

Caring for Incontinent People – Caring for an Incontinent Person

Caring for a loved one may be the most rewarding experience of your life, and yet one of the toughest jobs you've ever had. The important thing for you to know is that you are not alone. There is a lot of helpful information and resources available.

Whether you are new to caregiving or it has become a way of life, the daily struggle you face in caring for someone else's basic needs can be overwhelming. The level of help a person needs from their caregiver varies from light assistance to total care. It may be difficult to care for someone when they require the full spectrum of caregiving duties, and especially when those duties include managing incontinence.

Urinary incontinence can be frustrating for caregivers and often embarrassing for the person you are caring for. It is not a disease, but usually a symptom of some other health problem. Incontinence can often be cured and can always be managed. Talk to a healthcare professional about it.

Loss of bladder control or "urinary incontinence" is a very private and personal issue. Persons with incontinence are often reluctant to talk about it. As a caregiver, if you are aware that your loved one is incontinent, be sensitive to their feelings and their possible unwillingness to discuss or even admit their condition. Be assured that incontinence is very treatable. When talking with your loved one about incontinence, let them know that, with help from their doctor, this problem can often be cured and can always be managed. Stress how you will work together to find a solution.

The first step to bladder control is to schedule a doctor's appointment for an evaluation. If the person in your care already has an appointment on the calendar for another reason, call the physician's office and explain that you would like to discuss incontinence during the visit. Loss of bladder control isn't easy to talk about, but there is no need to feel uncomfortable bringing the subject up with the doctor.

You can help the doctor make an accurate assessment and diagnosis by providing as much information as possible during the appointment. For a week prior to seeing the doctor, make note of the following:

1. Keep a urine bladder diary for the person in your care during the seven days prior to the doctor's visit. Document the signs and patterns of voids including:
 - Time of day incontinence usually occurs
 - Behaviours or activities preceding incontinence
 - Location where loss of bladder control happens most often – for example: toilet, hallway, bedroom, stairway, away from home, etc.
 - Amount of liquid consumed
2. Any special diets or changes in diet
3. Any prescription and over-the-counter medications
4. Any behaviours that you suspect may be a side effect of medications
5. Are incontinent episodes becoming progressively worse?

Find out about the most common forms of incontinence in men and women, as well as some available treatments that can make a difference. Simple changes in the daily routine can help you both manage incontinence.

During the appointment, the doctor will most likely discuss symptoms and do a thorough physical exam. A diagnosis may be made or additional tests may be ordered. Once a diagnosis is made, the doctor will help you develop an appropriate treatment plan for the person you care for or refer you to other medical professionals who specialise in incontinence care. A treatment plan for your loved one may include:

- **Pelvic Muscle Exercises** – Simple toning exercises that can be learned quickly and done anywhere to strengthen the muscles that help control urine flow.
- **Change in Diet** – Learning which foods and eating habits may contribute to or aggravate incontinence.
- **Bladder Training** – Restoring a normal pattern of going to the toilet by slowly increasing the amount of time between trips to the bathroom.
- **Biofeedback** – Training that helps the incontinent person "learn their body's signals" and recognise the sensations of the muscles that control the bladder.
- **Changes in daily routine or modifications to the home environment** – Removing barriers that hinder an incontinent person around the house and suggesting aids that may improve mobility.
- **Medication** – Drug therapies to treat specific incontinence-related conditions.
- **Surgery** – Usually the last treatment option, surgery is sometimes recommended for certain types of incontinence after more conventional treatments are found to be unsatisfactory.