

# Live Better with urinary incontinence

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#### About the authors

Associate Professor Winsome St John

School of Nursing and Midwifery, Griffith University

Research Centre for Clinical and Community Practice Innovation, Griffith University

Professor Marianne Wallis

Chair, Clinical Nursing Research, a joint appointment between Griffith University and the Gold Coast Health Service District

Research Centre for Clinical and Community Practice Innovation, Griffith University

Ms Shona McKenzie

Nurse Practitioner - Continence, Royal Brisbane Hospital

Ms Susan Griffiths

Research Centre for Clinical and Community Practice Innovation, Griffith University

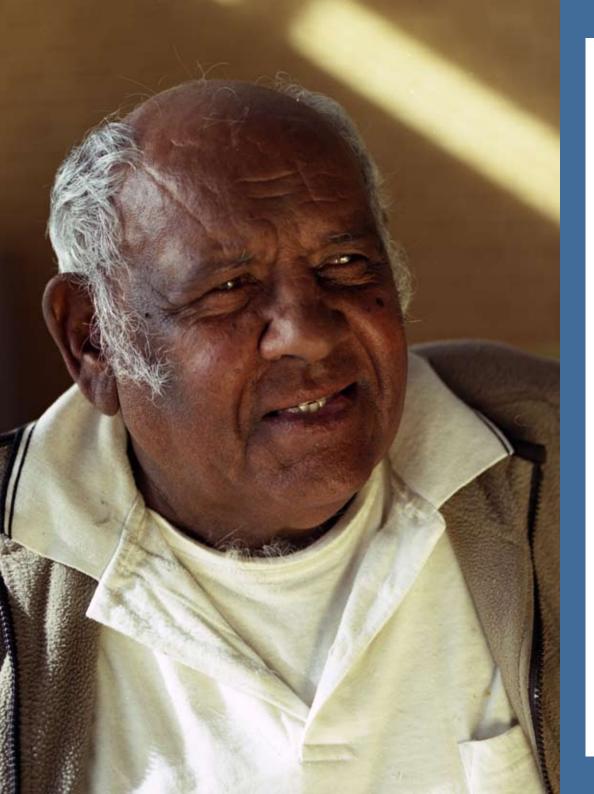
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#### INTRODUCTION

Urinary incontinence affects 3.84 million Australians – men, women, older people and younger people alike. People are affected by urinary incontinence in different ways. Some people leak a little when they cough or sneeze. Others have to rush to the toilet and don't make it, while others cannot store any urine in their bladder and leak almost all the time.

Managing urinary incontinence in everyday life can be very difficult, but if you or someone you know leaks urine or has a weak bladder, you're not alone. You'll find lots of useful information and strategies in this booklet that will help manage the condition in a way that fits into your lifestyle.

The information in this booklet has been provided by nurses who have been working with urinary incontinence and researching this area for many years. They understand your problem and help people like you on a daily basis. The information has also been gathered from more than 300 adult men and women living with urinary incontinence who have shared their ideas with us on how they manage their condition. Interestingly, many of them used the same strategies.

Please take a little time looking over the material – you may find you have more choices than you think. For example, you can try out our tips for travelling, for visiting friends, for playing sport and for shopping – all the areas of your life where urinary incontinence may be a problem.

If you're reading this booklet you may be waiting for surgery or for other medical treatment to cure your incontinence, or you may have only just started thinking about how you can better manage your condition. Either way, it's important to work with a health professional for advice and support. On pages 21-23 of this booklet you'll find a list of contact details for people who can advise you on treatments and therapies that will help you live better and experience the daily activities you enjoy with confidence.



# LIVE BETTER WORKING OUT WHAT IS BEST FOR YOU

None of us ever wants to have to deal with a problem like a weak bladder, but day-to-day life can be much better if urinary incontinence is managed through:

- Planning
- Practice
- Prevention
- Problem-solving

#### **PLANNING**

People who deal with urinary incontinence every day said it's much better if they make plans that take into account their condition.

For planning to work well you need to work out:

- What things are most likely to motivate me to deal with my urinary incontinence actively?
- What particularly worries me about leaking?
- What things cause problems?
- What things don't cause problems?

With this kind of self-assessment you'll be able to try things out and see if they work for you.

Think about the following questions:

- What aspect of staying dry is most important to me?
- In which situations is it most crucial and around which people?
- When am I most likely to have an accident?
- What situations are most difficult for me to manage?
- What is it about having a weak bladder that I have to manage in order to live my life as I want to live it?

