



Factsheet: The Confused Incontinent Person at Home

Looking after a confused relative or friend can be a great strain and responsibility. It can become even more difficult, and indeed unpleasant, if the person loses control of the bladder or bowel and is incontinent. This is, unfortunately, not an easy problem to tackle, and nobody has the perfect answer.

Not all confused people become incontinent, so it should not be seen as inevitable. It is always a good idea to seek medical advice for incontinence as sometimes there is a simple medical answer (such as treating a bladder infection). Of course, confused people can become incontinent for any of the reasons that affect other people, such as constipation, weak muscles or an enlarged prostate gland in men.

Possible Help

The following are some practical suggestions that may help improve or avoid incontinence for some people.

1. Confused people benefit from frequent reminders of reality. It is important to talk to them a lot. Use their name often and talk about everyday things - the day, date or time of day, the season or weather, the place, Christmas is coming etc.

2. Often memory is better for distant than for recent events. Someone who is unable to remember what happened yesterday may be able to hold a conversation about their childhood or wartime experience. Old records or photo-graphs may help jog the memory.

3. If a confused person is to remember new information, it will have to be repeated, in the same form, over and over again. They often function best if a fairly rigid routine is kept to - keep life as regular as possible and avoid too many changes (e.g. don't keep moving the furniture around). Continence can be especially difficult in strange surroundings and special attention will be needed when they are out visiting.

4. The person may simply forget to go to the lavatory - either not noticing that the bladder is full, or not realising that something needs to be done about it. Some people need frequent reminders to visit the lavatory. Others benefit from a regular habit - such as always going before or after meals. If meals and drinks are taken at roughly the same time each day, the bladder is likely to need emptying in a predictable pattern. Keeping a record for several days may enable these times to be anticipated. Some confused people will become restless as their bladder nears its emptying capacity - they know that something has to be done but are not sure how or where to do it. Incontinence then follows. Watch out for these signs and use them in arranging the time of toileting.

If it is found that a person is often wet at about 11.00 am, then a visit to the lavatory at 10.30 am may prevent this. If the person is alone, it may still be possible to arrange for regular reminders to visit the lavatory throughout the day. Sometimes a neighbour is willing to call in; the district nurse may be visiting anyway; some local authorities will actually pay someone in a "good neighbour" scheme to call in. A telephone call from a carer who is out at work may help for some people; others can be reminded by a pre-set alarm clock or timer, providing they remember that the bell ringing means it is time to pass urine.

5. Someone who starts off to go to the lavatory may forget where they were going on the way. Arrows and labels at the right height may help. If the person cannot read, a picture of a lavatory on the outside of the door may help them to go in the right door.

6. Confused people often will not tolerate discomfort very well. Make sure the lavatory is

comfortable - warm, well lit, and with the pedestal at the right height. If it is too high, a block under the feet can make it more comfortable; if too low, raised seats are available. A hand rail beside the lavatory may reassure a person who is unsteady and afraid of falling. Sometimes someone will not pass urine even when sat on the lavatory - try running a tap to give the idea. If they need to sit for longer, a magazine may distract them and keep them sitting for a while.

7. Continence is often closely related to an individual's level of functioning. The more active and involved they are, the less likely incontinence becomes. Someone who is depressed and isolated may have no reason to try to be dry. Nice clothes, appearance and surroundings encourage the person to take more care and make the effort to be dry. Clothes should also be easy to manage for toileting - e.g. Velcro fastenings may be easier than zips or buttons. Activities such as visiting a day centre can help keep someone stimulated and alert.

8. It is important to keep up a reasonable fluid intake. Older people tend to produce urine constantly throughout the 24 hours, often having to get up several times at night, and they may take to wandering about in the dark looking for a lavatory. A commode or chamber pot by the bed may prevent this, or a low-voltage night-light may help. It is sometimes a good idea to restrict drinks two hours before sleep.

9. Faecal (bowel) incontinence is often caused or made worse by constipation. Try to establish a regular routine for bowel motions. This may not be every day, as individuals vary. A warm drink at breakfast and then a visit to the lavatory 20 minutes later works for many people. A diet with adequate fibre (bran, fruit and vegetables) will help to keep the bowels regular.

10. Local health and social services may offer a variety of forms of help. These may include the district nurse, visitor, health visitor, occupational therapist and social worker, day centres, day hospitals and relief holiday admissions to hospital or homes. Financial help such as attendance allowance may be available if a person needs regular help with managing toileting - ask your social services for details. Specialist hospital services may be based in care of the elderly or psychogeriatric departments. Some voluntary organisations may also give help locally, e.g. Age Concern. Incontinence products should be available free of charge via district nursing services.

Further Information

If you, any member of your family or person you care for are experiencing any of the problems mentioned in this factsheet, you may wish to seek advice from your GP or local continence clinic. The continence clinics are run by the NHS and you don't always need to be referred to a clinic by your GP, as some clinics will allow you to book an appointment yourself. To find your nearest continence clinic please call our office on 01926 357220.

The Bladder and Bowel Community provides information and support for people with bladder and bowel issues. We publish a wide range of user friendly booklets and factsheets.

For more information please call us on 01926 357220, email help@bladderandbowel.org or write to us at The Bladder and Bowel Community, 7 The Court, Holywell Business Park, Northfield Road, Southam, CV47 0FS.

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