

Why is incontinence a common problem for people with dementia?



People with dementia are at increased risk of bladder or bowel incontinence for a variety of reasons:

- Their brain may struggle to receive messages from the bladder and/or bowel. This can result in:
 - The bladder or bowel not working as well as it should.
 - The person not being able to control their bladder and/or bowel.
 - The person not understanding the signals that they need to use the toilet.
- The person may have difficulty finding the toilet or understanding how to use it.
- The person may mistake something else for the toilet, meaning that they pass urine in the wrong place.
- There may be difficulty remembering how to perform activities associated with toileting, such as undoing clothing or opening the toilet lid.
- Distraction, low mood, lack of motivation, or mobility issues may make it difficult for a person with dementia to try to get to the toilet.
- The individual may have difficulties communicating that they need the toilet or that they need help to use it.
- The person may not like asking for help to find or use the toilet, due to embarrassment. They may also try to hide any wetting or soiling for this reason.
- Due to typical toileting habits, the person may not be happy to accept help to use the toilet or to change if they are wet or soiled.

People with dementia may also have the same conditions that cause bladder and/or bowel leakage as occur in those who do not have dementia. Many bladder and bowel conditions can be effectively treated. Therefore, an assessment of bladder and bowel health and continence needs should be offered, with appropriate options for the individual's circumstances discussed.

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What is the best way to maintain bladder and bowel health for someone with dementia?

Drinking sufficient fluids is important. People with dementia may not recognise the sensation of thirst, so offering drinks every two to three hours will be helpful. Excessive caffeine should be avoided. Caffeine, which is present in coffee, tea, hot chocolate, cola and many energy drinks, can irritate the bladder lining and increase urine production. Consider offering decaffeinated tea or coffee, herbal or fruit teas, water or diluted fruit squash.

Encourage the person to eat at least five portions of fruit and vegetables a day, as well as wholegrains to help prevent constipation and promote bowel health.

If the person is able, encourage physical activity such as walking or chair-based exercises each day. This can help with regular bowel motions.

Have regular times to use the toilet, including after drinks and meals as the bowel is most active at this time. Allow time and, if possible, privacy for the individual to open their bowels.

Is there anything that can be done to prevent or reduce incontinence for the person with dementia?

Incontinence may not always be directly related to the dementia. Following the above steps to reduce or prevent incontinence may be helpful.

Many causes of incontinence are treatable. Therefore, it is important to speak to a healthcare professional as soon as a problem becomes apparent. Ask for an assessment to see why the incontinence is happening. Regardless of the cause of the incontinence, the healthcare professional should be able to offer suggestions to help or should be able to refer to a specialist bladder and bowel service.

Try using a [bladder diary](#) to see if there are any patterns to their incontinence or toilet use that will help with planning regular toilet visits.

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Try to avoid constipation

Choose clothing that is easier to get undone when using the toilet, such as those with elasticated waists or Velcro.

Consider using motion sensors at night that have lights to help them find the toilet, or have a urinal by the bed for them to use.

Would any changes to the bathroom or toilet help?

For some people with dementia, adaptations to the bathroom or toilet environment may help the person continue to use the bathroom, reducing the likelihood of incontinence. Some things you could consider are:

- Reminders of where the toilet is: A picture with the word toilet (or other word that the person uses) on the door to let the affected person know where the toilet is. This should be at eye level to make it easier to see.
- Have a toilet seat that is a different colour to the toilet pan and the cistern. Try to have the wall that the toilet is on decorated in a third colour, to make it more clearly visible to the person.
- The toilet roll holder and/or the toilet roll should be a different colour from the wall. It should be positioned so that it is easy for the person to reach.
- Traditional style fittings and fixtures may be more familiar than modern ones to the person with dementia.
- Try to have a floor that is a single colour and a similar colour to the flooring of any adjacent room (hallway, landing, bedroom etc). This is because the person with dementia may perceive a different colour as a step. This can increase likelihood of falls.
- Avoid dark coloured flooring, which the person with dementia may think is a hole, making them not want to step on it.
- Try to have a flooring material that is plain with a matt finish. Patterns may appear to be moving, or as steps. Flecks may appear to be crumbs that need to be picked up. Shiny surfaces may appear to be wet to the person with dementia.
- Avoid patterned tiles on the walls as these can result in visual confusion. If tiles are used, try to have a grout colour that is similar to the tiles.

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- Try to avoid shiny surfaces, including mirrors. Some people with dementia may not recognise the reflection of themselves and may be frightened by the appearance of a person.
- Consider having a lock on the bathroom door that can be opened from the outside, in case the person is unable to undo the lock.
- If grab rails are needed, try to have ones that are a different colour to the walls that they are attached too.
- A sign on the back of the bathroom or toilet door may be required to help the person know how to get back out.

An occupational therapist may be able to offer further suggestions and advice. Your healthcare professional should be able to make a referral to them, if it is thought this might help.

What options are there if the person with dementia develops incontinence?

The causes of the incontinence should be investigated by a healthcare professional, who will then make appropriate suggestions for individual treatment (if this is an option) or management. Management options vary according to whether the incontinence is urinary, faecal or both, how often it happens and in what circumstances.

If the incontinence cannot be treated, the person may be offered containment. This may be with pads or disposable or washable underwear, although other options are available. Following assessment, your healthcare professional should discuss the best solution for the individual. Some options may be provided from the NHS, although this will depend on the outcome of the assessment and local policies.

While you are waiting for assessment you may choose to purchase products (disposable or washable pads or underwear). These are available from a wide range of high street shops as well as online. Further information about the types of products available and a guide to help you decide which may be the most suitable is available on the independent [Contenance Product Advisor](#) website.

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Bladder & Bowel UK have more information about [disposable continence products](#) and about [how to get the best out of continence products](#) on the website at www.bbuk.org.uk.

Where can I get more help and advice?

You can ask your healthcare professional (GP, practice nurse, consultant etc) for referral to the local specialist bladder and bowel service.

The [Alzheimer's Society](#) has a useful [factsheet](#) with helpful information on reducing incontinence and managing on a day-to-day basis.

There are charities who provide support to people affected by dementia:

Dementia UK <https://www.dementiauk.org/>

Alzheimer's society <https://www.alzheimers.org.uk/>

Carers UK <https://www.carersuk.org/>

Age UK <https://www.ageuk.org.uk/>

Further information

Find more information about bladder and bowel health in our information library at www.bbuk.org.uk. You can also contact the [Bladder & Bowel UK confidential helpline \(0161 214 4591\)](#).

For further advice on bladder and bowel problems speak to your GP or other healthcare professional.