Use the bladder diary (pp. 28–31) and the planning guide (pp. 25–27) to help you plan your activities.



#### THE IMPORTANCE OF PLANNING

Managing a weak bladder is an individual thing. Your physical and social activities at home or work will be different from others, so you have to have routines that suit you. Having theses routines will help you reduce the chance of having an accident and will help you be prepared if you do have one. Being prepared is the key.

You'll probably need different routines in different circumstances, so make sure you plan for:

- Home
- Work
- Travelling
- Special occasions
- Sport
- Being in hospital
- Sleeping away from home
- Sex
- Being spontaneous

Sometimes you'll have set routines, things that you usually do. But life's not always like that, so it's good to think about what it'll take to be able to do things on the spur of the moment. Here are some tips for things to do when you are out socially and you cannot predict everything that will happen.

#### Tips

- Plan how long you'll be out socially
- Plan activities for times when you're more rested
- Plan restrictions (such as cutting down fluids) in one part of the day and then plan to make up the difference in another part of the day
- Keep supplies (spare pads, underwear, clothing, cleaning requirements) in strategic places such as your car, workplace or golf bag
- Learn/identify where the toilets are in your local community (use the National Public Toilet Map see the resources section on pp. 22–33)
- Test strategies at home, before using them when you're out



#### STRATEGIES FOR DAILY LIVING

Remember the key to living with urinary incontinence is:

- Planning
- Practice
- Prevention
- Problem-solving

For each area covered in this section we'll explain: how to self-assess and plan; what you might need to practice; strategies for prevention; and how to problem-solve if accidents happen.

#### **TOILETING**

To prevent accidents and to reduce leaking, people use a number of strategies that involve the use of toilets and the timing of toileting. As with all strategies there may be some you use when you're out and others you use at home. The important thing is to find what works for you and plan to use what you need in different situations.

#### Self-assessment

It's important to be able to get to the toilet in time, wherever you are, to avoid having an accident. When you're at home, holding on for as long as you can will increase the capacity of your bladder. Why not take the time to practice how often you need to go to the toilet and what things help you to hang on for longer?

#### **Planning**

You may discover that certain situations make you go to the toilet more often or less often when you're out. Knowing where the toilet is and going to the toilet as soon as you get the urge are habits that many people with bladder problems practice, especially when they're away from home.

- Plan ways to use regular toileting as a way to stay dry when you're out
- Plan how often you need to go to avoid an accident while you're out
- Plan where you sit when travelling on public transport or when you're out socially.



'When I go to a show I always try to get a seat outside near the toilets, not in the middle, 'cause you have to crawl in front of all the people' – Alanah

#### **Strategies**

When you get an urge to go to the toilet, practice putting it off by thinking about something else, sitting down, talking to someone or creating a distraction. Some people find tightening the pelvic floor muscles helpful.

Many people find it useful to identify where toilets are and the best way to get to them. This is especially important if you don't have much time to spare once you get the urge to go. You can find public toilets on the National Public Toilet Map (see the resources section on pp. 22-23). It's also important to know which places have clean toilets and use them where possible. You could try a popular takeaway restaurant, for example.

To prevent having an accident when you're out, go to the toilet at regular times, for example before going to bed, every few hours or after sitting for some time. Holding on too long can lead to an accident.

When you're planning to go out, go to the toilet:

- Immediately before leaving home
- On arriving
- Before getting into a car to travel
- At times when going to the toilet is less of an interruption

#### **Emergency Strategies**

When there is risk of an accident, as soon as you get the urge:

- Use the closest toilets, whether men's or women's
- Use disabled toilets, or toilets in fast-food outlets or petrol stations
- Carry a card to show people in toilet queues in an emergency: 'I have a health problem and need to use the toilet urgently'



'Never be afraid to go even into a man's toilet, just go ... a toilet is a toilet' – Betty



#### Strategies for men

- If you're embarrassed about using a public toilet (for example, because you
  have a slow stream), use the toilet cubicle instead of the urinal
- Sit down if you find it easier
- Keep a container in the car for emergencies
- If you dribble after you finish passing urine you may wish to consult a continence nurse about the benefits of urethral/bulbar massage



'I carry an old hospital bottle in the boot of the car in case I get stuck somewhere' – Arthur



#### Tips

- Know how often you need to go to the toilet to avoid the risk of an accident
- If you cannot predict how often you may need to go to the toilet, then
  go to the toilet as soon as you get the urge when you're out
- Plan toilet stops into every trip
- Know where the good toilets are when you're travelling
- Take your time when you go to the toilet to ensure you empty your bladder

#### **FLUIDS AND DIET**

Did you know that your diet and weight can affect urinary incontinence and that being overweight can make the condition worse in women? Also, what you drink can affect how much urine you pass and some fluids can irritate the bladder, so it's important to plan your diet and fluids to know what works for you.

