



PRATICAL SOLUTIONS

Dirty little that no one wants to talk about:

Tips for dealing with incontinence

Imagine a medical condition that will impact

- 3 out of every 10 women every day,
- 3 out of every 4 women in their lifetime--- that's right, women have only a 1 in 4 chance of **not** getting this problem,
- 2 out of 10 men over 60,
- 3 out of 10 women over 60.

Now if you have this condition, there is less than a 10% chance that it will be reported to a doctor. This condition is urinary incontinence— **“one of the most prevalent chronic disease in America, although often not recognized by the US health care system.”** (From report by Urologic Diseases in America.)

The experts don't even know how many people are affected by the condition with guesses ranging from 3 to more than 25 million people. It is likely that the number is much higher because the problem is rarely talked about in families, between doctors and patients, among caregivers and support organizations and in the health care industry.

What is urinary incontinence? It is defined as the involuntary leakage of urine or the inability to control the release of urine from your bladder. In most cases **urinary incontinence can be treated and controlled, if not cured.** The cure begins by bringing the issue out into open discussion with family and doctors.

What causes it? Are there different types?

Sometimes it is simply an accident. You sneeze or laugh too hard with a full bladder and urine may leak. Any woman who was ever pregnant knows a good laugh will likely cause an accident.

Stress Incontinence is the result of exerting pressure or stress on the bladder by coughing, sneezing, laughing, exercising or lifting heavy objects. Stress incontinence is not caused by mental stress, but refers to a physical stress or strain. Common causes of stress incontinence are pregnancy, childbirth, prostrate surgery or a broken hip.

Urge incontinence is a strong, sudden urge to go to the bathroom, followed by the loss of bladder control before you can make it. Generally it is the result of an overactive bladder. Sometimes simply turning on a faucet and the sound of running water may cause the leakage. Urge incontinence, however, may also be caused by some type of irritation of the bladder or other medical condition.

Mixed incontinence means having both stress and urge. While one may be more troubling than the other, the two are not related and may be treated differently.

Less common types include **overflow**, where small amounts of urine dribble from the bladder throughout the day, and **functional**, which is the result of some physical or mental disability preventing a person from getting to the toilet.

What increases the chances of getting incontinence? The chances of getting incontinence increase in both sexes with a stroke, dementia, recurrent cystitis, bladder cancer, stool impaction, reduced mobility, diabetes, chronic cough, various medications and aging.

What can be done? Isolated accidents happen. When the accidents become more frequent, consult a physician.

Bladder control training or pelvis muscle exercises, called "Kegels," strengthen the pelvic floor muscles and may help prevent occasional accidents.

How to do a "KEGEL."

Kegals involve squeezing and relaxing muscles in the pelvic and genital areas. The trick is finding the pelvic floor muscles. The next time you urinate, try to stop and start the flow without moving your legs or squeezing your buttocks. You should feel a muscle tighten beneath the bladder. That's the muscle.

The exercise involves contracting the muscles, counting to five, then relaxing. Repeat the exercise.

Practical tips for going out in public with incontinence

- Take a backpack or large tote bag with a change of clothes, cleanup supplies such as personal washcloths, antibacterial perineal* washes, cloth or disposable underwear.
- Locate public restroom before you need to go and use the bathroom before you leave your home.
- If you think an episode is likely to happen, wear disposable garments or sanitary pads.

Incontinence and your skin

Incontinence increases the likelihood that an elderly person will have medical issues with the skin. After every incident with incontinence, three important steps need to be taken.

1. **Cleaning:** Urine is not cleaned with just soap and water. A perineal* wash is recommended. Specially formulated body washes may be obtained in liquid form to be added to a spray or a washcloth, or in prepackaged personal washcloths.
2. **Moisturizing:** To prevent chafing and more serious bacterial or fungal infections, a perineal moisturizer should be applied to the genital areas.
3. **Protectant:** To protect the skin from new discharges, use a perineal skin protectant.

Not all cleaning solutions are alike. Look for ones specially formulated for the sensitive, perineal areas of the body.

(* Perineal: genital and anal region of the body)