



**Neuro Café**  
**Continence and neurological conditions**  
**26<sup>th</sup> July 2023**

# Bladder & bowel

- Bladder and bowel problems are **very common**, but rarely talked about.
- We understand that having a bladder and/or bowel problem, can cause embarrassment, anxiety and distress.
- These problems can often have a major impact on an individual's quality of life.
- Do not suffer in silence seek help & learn from peers & experts

# Healthy bladder

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- Commonly someone with a healthy bladder will toilet 4 to 7 times a day, and sometimes once at night.
- Someone with a healthy bladder will be able to hold on before we go to the toilet
- A healthy bladder will not leak when put under a lot of pressure (such as when coughing).



# Healthy bowel

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- People should have a bowel movement between three times a day and three times a week.
- A healthy stool is typically soft and easy to pass.



**Ayurvedic Tip**

### What is a Normal Bowel Movement?

According to Ayurveda, healthy elimination depends on your dosha or Ayurvedic mind-body type.

<b>Vata</b> Dry, not regular   Darker brown   Complete elimination   No gas   Minimal odor	<b>1 bowel movement a day</b>
<b>Pitta</b> Waxy, but passes on when fullness   Shiny yellow-brown   Little odor	<b>2-3 bowel movements a day</b>
<b>Kapha</b> Large in quantity and well-formed   Little odor or even a sweet smell   Brown color	<b>1 bowel movement a day</b>

# Difficulties with continence with neurological conditions

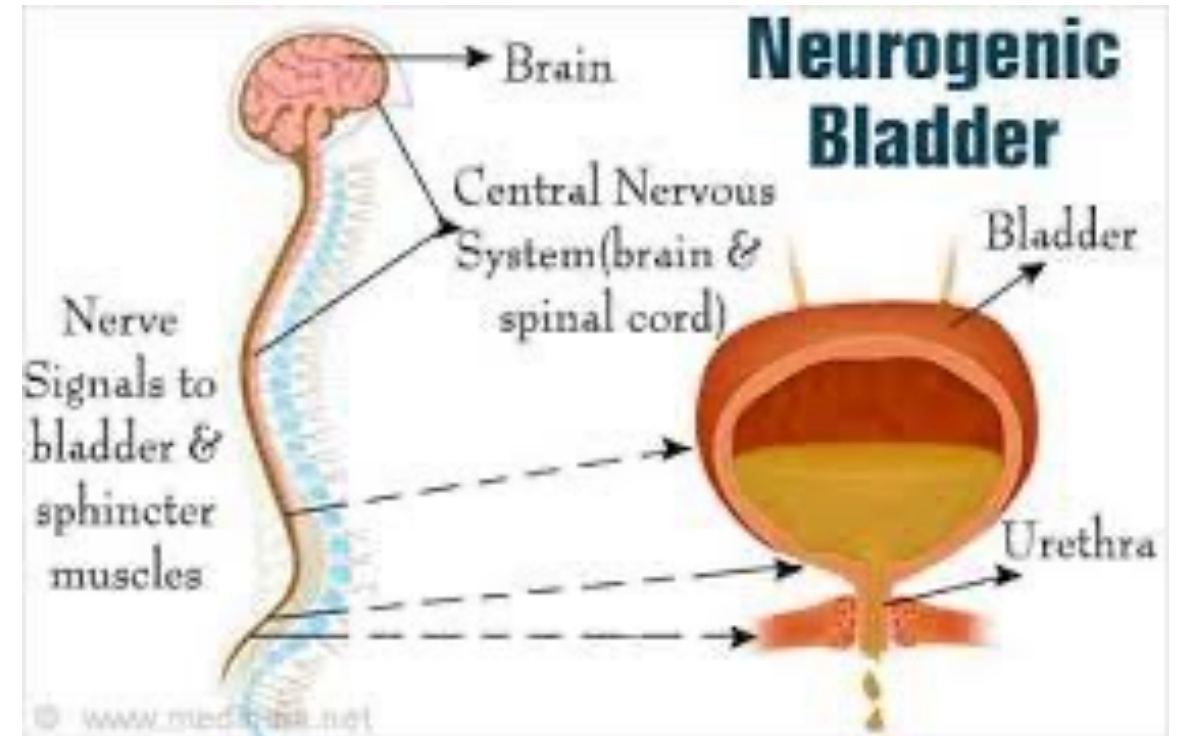
- Difficulty walking may mean you may not always be able to get to the toilet in time.
- If moving around is harder the extra exertion required to move can make it more difficult to maintain bladder or bowel control.
- Being less mobile makes you more prone to constipation and constipation puts pressure on bladder and contribute to incontinence issues
- Difficulty with communications may make it hard to ask for help in time to get to the toilet.
- Many medications, for neurological conditions can affect bladder control or cause constipation when you start taking them.
- Constipation significant issue for many neurological conditions especially Parkinson's