#### **Self-assessment**

Completing what's called a 'bladder diary' is a great way of understanding your own patterns. In a bladder diary you record all the times you drink fluids and pass urine either in the toilet or when you leak. By looking at this diary you'll be able to see if there are times of the day when you leak more and whether this is related to activities or when and what you drink.

You'll also need to be aware of what you eat, and if you're overweight you may need to see your doctor or dietitian. Your health professional will be able to use the diary to provide you with tailored advice.

There's a copy of a bladder diary for your convenience at the end of this booklet. Keep this diary for at least three days (up to a week if you can manage it).

It's a good idea to observe the colour and concentration of your urine. Dark urine can be a sign that you may be getting dehydrated and need to drink more fluid. Also what does your urine smell like? If there's an unpleasant odour you may have an infection. A simple test by your doctor will be able to determine if this is the case.



STRATEGIES FOR DAILY LIVING STRATEGIES FOR DAILY LIVING

#### **Planning**

Depending on your self-assessment, you may need to increase or decrease your fluid intake. The usual advice is that a healthy fluid intake is about 1500 to 2000 mls a day, which includes all the food and fluids you have in a day. You may discover that it's best for you to plan your fluid intake over a 24-hour period.

There are some people who need to decrease their fluid intake for other health-related reasons. For example, people with heart problems and kidney problems are usually told to drink less fluid. In all cases follow the advice of your doctor and if you're receiving conflicting advice discuss this with your health professional.

There are some fluids that can cause problems for people with urinary incontinence, either because they irritate the bladder or because they make you pass more urine. These fluids include:

- Drinks with caffeine coffee, tea, cola and some energy drinks
- Acidic drinks citrus juices like orange, lemon or grapefruit juice, cordial, drinks high in sugar, carbonated drinks, and drinks with preservatives and artificial sweeteners
- Alcoholic drinks beer, wine and spirits

These fluids affect people in different ways. You may find that they affect you, or have no effect at all. To test if a particular type of drink makes you leak more, try the following:

- Stop drinking or greatly reduce the amount of the particular drink (such as coffee or alcohol) you have in a day
- Replace this drink with water
- Keep to this low level of the particular drink for a few days
- Keep track of whether your bladder problem improves. If it does then you'll know to be careful of it.

Develop a timetable for eating and drinking that suits your lifestyle, tastes and desires.



#### **Strategies**

You can test the effects of certain food and drink in your own time at home – always worthwhile if you have problems with urgency (needing to go to the toilet in a hurry) or incontinence at night. But only restrict fluids if there's a major problem with leaking. See a continence specialist for extra help on fine-tuning your strategy.



'If I stop drinking at about seven o'clock at night it's much better for me' - loan

'I like to have a cup of tea in the morning, but if I'm taking my daughter to school and then going somewhere else, I won't have a cup of tea, because I know I'll need to go to the loo before I get there' - Kristy



#### **Tips**

#### Amount

- Plan for fluid intake over a 24-hour period. If you restrict fluid intake in one part of the day (such as when you're out socially or before going to bed), make up for it by drinking more at another time
- Drink when you're thirsty
- Drink extra fluids if exercising
- Always be aware that it's possible to take too little or too much fluid

#### If there is a need to increase fluids

- Set weekly goals
- Start slowly, taking time to increase amounts
- Drink a full glass of water instead of half a glass when taking medications
- Drink when you're thirsty, plus extra
- If you don't like water, drink water with flavours, drink juice, or eat ice blocks or jelly, especially in warmer months
- Consider herbal teas, decaffeinated teas, chamomile and lemon teas

#### When out socially

- Limit drinking before going out, and while out
- Limit drinking before particular activities (for example, travelling or playing sport)
- If you're thirsty, drink small amounts over a period of time

