hospital mattresses. Adult incontinence pads and liners for underwear can provide protection for those who are suffering from incontinence issues. They are sometimes used when a person can’t get out of bed.

**Where to get help**

- Your doctor
- Nursing staff
- Allied health staff
- Patient liaison officer

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

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