

Continence

More than 1:5 Australians have difficulty controlling their bowel or bladder. This is known as incontinence. It is not a disease, but a symptom of other problems. Although urinary incontinence can affect all age groups, it is more common amongst older people. It is estimated that between 33 – 55% of older people living in their own homes have problems with urinary incontinence. On the other hand, bowel incontinence is relatively uncommon at any age.

Incontinence is not a normal part of ageing and can be cured for some people, improved for many people and managed better for all people, regardless of their age. Urinary incontinence is a complex condition with many different causes:

- Functional incontinence is the inability to recognise the need to 'go', find an appropriate place or be physically able to get there. Causes include acute confusion, some medications, dementia, arthritis, stroke, Parkinson's disease or any other disease causing mental or physical deterioration.
- Stress incontinence is an inability to 'hold on' while coughing, laughing or sneezing and is due to weak pelvic floor muscles from childbirth, menopause or pelvic surgery.
- Urge incontinence is also an inability to 'hold on' while trying to get to a toilet, due to an unstable bladder muscle. Causes include some medications, stroke, Parkinson's disease, cancer, constipation, bladder infections and spinal cord injury.
- Retention is an inability to empty the bladder completely. After going to the toilet, there will be some urine left in the bladder and small amounts may leak out without warning. Causes include some medications, a blocked bowel, prostate enlargement, diabetes, multiple sclerosis and spinal cord injury.
- Bowel incontinence has many causes, the most common being a blocked bowel.

The impact of incontinence is profound. It can lead to low self-esteem, depression and social isolation. The cost of continence aids can also have an impact on a client's financial situation. It causes increased stress for caregivers and is the second leading cause for admissions to nursing homes.

RDNS Aged Care or Continence Clinical Nurse Consultants or Continence Resource Nurses work with clients in the following ways to better manage their incontinence:

- Assessment of bladder/bowel incontinence and constipation.
- Education in bowel management regimes.
- Education in self-management strategies such as bladder training and pelvic floor exercises.

- Education and assistance in the short or long-term management of a urinary catheter (hollow tube draining urine from the bladder).
- Assistance with obtaining continence pads and other aids.
- Information about other options and community resources available to clients.
- Referral of clients to continence clinics or urological specialists for more specific assessment or specialist advice.

RDNS operates 24 hours a day, 7 days a week, from 20 locations across Greater Melbourne and is also supported by a Customer Service Centre.

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