Everyday Aids and Appliances

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AIDS FOR URINARY INCONTINENCE

Urinary incontinence is common: an average general practice of 2500 patients will include at least 40 people of different ages with moderate or severe symptoms.¹ Common causes include constipation, diuretics, infection, and low fluid intake. Specialist urodynamic investigation is carried out by urologists and gynaecologists, and an increasing range of treatments for the unstable bladder and for pelvic floor weakness is provided by continence clinics staffed by nurse continence advisors working in conjunction with doctors.² Unfortunately, most people with urinary incontinence do not seek professional help; instead they attempt, with varying degrees of success, to conceal their symptoms by using sanitary towels or household materials such as strips of bed linen. Whatever the cause of incontinence it is essential to make the patient comfortable while investigations and treatment are carried out.

Design of incontinence pads and pants

Daytime incontinence in women is best controlled by an aid which is comfortable to wear, easy to use, highly absorbent, and discreet. Patients differ in the importance they attach to each design factor: some like an aid which is designed not to distort the contours of their figure; others give priority to absorbency and comfort. So it is important to offer the patient a choice. Additionally, the continence advisor should explain how each aid is used, because without professional advice it is easy for the patient to misunderstand the manufacturer's instructions.

FIG 1—Plastic backed pad.

Pads usually contain wood pulp overlain by a polyester cover stock and have a plastic backing. The cover stock allows urine through while keeping the patient's skin dry. The plastic backing overlaps the edges of the wood pulp to reduce leakage. Pads are normally changed at convenient times of day and the number of pads used has been shown to have little relation to absorbency. New

substances such as highly absorbent gels have few advantages over conventional materials; although they are less bulky they are more expensive and do not "look" absorbent.

An extensive comparative study recently carried out by the DHSS³ on the performance of various types of pads and pants concludes that three designs will suit the needs of most patients.

FIG 2—Pad being inserted into marsupial pants.

Mild and moderate incontinence can be effectively controlled by a marsupial system such as the Kanga single pad used with Kanga lady pants, which are worn instead of normal underwear. A pad without backing fits into a waterproof pouch separated from the wearer by one way polyester material. The chief drawbacks of this system are that changing the pad requires some degree of dexterity and that patients with more severe symptoms experience problems of odour and are likely to get their hands wet when removing the used pad.

Severe day and night incontinence is best controlled by using a pad backed with plastic and worn with stretch pants. Pads designed to fit the body, such as the Mölnlycke Tenaform range, seem least affected by leakage and splitting of the cover stock.

The third option is the all in one diaper; it is similar in design to children's nappies and includes reusable tapes, one way cover stock, and elasticated legs. Designs such as Tenders are used in some longer stay institutions. Major drawbacks are the need for two or three changes per night and the unwillingness of patients to accept a nappy design.

External incontinence devices for men

For men there are two further options: a dribble pouch for mild symptoms and a penile sheath for moderate and severe symptoms. The dribble pouch is worn inside a normal pair of pants and held in place by an adhesive tab. Its limitations are that it absorbs only small amounts of urine and demands a close fit.

A penile sheath may be held in place by a strip of latex around the penis. The sheath drains into a leg bag, ideally with a textile backing and foam and velcro straps. Problems include skin erosion due to the adhesive strip or urine stasis, twisting of the sheath, penile retraction during voiding causing leakage, and skin abrasions associated with the leg bag and straps.

Incontinence sheets

Some people dislike wearing any system to contain incontinence, particularly at night. Plastic bed covers tend to cause excessive sweating and do little to reduce aroma. Multilayer incontinence sheets commonly end up crumpled at the bottom of the bed; also because they contain recycled paper there is a risk of transmitting clostridial organisms to skin ulcers. A rewashable absorbent sheet can be used with a plastic draw sheet to protect the mattress. The principal disadvantage is the cost: each patient needs three sheets—one in use, one in the wash, and one drying.

FIG 3—Shaped pad.

The provision of incontinence aids

Marsupial pads and pants, body shaped pads and stretch pants, adult diapers, and bed covers are available to community nurses through district and regional supplies officers. Penile sheaths can be prescribed by FP10, but dribble pouches and Kylie sheets must be bought. The Association of Continence Advisors' directory summarises the full range of incontinence products available in the United Kingdom.⁴

If there were more feedback from users and community nurses to supplies departments designs that are cost effective could more readily be identified and the supplies system thereby improved.

FIG 4—All in one diaper.

Since the materials and characteristics of incontinence aids that are worn are continually being changed and improved there is a constant need for clinical trials comparing the performance of different pads. Reordering supplies could be simplified by using either a card index or a computerised system, and a facilitator could stock and update a demonstration case of available pads and pants.

Financial assistance to offset the cost of incontinence may be obtained through (a) attendance allowance; (b) invalid care allowance; (c) supplementary benefit: extra laundry addition, regular baths, need for attendance, special wear and tear on clothing.⁵

Laundry services

A "black bag" collection system may be available through the environmental health department or area health authority; laundry services are available through the area social services department. Both facilities are free of charge.

I wish to thank the Department of Health and Social Security for permission to adapt Crown Copyright illustrations from *Incontinence garments: results of a DHSS study*.

References

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