STRATEGIES FOR DAILY LIVING STRATEGIES FOR DAILY LIVING

#### Type of fluids

- Substitute water for other drinks where possible
- 'Pilot test' fluids to identify if particular types cause problems (for example, alcohol, coffee, tea or cola). If they're a problem, reduce or avoid them, particularly when you're out socially
- Drink water between alcoholic drinks
- Cranberry juice may be helpful if you suffer from urinary tract infections

#### **BODY CARE AND HYGIENE**

Most people with bladder problems want to keep their condition private, so personal hygiene strategies are important. For some people, if an accident happens, this will mean clearing up immediately or changing slightly soiled underwear. For others with a more severe incontinence problem it'll mean taking care of skin and seeking to reduce odour.

#### Self-assessment

In your self-assessment make sure you look at your skin to make sure you're not excessively red or swollen. (You may need a mirror.) If you are, you'll need to consult your doctor.

If you have a history of allergies, skin conditions, or haemorrhoids (piles) or a prolapse you may need to be especially careful. Again, consult your doctor if you're worried.

#### **Planning**

Plan your daily hygiene routine. If leaking unexpectedly is a problem, make sure you take additional pads, underwear and cleaning cloths when you go out (baby wipes are good).

#### **Strategies**

Clothing should be washable, easy to launder and not require dry cleaning or hand washing. Why not try selecting clothes that are manageable, easy to remove and simple to pull up and down? You'll also want clothes that make it easy to reach between your legs.

- To maintain safety, avoid very high heeled shoes
- Avoid clothing that's tight around the tummy area
- Take an extra change of clothes and/or underwear when you go out
- Clean soiled objects such as furniture and bedding to avoid odour



'If I'm going to be far away from home, I'll take an extra pair of pants with me' – Kim



#### Strategies related to outer garments

- Aim for loose-fitting, comfortable or wrap-around clothing
- Select skirts rather than pants (although long pants and track pants are easy to manage)
- Choose clothing that makes pads less noticeable
- Choose clothing that's dark, multi-coloured or patterned, as these hide accidents
- Use fasteners that are easy to manage such as elasticised waistbands and Velcro fasteners (especially where there's a loss of mobility), but take care with fragile skin
- Consider modifying your clothes if this makes self-management easier (for example, wear a split skirt if you're in a wheelchair)

#### Strategies related to undergarments

- Use natural fibre undergarments that are comfortable next to the skin, particularly cotton and soft wool
- Use garments that are easy to pull up and down
- Choose firm-fitting undergarments to prevent pads from slipping
- Avoid too many layers or double underwear, where possible
- Avoid pantyhose as these can be time-consuming to remove

#### **Tips**

- Change pads every 4-6 hours or as soon as possible after soiling
- Shower regularly and also, if possible, after an accident
- Carry moistened disposable cleaning wipes when out socially (flushable wipes are available)
- Establish a regular skincare routine which may involve barrier creams, moisturisers and wipes - when out and about
- Avoid fragranced skin-care products as these may cause irritation
- If you have a skin irritation see a health professional



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#### PHYSICAL ACTIVITY AND EXERCISE

Some people are more likely to leak if they're exercising or physically active. This depends on what type of incontinence they have, how much and how often they leak, their age and gender, and how quickly they can get to a toilet. As part of your self-assessment why not see if you can work out which kinds of activities cause you problems?

For women, physical activity such as jumping or running can cause urine leakage, especially for those who leak when they cough or sneeze. For men, greater physical activity at work such as lifting and heavy manual labour may mean more leaks or more frequent or urgent trips to the toilet.

Continence aside, it's vital to maintain activity for general fitness, for balance (to prevent falls in later life) and to control your weight. Recent research has shown that some people who leak urine actually stop exercising as a result. Yet for some people with urinary incontinence, gait and strength training may help make urine leakage more manageable.

#### Self-assessment

Wearing a pad in the privacy of your home, try out exercises like walking, climbing stairs, running, running up stairs, jumping on the spot or lifting a moderately heavy suitcase (less than 15 kg).

Which activities make your leaking and urgency worse? How much of an activity can you do before your leaking and urgency gets worse?

#### **Planning**

It's important to think ahead and work out how to get help with activities like lifting. You may be able to modify an activity or swap an activity that causes leakage with one that won't.

