

Urinary Incontinence

Understanding, Assessment and Treatment

Includes assessing and assisting cognitively impaired residents to achieve improved urinary incontinence

Demographics

Urinary incontinence (UI), a loss of bladder control, is a common problem. It affects people of all ages, both sexes and all races.

It is estimated that approximately 25 million Americans are affected by urinary incontinence (U.S. Department of Health and Human Services, 1992).

More than 50% of the adults in extended care facilities, up to 35% of older people living in domestic settings, and as many as 41% of women experience urinary incontinence.

Translated in to dollars that comes to \$15 billion for care of incontinence of all persons, young and old. The annual public health costs associated with incontinence are approximately \$11 billion. Medicare data indicates that failure to treat urinary incontinence results in extra hospital days at a cost of \$3.8 billion, as well as \$174 million for related skin conditions and \$1.7 billion for additional nursing home admissions.

A high correlation exists between urinary incontinence, pressure ulcers, infections, low self-esteem, shame, fear, depression, and increased social isolation.

80% of long-term care residents require assistance with toileting and 54% are incontinent.

Urinary incontinence is the second leading risk factor for institutionalization.

Incontinence increases with age but, is not part of the normal aging process. It is always a symptom of an underlying problem, not a disease itself.

Unfortunately, many patients don't talk about incontinence. They may be embarrassed or simply believe that it's an inevitable consequence of aging. Indeed, Time Magazine called it "the last of the closet issues" because of the general lack of public awareness.

Widespread advertising and availability of incontinence products aid in the "cover up of symptoms and abet the conspiracy of silence" (Maloney, Cafiero, 1999). This along with the myths that urinary incontinence is a normal part of aging and that cognitively alert and mobile persons are not incontinent, causes older adults, their families, and nurses to brush off the possibility that successful interventions can be achieved. Most older adults, and society in general, don't know that treatment is possible.

Because of social stigma and misconceptions attached to urinary incontinence (UI), it is estimated that less than half of those affected see a physician about their condition. The National Institutes of Health (NIH) state: "In addition, when it is reported, many physicians and nurses, who need to be educated in this area, fail to pursue the investigation of UI. As a result, this medical problem remains under-diagnosed and under-reported."

With the many advances in the treatment and management of urinary incontinence (UI), health care professionals claim that 70-80% of people can be cured or significantly improved.

Review of the normal urinary system

The function of the urinary system (also known as urinary tract), comprising of the kidneys, ureters, bladder and urethra, is to make and excrete urine.

The kidneys are bean shaped glands (about the size of your hand) located on either side of the vertebral column (spine) in a depression high on the posterior wall of the abdominal cavity.

The kidneys contain numerous (more than a million in each kidney) urine making units, known as nephrons. Each nephron contains