



Promoting and managing continence for people with dementia mate wareware

Continence management issues can affect anyone regardless of their age or gender or ethnicity. In Aotearoa New Zealand, it's estimated that of the estimated 70,000 people living with dementia mate wareware 35,000 are likely to have some urinary continence issues and 18,500 some faecal continence issues.

Incontinence is the name given to the involuntary loss of urine (pee) or faeces (poo). Although people of all ages can have problems with managing their continence through no fault of their own, it is a subject rarely discussed.

Incontinence may be caused by a number of different medical conditions and may also arise during the later stages of dementia mate wareware, often due to confusion and memory loss, but there can also be other contributing factors.

Maintaining continence for as long as possible helps to reduce the development of health-related issues, to maintain the self-esteem and independence of the person with dementia and to reduce care partner/whānau stress and care partner burden. It is important to seek advice from your health professional as soon as problems with managing continence occur because any issues might be caused by medically related problems that are treatable. They can also refer to a continence nurse who can provide specialist advice and support to either maintain continence or manage incontinence.

This information sheet suggests resources and offers suggestions which will be helpful in maintaining continence and managing continence-related issues.

What are some of the medical reasons for continence problems?

Although they can occur at any age, older people have a higher risk of experiencing continence related issues. Common medical causes of continence related problems in older people include urinary tract infections, constipation,

prostate gland problems, and side effects of some medications. Because continence problems caused by these conditions are usually treatable it is important to talk to your health professional as early as possible after continence related issues such as “accidents” begin. They might not be related to having dementia. Health professionals are used to dealing with these sorts of problems and so embarrassment should not stop you from seeking help from them.

Why do people with dementia experience continence difficulties?

Some of the most common reasons are not managing to find the way to a toilet in time, not recognising a toilet, not being able to hold on long enough to get to a toilet, or that their brains are no longer sending or receiving the messages to recognise the feeling of having a full bowel or bladder. Just because someone has a diagnosis of dementia made aware though, does not mean that they will experience difficulties in maintaining their continence, in the earlier stages anyway. But continence issues are likely to develop as the dementia made aware progresses and once this happens, promoting and maintaining continence then moves to managing incontinence related issues.

Suggestions to help maintain continence for people with dementia

Reviewing the environment is one of the first steps that can be taken. Check that the toilet is easily identified, for example consider using a coloured toilet seat to make the toilet stand out. Also check that the door to the toilet is easy to identify and that it stands out from the other doors in the house. A toilet sign on the door can be helpful. Night lighting to ensure that the way to the toilet can be easily seen can also be helpful, as can be leaving the toilet light on at night. It’s also important to make sure that the toilet is easy to use- toilet aids such as over toilet high seats or hand grips on the walls can be useful.

Good nutrition and encouraging regular toileting, especially after meals can also be helpful. It is important to remember that constipation, a problem in its own right, can lead to both urinary and bowel continence issues. Pressure on the bladder caused by constipation can lead to “accidents” and constipation can also lead to “overflow” of faeces (poo) and bowel accidents. In addition, constipation can cause significant pain and discomfort which the person with dementia might

not complain about but might present by them becoming increasingly confused or agitated, for example, as a result. A good diet with adequate fibre can help, and drinking at least six to eight glasses of water a day, and regular exercise. Other fluids including ice blocks and jelly can be encouraged instead of water. But if constipation is an ongoing problem, it is important to seek health professional advice.

Clothes which are easily unfastened may help avoid “accidents”. Track suit trousers or full skirts, and velcro fasteners rather than zips and buttons could be considered. Offer assistance with removal of clothing if necessary. If clothes are wet or soiled it is important to change them to avoid skin issues.

When “accidents” start to occur

Accidents are bound to happen, but it is important not to create too much fuss about them. Problems around toileting can be humiliating and embarrassing for the person with dementia and creating a fuss about them will only add to their discomfort. However, for the person supporting someone with dementia managing issues with incontinence can sometimes feel like the last straw. It can get tiring and frustrating and seems like a constant round of washing and drying clothes and bed linen.

A gentle reminder may be needed

People with dementia may not notice or may not be able to tell you when their bladder is full or may start to walk to the toilet then forget their destination. It’s important to use short simple instructions. Watch for non-verbal clues, such as reaching for the belt, tugging a zipper, restless behaviour or facial expression that may signal distress.

Continence products (pads)

There are many products available to help manage continence and make everyone’s life easier. Although there are various continence products available for purchase at the supermarket it is better to get a proper assessment to ensure that the product is fit for purpose including being the right fit. Incorrect fit or the wrong type of product can lead to leakage.

An assessment requires a referral – see the Guide to promoting and managing continence for people living with dementia mate wareware.

Tempting as it might be though the temptation to use continence pads and say “you can just pee/poo in the pad”, or to use a bedside commode or urinal should be avoided as long as possible and regular toileting continued. Not only does that help maintain the self-esteem of the person with dementia mate wareware and reduce skin related issues, but it also encourages mobility in getting to the toilet, important for the maintenance of muscle tone and reduction in falls risk.

Getting support

It isn't always easy to find the right support just when you need it. The resource at the end of this information sheet [Guide to promoting and managing continence for people living with dementia mate wareware](#) on page four outlines different types of assistance available and the pages after detail what these are and how they can be accessed.

Continence NZ also has some valuable resources from videos and resources from a toilet card for use to advise that you need access to a toilet quickly, to constipation hints and management, good food guides and other information related to continence products and maintaining good skin care.

Resources

- [Continence NZ](#)
- [Guide to promoting and managing continence for people with dementia mate wareware](#) – Auckland University 2024