#### **Strategies**

Exercise is important for overall health, so even if it makes you leak, don't stop exercising altogether. Replace jogging with walking. Try stopping or limiting exercise that increases leakage (such as lifting, strenuous sports like jogging or swimming or even standing for too long.)

Or why not try passing urine before physical activity or wearing a more absorbent continence pad during exercise?

For women: If you only leak with exercise, coughing or sneezing, you may find using a tampon helpful during exercise as it will support the front wall of the vagina.

And for physical exercise such as sex, urinating beforehand and changing positions are both common ways to reduce leakage.

#### ZaiT

- Maintain exercise for general fitness
- Try out a range of exercises and see what causes leakage
- Empty your bladder prior to exercise
- Avoid activities that can increase prolonged extended abdominal pressure, like heavy lifting
- Empty your bladder before and after sex



'I play croquet and I make sure that I don't have a big drink before I go, because I don't want to have to pull out of the game and have to go to the loo' – Lorna



#### STRATEGIES FOR SOCIAL OCCASIONS

Urinary incontinence doesn't have to dominate your life. All it takes is a little understanding of your situation and you can enjoy most social activities to the full if you plan ahead. In this section you'll learn more about what we call 'social continence'. It's all about living a life that's as normal and as sociable as possible, using toileting strategies, pads and other aids to help increase your confidence.

#### Self-assessment

- Be clear about what makes your leaking worse and which times of the day are more problematic
- Work out the best pad to wear when you're out
- Identify, where possible, a person you can confide in someone you trust who will support you if needed
- Know where toilets and bathrooms are located



'The worst thing that can affect me is when I finish dinner and go to the sink to rinse the dishes. As soon as the water starts, pssht, that's it, I've got to go' - John

#### **Planning**

Everyone prefers to prevent accidents, but if one does occur, it's always best to be prepared with spares and supplies. It also helps if there's someone you can confide in – a relative or close friend who can help. Here are some other tips that can help make socialising easier:

- Work out how long you'll be out
- Plan the most appropriate and convenient timing for going to the toilet during an outing (for example, when leaving a venue)
- Discover toilet locations for the journey as well as the destination (you can use the National Public Toilet Map to help with this; see p. 22)
- Choose social occasions with suitable facilities (such as nearby toilets and disposal bins)



'When we're travelling we always stop at McDonalds, because the toilets are clean and they are right on the highway' - Mary



#### **Strategies**

- Match social activities with who will be there ('I can say excuse me or pardon me very much easier to friends than I can to strangers' - Tom)
- Be aware of triggers (for example, if you go to a restaurant with a fountain or running water, sit as far away from it as possible)
- Choose an aisle seat or a seat close to the toilets where possible, whether you're on a plane or at the theatre
- Change pads right before going out
- Choose accommodation that has an ensuite or is next to the toilets
- Avoid bus tours that don't have frequent stops or on-board toilets
- Use disposable rather than washable pads when travelling

#### Take back-up supplies such as:

- Spare pads and underclothes
- **Pants**
- Deodorised bags
- Moistened towelettes
- Deodoriser
- Plastic bag for disposal of pads, soiled cloths or underwear



#### **Tips**

- Use public toilets, parents' rooms or workplace showers to clean and freshen up after an accident
- Discuss your condition with close family and/or friends so that they will be understanding if an accident occurs
- Develop a sense of humour about it and share the funny side with your family and friends
- Dispose of pads privately (for example, when at a friend's house use the main wheelie garbage bin rather than an in-house bin)
- Pads, aids and supplies can be carried discretely in a bum bag or calico bag
- Work out ways of temporarily hiding wet clothes (such as covering them with your hands, a magazine or an apron)
- If you don't leak all the time, try to have some occasions when you don't wear pads as this will reduce the chance of skin problems

#### PADS AND OTHER AIDS

There are many different aids available that help manage incontinence, with disposable or washable pads being the most popular product choice. Other aids include 'over' toilet seats that help you get on and off the toilet, bed pads to put on the bed at night, pads to help protect the furniture, and waterproof covers on mattresses, doonas and pillows. For men there are also sheaths or catheters and for women there are devices that act as 'stoppers'. Good sources of information about these products are the local continence nurse, community health nurse, or the National Continence Helpline (see the resources section on pp. 22–23).

