CONTINUOUS

How to talk to people about continence

Encouraging people to open up about continence can be life-changing for them.

People of all ages can be affected by the involuntary loss of urine and/or faeces. An estimated 14 million men, women, young people and children are living with bladder problems in the UK, according to one study.

However, the prevalence of incontinence is harder to capture than it should be – in part, because of the embarrassment people feel about seeking help.

There is an expectation that childbirth or ageing may cause incontinence, and when a family member or friend has had this experience, an individual may believe it will inevitably happen to them too.

As healthcare professionals, we have an opportunity to break this cycle, sharing the knowledge that there are treatments to improve or cure incontinence.

Nationally, provision of bladder and bowel services is inequitable, and there is still the challenge of getting the Nursing and Midwifery Council to recognise that bladders and bowels should be on the agenda for preregistration nurse training, as part of fundamental care.

But continence should be every nurse’s business. Understanding the cause of an individual’s incontinence, whether it is urinary or faecal, is paramount.

Whether the person is receiving acute, community, or private sector care, it is...
What to discuss with patients

» What are you drinking on a regular basis? Drinking lots of caffeinated or fizzy drinks, blackcurrant squash or alcohol can make your symptoms worse

» Are you drinking enough? Drinking too little or too much could make your symptoms worse

» Is your incontinence making you sore? Avoid talc and zinc-based creams and lotions

» Did you know being constipated can affect your bladder and/or bowels? Try to maintain a healthy diet to prevent constipation

» Are you overweight? Being overweight can put extra pressure on your bladder and bowel

important to ask the trigger question ‘do you have a bladder or bowel problem?’.
Give the individual time to talk about their symptoms and how they manage their incontinence; it may be a conversation they have never had before with anyone.

UK Continence Society’s 2014 minimum care standards address developing pathways and a standardised approach to care to drive education. National Institute for Health and Care Excellence guidance supports a three-day fluid chart as part of the assessment for urinary incontinence and a food diary for bowel problems, quality of life questionnaires and partnership working to improve the patient outcome.

The guidance also states that an incontinence product should not be considered as a treatment and is the last resort when managing incontinence.

When you are providing care for someone who wears an incontinence product, ask if they know why they are having problems with their continence. Do you know why?

It can be argued that the advertising of products on television normalises incontinence, encouraging the expectation that everyone will become incontinent and reducing the likelihood that people will seek help.

On the other hand, raising the profile of these specialist products may mean fewer women resort to sanitary products, which tend to be cheaper than incontinence pads but increase the risk of skin soreness. In a welcome development, one company is changing the packaging of its incontinence pads to include a recommendation to seek advice from a healthcare professional.

Social isolation
In children and adults, incontinence can lead to social isolation: a child may be afraid to go to a sleepover; an older person may stay at home rather than risk going out for the day.

With more public toilets in the UK closing, people are having to ‘toilet map’ their journeys to be sure they will be able to reach a toilet in time. When this is too difficult, they can become trapped at home.

Opening the conversation about continence can lead to an assessment and a plan of care that results in the person not needing an incontinence product. They are freed not only from their reliance on products but from the anxiety and isolation that often goes with incontinence. It is life-changing.

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