



**DementiaUK**

Helping families face dementia



## Continence

## Incontinence and dementia

People with dementia can experience problems with using the toilet, which can be distressing for them and those who care for them. This might be due to difficulty finding the toilet or reaching it in time, or problems with coordination and movement.

Incontinence occurs when someone experiences an involuntary leakage of urine (urinary incontinence) or faeces (faecal incontinence). Some people may have both, known as ‘double incontinence’.

Older people are more prone to incontinence, but this could be due to a physical health problem, which might be treatable. There are lots of reasons for incontinence, but there are also lots of ways to manage it, and to ensure that the person with dementia is helped to maintain their dignity and privacy.

## What causes incontinence?

Reasons for incontinence might include:

- Physical ailments or reduced mobility that mean a person might be slow to reach the toilet
- Illness; constipation or diarrhoea (see below for physical conditions that might affect continence)
- Medication might impact a person’s control, e.g. diuretics, or their ability to get to the toilet, e.g. sedatives
- Women who have had children might experience loss of bladder control
- As people age, their bladder and bowel muscles might weaken
- People with dementia might have trouble recognising the toilet or remembering where it is
- Some types of vascular dementia might affect the area of the brain controlling the bladder.

Physical conditions which may cause incontinence include:

- Prostate problems
- Urinary Tract Infections (UTIs)
- Constipation
- Diabetes
- Strokes
- Muscular problems, for example Parkinson's disease
- Infection of the bladder or kidneys

If a person with dementia is starting to lose control of their bladder or bowel, it's important for them to have a check-up with their GP. Some causes of incontinence can be treatable, such as urine infections, constipation and prostate problems.

## What can you do about it?

### Communication techniques

- Be supportive and patient. Remember the person may be embarrassed or uncomfortable. They might not realise they have been incontinent and may feel embarrassed or upset when they realise
- If possible, ask the person how you can help them manage their continence. Find out about previous routines or habits e.g. frequency of bowel movements
- Look for non-verbal signs that the person might need the toilet, such as fidgeting, pacing, holding their crotch or their stomach, or going to the corner of the room
- Pay attention to the language the person uses, such as saying phrases like they 'need to go out'
- Some people respond when reminded to go to the toilet regularly. Try prompting every two hours

- The person may hide wet or soiled clothing or cover a wet bed due to embarrassment. Instead of pointing this out, quietly remove soiled linen and replace.

### **Eating and drinking advice**

- Don't stop the person from drinking as this can cause dehydration and constipation which may make incontinence worse
- Aim for at least six-eight glasses of fluid per day
- But discourage drinking lots of fluid just before bed time
- Encourage a balanced diet with plenty of fibre to encourage regular bowel movements.



## Practical tips for the home

- Keep access to the toilet clutter-free and remove any trip hazards
- Put a sign near the toilet entrance of a symbol or picture of the toilet
- Keep the toilet door unlocked and ajar, if appropriate
- For men, ensure the toilet seat is left up
- Install a toilet seat in a strong or primary colour and fix brightly coloured grab rails, to make them easy to see. Blue colours are often easier to see than red
- Think about getting a commode or urinal for night time use, if the toilet isn't close to the bedroom
- Keep wet wipes or sanitizer handy for cleaning hands after going to the toilet
- Keep a set of continence pads, clean clothing and disposable gloves in the bathroom.

## Helping the person use the toilet

- The person may need to be guided into the toilet
- Offer encouragement with undoing their clothes in small steps, for instance: “Can you undo your buttons/zip?”; “Can you now pull down your trousers?”
- Help the person with their clothes if necessary, and if they are happy for you to do so
- Loose clothes such as tracksuit bottoms or trousers with velcro instead of buttons might be easier for some people
- Assist the person carefully to sit on the toilet if needed
- If possible, leave the person to have some privacy and stand away in the near vicinity
- For men who stand to urinate, remind them to sit on the toilet at least once a day to open their bowels

- Give the person plenty of time to open their bowels and bladder
- Check the toilet to see if the person has used it and make a note for the GP if there are any irregularities in the contents
- Report anything unusual to the person's GP or nurse
- Assist the person to ensure they are clean and dry before leaving the toilet.

### **Products and care**

- Continence assessments with a district nurse can be requested from the GP. You might be eligible for supplied incontinence pads, which the district nurse will advise you on
- There are many products available to buy, which the district nurse can also advise you on
- Consider using incontinence products such as waterproof mattress covers, disposable sheets and pads to protect sofas and chairs (see list of websites under Sources section).

### **Skin care**

- Wet skin is more prone to damage, so people who are incontinent can sustain sores and infections
- Skin should be gently washed with soap free products and patted dry
- Inspect the skin around the groin and buttocks and report immediately to the GP surgery if you see signs of redness or broken skin
- If using barrier creams and ointments, be aware that they can reduce the absorbency of incontinence pads. If you have any concerns about this, speak with the GP or pharmacist.

## What difference will these techniques make?

Supporting the person with dementia with their incontinence can:

- Reduce the risk of them getting Urinary Tract Infections (UTIs) and constipation
- Reduce agitation and pacing
- Help the person to sleep better
- Prevent skin breakdown
- Help preserve the person's privacy and dignity.

## Sources

- NHS Choices:

[www.nhs.uk/Livewell/incontinence/Pages/Gettinghelp.aspx](http://www.nhs.uk/Livewell/incontinence/Pages/Gettinghelp.aspx)

- Complete care shop:

[www.completecareshop.co.uk/continence-care](http://www.completecareshop.co.uk/continence-care)



The information in this booklet is written and reviewed by dementia specialist Admiral Nurses.

We are always looking to improve our resources, to provide the most relevant support for families living with dementia. If you have feedback about any of our leaflets, please email [feedback@dementiauk.org](mailto:feedback@dementiauk.org)

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If you're caring for someone with dementia or if you have any other concerns or questions, call or email our Admiral Nurses for specialist support and advice.

Call **0800 888 6678** or email [helpline@dementiauk.org](mailto:helpline@dementiauk.org)

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