#### Self-assessment

Why not familiarise yourself with some of these products and test them out for yourself? Shop around and you'll have first-hand experience of what works best for you. Try different types of pads to identify the best kind for your problem and work out how often you need to change them to prevent leakages when you're out and about. You can also try to work out if you need different pads for day and night. You'll find that pads come in a range of sizes, all with different absorption abilities. There are washable pads that can be inserted into underwear and there are reusable pants with built-in pads. These are very effective for people with light incontinence but less effective for people with severe urinary incontinence or faecal incontinence. Once you've tried out a variety of products you may decide that there are other types of aids apart from pads that are better for your specific condition.

STRATEGIES FOR DAILY LIVING STRATEGIES FOR DAILY LIVING

Disposable pads fall into three main groups:

1. Shaped pads that either stick into your underwear with adhesive strips or with special stretch pants

- 2. Pull-up pads/pants
- 3. All-in-one pads that wrap around the body and do up with adhesive tabs

These pads are available in many supermarkets in a limited range of brands and types. Most of the pads sold in supermarkets are for mild to moderate incontinence. Some local pharmacies stock a wider range of brands and products, but can be more expensive. If you wish to try out a variety of pads, some companies will provide samples free of charge.

You may also be interested to know that there are government subsidy schemes available in some states to assist with the supply of pads and aids. To check your eligibility for these subsidies, contact your nearest community health centre or Continence Foundation of Australia branch (see p. 22).

#### **Planning**

Once you've identified which pads or aids are best for you, work out when and how to use them by:

- Choosing the right pad for the amount of urine you're likely to leak
- Using different sizes and types of pads depending on the activity or time of day
- Using different aids or devices for when you're at home and when you're out
- Choosing a pad that's easy to manage
- Choosing a pad that's comfortable and discreet

#### **Strategies**

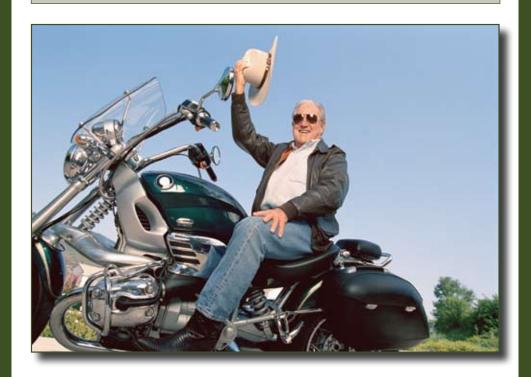
- Wear firm-fitting underwear to hold pads or aids in place
- Use protectors on furniture and bedding
- Take extra pads with you when going out in case there's an accident or your return is delayed
- To avoid odour, attend to hygiene regularly, change pads frequently, use a deodoriser, and launder soiled clothing and underwear regularly
- Wrap or double wrap soiled materials in a plastic bag and wrap soiled material in newspaper for rubbish disposal



'I always make sure I've got a pad on, because I can't just drop everything and go to the toilet. I try to, but it's not always convenient' - Iulieanne

#### **Tips**

- Pads are available in disposable or washable forms. Shop around for the best and most cost-effective pad for your needs
- Know how often you need to change the pad
- Take a change of pads with you when you go out in case of an accident
- Contact your local continence nurse or community health nurse for information about other available products
- Always remember that there's a difference between continence pads and menstrual pads





#### WHERE TO FIND OUT MORE

This booklet has provided you with useful information on managing incontinence. Health professionals will be able to help you further with treatments and therapies. Generally health professionals recommend the following strategies to people with urinary incontinence:

- Treatments (that will hopefully cure urinary incontinence)
  - Drug treatments
  - Surgical treatments
- Conservative management strategies (non-medical therapies that may cure and will hopefully improve symptoms of urinary incontinence)
  - Pelvic floor muscle exercises
  - Bladder training
- Daily living self-management (which is not curative, but aims to help people manage symptoms themselves)
  - Lifestyle changes

We hope that this booklet has provided you with useful information on managing incontinence. Other health professionals will be able to help you further. If you haven't already gone to a doctor or continence nurse for an assessment, why not book an appointment today?

#### Health professionals and how they can help with urinary incontinence

When you're looking for professional help with your incontinence a general practitioner may well be the first person you contact - someone who is well placed to offer you advice and refer you to a continence specialist if necessary.

You'll probably also come across nurses who are involved with the management of incontinence in all settings and across all clinical areas. There are also continence nurse specialists in public and private health care organisations who have specialist knowledge about managing incontinence. Continence nurse advisors can do a comprehensive assessment of your continence problem, and provide advice about treatment, daily living management and other sources of help.