# Bladder queries ??

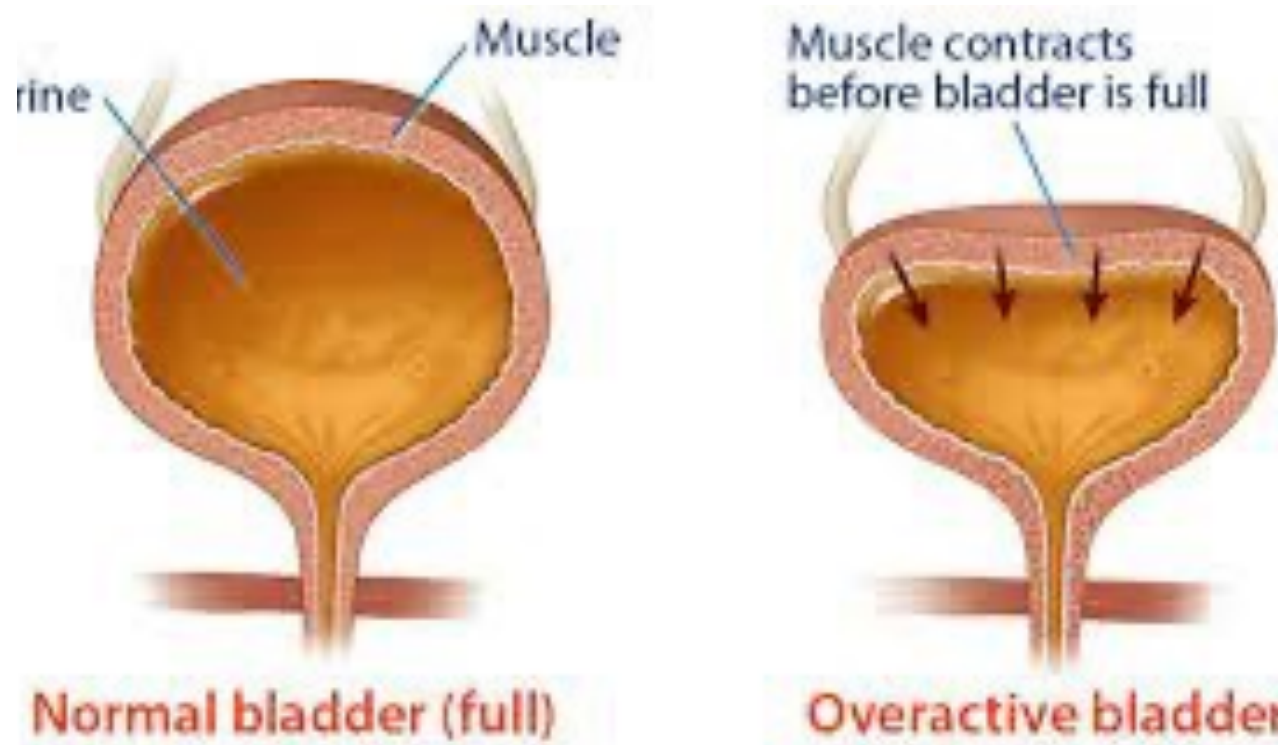
- Do you have a sudden urge to go to the loo or are unable to hold on and reach the toilet in time? You may have [Urgency or Urge Incontinence](#)
- Do you find you need to go to the loo very often and more than 8 times a day? This may be [Frequency](#)
- Do you often need to get up during the night? You may have [Nocturia](#)
- Do you wet the bed at night? You may have [Nocturnal Enuresis](#)
- If you have one or more of the above symptoms, you may have [Mixed Urinary Incontinence](#)
- Do you leak when you laugh, cough, sneeze or exercise? You may have [Stress Urinary Incontinence](#), called SUI for short and often referred to as bladder weakness or weak bladder
- Do you sometimes dribble urine without noticing or need to strain to pass urine? You may have [Overflow Incontinence](#).

