

## TOP TEN FACTS EVERY NURSE SHOULD KNOW ABOUT INCONTINENCE

June 15, 2008, Concord, NH – Many beliefs about incontinence have come into question over the last few years as research generates better information for nurses. The following top ten facts may help some nurses to better serve their patients:

1. Incontinence is not a normal outcome of aging.

The inability to control urine is one of the most unpleasant and distressing problems from which a person can suffer, often causing isolation, depression and physiological problems. Urinary incontinence is NOT part of the normal aging process but it IS a sign of an underlying problem that requires careful assessment.

2. Patients are more likely to discuss incontinence problems, symptoms and treatments with a nurse than with a doctor.

The widespread stigma around patients discussing urinary incontinence places a greater burden on nurses to introduce the topic of bladder control. Nurses understand the best ways to initiate a dialogue with patients, put them at ease, and encourage them to talk about symptoms, related issues and lifestyle changes. They can offer significant help to their patients in overcoming their reluctance to discuss bladder control problems -- after all, in a recent poll, nurses were named the health care professionals most trusted by the public.

3. Incontinence can often be cured or improved with simple lifestyle changes.

Many people with symptoms of urinary incontinence (UI) or overactive bladder (OAB, symptoms of which include urinary urgency, frequency and frequent trips to the bathroom at night) find their symptoms improve as a response to changes in their behavior, environment, or lifestyle. New skills, habits, and strategies for preventing UI and lifestyle changes, such as smoking cessation, weight reduction, dietary and fluid intake changes, bowel regulation, bladder retraining, and pelvic floor muscle exercises are all included.

4. Kegel exercises work and should be encouraged for men and women.

Also known as pelvic muscle exercise or rehabilitation, Kegels can significantly improve various types of incontinence in men and women. It is important for people to know about Kegel exercises because they are a type of simple, inexpensive, self-care that really works. Up to 80% of the incontinent population can benefit from Kegel exercises.

5. Chronic pelvic pain in women correlates with physical abuse.

Chronic pelvic pain (CPP) afflicts up to 10% of women and results in billions of dollars in direct and indirect costs. Studies have shown that women with CPP are more likely to have a history of sexual abuse compared to other groups of women. They are often referred to many specialists and, in the process, may be subjected to expensive tests and exploratory surgery only to be told that 'nothing is wrong' because no underlying pathology was discovered or identified. Many women consent to hysterectomy or other major surgery and still experience pain. CPP is often intractable and unremitting and may lead to lifestyle changes that affect work, recreation and personal relationships. An integrated multidisciplinary team approach to treatment is often the best way to provide the greatest chance of a long-term cure. Nurses can play a major role in helping these women open up about their symptoms and in finding appropriate treatment.

6. Many people go into nursing homes due to incontinence.

Urinary Incontinence is a burden for family caregivers and the community and is the major reason aging parents are put into nursing homes. Nurses can play an important role in helping families caring for elders at home to identify qualified help, find solutions to incontinence issues and manage homecare. If all elders with treatable or managed incontinence were kept at home rather than being admitted to nursing homes, the cost savings in both anguish and dollars would be substantial to families and communities.

7. Incontinence and depression are related.

Researchers at the University of Virginia Department of Urology and Walter Reed Army Medical Center found that a brain chemical called serotonin, which malfunctions in people with depression, may also be linked to urge incontinence from an overactive bladder. That means antidepressant drugs used to block serotonin absorption in the brain may also help patients manage urge incontinence. Unlike stress incontinence, which is when bladder muscles weaken through aging, physical stress such as coughing, or neurological disorders, urge incontinence can be inherited and often begins in childhood. Nurses who talk with their patients about incontinence should also be on the lookout for symptoms of depression and vice-versa.

8. Many new products are available to manage incontinence that can't be resolved through lifestyle changes and Kegel exercises.

As Director of the Incontinence Center at SeekWellness.com, Diane K. Newman, RNC, MSN, CRNP, FAAN, identifies new products as they are introduced to the market, tests them with her patients, and recommends them to visitors of the website. The afex system for male incontinence, a revolutionary new product, was made available to patients through the website in 2004. You can learn about other such products through our Underwear Buying Guide at <http://www.seekwellness.com/buying-guide/>.

9. Expert help is available for your incontinent patients and for you.

Another service that Diane provides at her website is Ask an OAB Nurse where she answers questions about incontinence (not just OAB) from patients at [www.seekwellness.com/askanoabnurse/](http://www.seekwellness.com/askanoabnurse/) and questions about incontinence from nurses at [www.continencenurse.net/askanexpert/](http://www.continencenurse.net/askanexpert/). All questions are anonymous and once answered, they are filed in a searchable database online so others can find answers to their own similar questions.

10. Referrals to qualified professionals for your patients with pelvic disorders are becoming easier to find.

Since 2006, the SEPHIA™ Database has been supplying contact information for pelvic health specialists through [www.SEPHIASchoice.com](http://www.SEPHIASchoice.com). Free searches are available by geographic area and condition. An advanced search feature gives site visitors the ability to find very specific services with up to fifteen variables. If you provide services, make sure to visit the website and register your services at [www.sephiaschoice.com/register/](http://www.sephiaschoice.com/register/).

To learn more about Kegel exercises and incontinence, visit [www.SeekWellness.com](http://www.SeekWellness.com). Nurses

interested in learning more about treating incontinence, should visit [www.continencenurse.net](http://www.continencenurse.net).

Wellness Partners, LLC was formed in 2001 by a group of healthcare professionals who want to put the “heart” back into healthcare. They hope to empower consumers and form partnerships to change the health care system through education, interaction and support. Most importantly, they want the consumer to seek wellness always. Wellness Nursing, LLC was formed in January 2008 to develop, manage and distribute continuing education opportunities and up to date information through [www.continencenurse.net](http://www.continencenurse.net). Access other WPL web sites at [www.seekwellness.com](http://www.seekwellness.com) and [www.sephiaschoice.com](http://www.sephiaschoice.com). For more information, contact Josee Archer at 800 840-9301.