Other professionals include physiotherapists, who have long played a central role in the management of urine leakage. Specialist physiotherapists have been trained to assess urinary incontinence and to teach people behavioural techniques to improve continence. These techniques include pelvic floor muscle exercises, bladder retraining, electrical stimulation and biofeedback, most of which have been shown to be effective in reducing incontinence. You can access physiotherapists directly without referral by a doctor (see the resources section below).

For better assessment, diagnosis and treatment of urinary incontinence, research suggests that health care provided in a specialist clinic is best. Some areas have clinics where doctors, nurses and physiotherapists work together to help people with urinary incontinence. To see if such a service is in your area, contact your local hospital or community nursing service and ask if there are specialist nurses or specialist clinics for urinary incontinence.

#### Resources

Other places that provide information about continence or assistance include:

#### **Telephone helpline**

National Continence Helpline: 1800 33 00 66
 This helpline is staffed by continence specialists who provide advice about bladder and bowel control, local referrals and product information.

#### Internet sites and other resources

- Continence Foundation of Australia (CFA): www.continence.org.au
- National Public Toilet Map: www.toiletmap.gov.au
- Bladder and Bowel: www.bladderbowel.gov.au
- Incontact: www.incontact.org
- Simon Foundation for Continence: www.simonfoundation.org
- Chat rooms associated with self-help groups and some of the pad manufacturers. These provide an opportunity to anonymously discuss problems with other people who also have incontinence. See the Continence Forum at the CFA website: www.continence.org.au/forum/default.php
- Product information from product manufacturers/suppliers: pamphlets and websites
- The phone book for local health professionals
- The Australian Physiotherapy Association (APA): www.apa.advsol.com.au
- Information about pelvic floor muscle exercises: www.bladderbowel.gov.au

#### Assistance with purchasing pads and aids

Advice about funding schemes is available from the National Continence Helpline on 1800 33 00 66. They will give advice about:

#### Federal funding schemes

- Continence Aids Assistance Scheme (CAAS) www.bladderbowel.gov.au
- Department of Veterans' Affairs (gold card and specific white card holders) www.dva.gov.au/health/mainhe.htm





### PLANNING GUIDE

How does incontinence affect my life?

| Life impact                               | 0<br>Not at all | l<br>Slightly | 2<br>Moderately | 3<br>Severely |
|---|-----------------|---------------|-----------------|---------------|
| Everyday tasks                            |                 |               |                 |               |
| Work                                      |                 |               |                 |               |
| Shopping                                  |                 |               |                 |               |
| Social activities                         |                 |               |                 |               |
| Physical activities (e.g. sport, leisure) |                 |               |                 |               |
| Travel for more than 30 minutes           |                 |               |                 |               |
| Going away on trips                       |                 |               |                 |               |
| Sexual activity                           |                 |               |                 |               |
| Feelings about myself                     |                 |               |                 |               |
| Other (specify)                           |                 |               |                 |               |

What have I stopped doing because of my leaky bladder?

When am I most likely to have an accident?

What bothers me the most about the impact of my leaky bladder?

What strategies do I currently use to manage my leaky bladder and how well do they work?

What do I find most difficult to manage?

LANNING GUIDE PLANNING GUIDE

| What daily living activity would I most like to improve? (E.g. travel, exercise, work, special events) | Strategies to try out at home                        |
|--|--|
| What are the things that get in the way of improving these activities?                                 | Outcome of trials or dummy runs                      |
| MY PLAN  |  |
| What are my aims? (E.g. a special occasion, holiday, activity)   | Backup plans   |
| Resources I can access   |  |
|  | Emergency strategies                                 |
| Strategies Short term  | Equipment and supplies                               |
| Medium and long term   | Things I need to discuss with my health professional |
| Planning, preparation or changes I need to make  |  |
|  |  |
|  |  |
|  |  |
|  |  |