# Neurogenic bladder

- Neurogenic bladder is a condition where a brain, spinal cord, or nerve problem causes you to have trouble controlling your bladder.
- Neurogenic bladder can be caused by a variety of neurological diseases and disorders, including MS, Parkinson's disease, spinal cord injury, stroke, spina bifida, and hydrocephalus
- Depending on the nerves involved and the nature of the damage, your bladder becomes either :
  - overactive (spastic or hyper-reflexive)
  - underactive (flaccid or hypotonic).



# Overactive bladder



- Urinary urgency
- Frequency of urination
- Nocturia – going often to pass urine at night
- Urge urinary incontinence – leakage of urine on the way to the toilet usually associated with a feeling of urgency



# Underactive bladder

- Needing to wait for the flow to start
- Needing to push and strain to empty the bladder
- Poor or slow urinary stream
- Stop and start urinary stream
- Prolonged time required to pass urine
- Feeling like the bladder has not emptied completely
- Needing to go back a second time shortly after passing urine to pass more urine
- Reduced sensation of bladder fullness
- Frequent urination
- Urgency
- Urge urinary incontinence
- Overflow urinary incontinence

CASES

PHYSIOLOGY

STRESS  
INCONTINENCE

URGENCY  
INCONTINENCE

MIXED  
INCONTINENCE

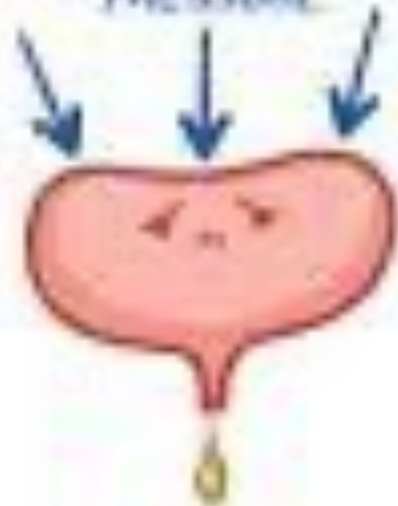
OVERFLOW  
INCONTINENCE

REVIEW

SUMMARY

## TYPES OF URINARY INCONTINENCE

HIGH ABDOMINAL  
PRESSURE



STRESS  
INCONTINENCE