26 | Live better with urinary incontinence Live better with urinary incontinence

BLADDER DIARY

BLADDER DIARY

# BLADDER DIARY (EXAMPLE PAGE)

**Date:** 23/7/06

|            | Intake                                       |                   |
|------------|--|-------------------|
| Time       | Amount of<br>fluid (mls)<br>Use a<br>measure | Type of<br>fluid  |
| 7.30 am    | 200 mls                                      | Теа               |
| 8.00 am    | 50 mls                                       | Mílk on<br>cereal |
| 9.45 am    | 150 mls                                      | Water             |
| 12.00 noon | 400 mls                                      | Water             |
| 3.00 pm    | 200 mls                                      | Water             |
| 4.00 pm    | 100 mls                                      | Water             |
| 5.00 pm    | 150 mls                                      | Теа               |
| 7.00 pm    | 100 mls                                      | Whísky            |
| 8.45pm     | <i>50</i> mls                                | Water             |
| Total      | 1400 mls                                     |                   |

| Output in toilet                           |  |                           |  |  |  |
|--|--|---------------------------|--|--|--|
| <b>Time</b> When did you go to the toilet? | Amor<br>of uri<br>passed<br>toile<br>Circle e<br>the S<br>MED or<br>symb | ine d in et either M, LGE | Was the<br>urge<br>present?<br>(Yes or No) |  |  |
| 7.00 am                                    |  |                           | Yes  |  |  |
| 8.15 am                                    |  |                           | Yes  |  |  |
| 10.00 am                                   |  |                           | No   |  |  |
| 1.30 pm                                    | 00   |                           | Yes  |  |  |
| 3.00 pm                                    |  |                           | Yes  |  |  |
| 5.15 pm                                    |  |                           | Yes  |  |  |
| 7.30 pm                                    |  |                           | Yes  |  |  |
| 9.00 pm (                                  |  |                           | No   |  |  |
| 3.00 am                                    | 00   |                           | Yes  |  |  |
|  | 4 2  | 3                         |  |  |  |

| Accidental leaks                             |   |   |  |  |  |
|--|---|---|--|--|--|
| Approximately<br>when did you<br>leak urine? | How much urine did<br>you leak?<br>I = A few drops<br>2 = A medium amount<br>3 = A large amount | Type of pad<br>brand and weighting<br>(E.g. panty-liner/mini,<br>standard, maxi, or specific<br>incontinence product) | Was the pad<br>changed?<br>(Yes or No) |  |  |
| 6.15 am                                      | 2 (medíum)  | No pad  |  |  |  |
|  |   | Míní pad  | No                                     |  |  |
| 9.50 am                                      | 1 (few drops)   |   | No                                     |  |  |
| 10.30 am                                     | 1 (few drops)   |   | Yes                                    |  |  |
|  |   |   | No                                     |  |  |
| 5.00 pm                                      | з (large amount)  |   | Yes                                    |  |  |
| 7.25 pm                                      | 2 (medium amount)   |   | Yes                                    |  |  |
| 10.15 pm                                     | 1 (few drops)   |   | No                                     |  |  |
|  |   |   |  |  |  |
|  |   |   |  |  |  |

What things seem to contribute to or be associated with your leaking?

When I put the key in the door; coughing or stand up after sitting down for some time.

Live better with urinary incontinence

Live better with urinary incontinence

BLADDER DIARY

BLADDER DIARY

## **BLADDER DIARY**

**Date:** 23/7/06

| Intake |  |                  |  |
|--------|--|------------------|--|
| Time   | Amount of<br>fluid (mls)<br>Use a<br>measure | Type of<br>fluid |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |
|        |  |                  |  |

| Output in toilet                                    |  |             |  |  |
|---|--|-------------|--|--|
| <b>Time</b><br>When did<br>you go to the<br>toilet? | Amount of urine passed in toilet Circle either the SM, MED or LGI symbol | (Yes or No) |  |  |
|   |  |             |  |  |
|   |  |             |  |  |
|   |  |             |  |  |
|   |  |             |  |  |
|   |  |             |  |  |
|   |  |             |  |  |

| Accidental leaks                             |  |   |  |  |  |
|--|--|---|--|--|--|
| Approximately<br>when did you<br>leak urine? | How much urine did you leak?  I = A few drops 2 = A medium amount 3 = A large amount | Type of pad<br>brand and weighting<br>(E.g. panty-liner/mini,<br>standard, maxi, or specific<br>incontinence product) | Was the pad<br>changed?<br>(Yes or No) |  |  |
|  |  |   |  |  |  |
|  |  |   |  |  |  |
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|  |  |   |  |  |  |
|  |  |   |  |  |  |
|  |  |   |  |  |  |

What things seem to contribute to or be associated with your leaking?

Live better with urinary incontinence