URGENCY  
INCONTINENCE



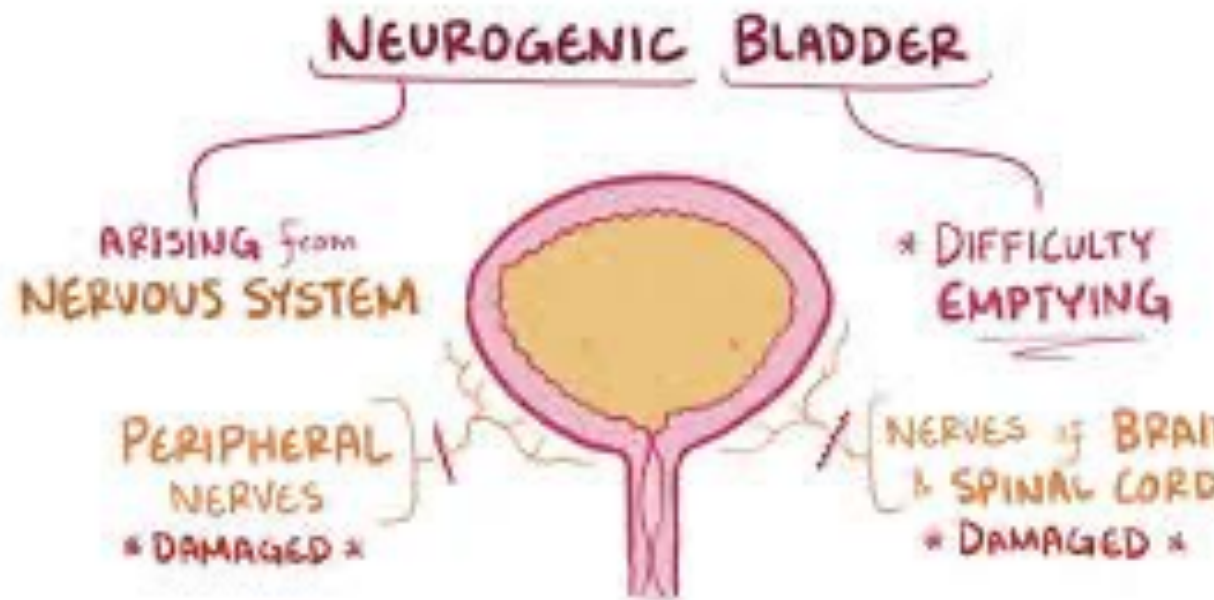
MIXED  
INCONTINENCE

BLADDER  
DOESN'T EMPTY  
COMPLETELY



OVERFLOW  
INCONTINENCE

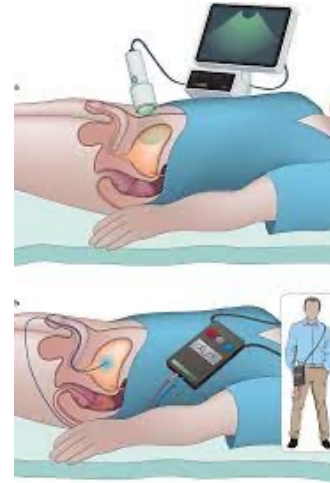
# What are the symptoms of neurogenic bladder?



- The most common symptom of neurogenic bladder is being unable to control passing urine.
- Others include:
  - A weak or dribbling urinary stream.
  - Frequent urination (urinating eight or more times daily).
  - Urgency (a feeling or need to urinate immediately).
  - Painful urination, which may mean there is a urinary tract infection.
  - Urinary leakage.

# How is a neurogenic bladder diagnosed?

- Examination and specific tests:
  - Urodynamic studies
  - Cystoscopy
  - Ultrasound
  - X rays
  - CT scans
  - MRI scans



# Neurogenic bowel

- Neurogenic bowel is the loss of normal bowel function. It's caused by a nerve problem. A spinal cord injury or a nerve disease may damage the nerves that help control the lower part of your colon.
- 2 main types:
  - **Reflex (spastic) bowel problem** – When you can't voluntarily relax anal sphincter. Can cause constipation. Normally from CNS injury such as MS or stroke.
  - **Flaccid bowel problem** – Reduced movement and contraction in colon. May cause incontinence or constipation. May follow a lower SCI.

## How is it Diagnosed?

- Anorectal manometry to measure sphincter strength
- Electromyography to test the electrical activity of the muscles around the anus and rectum
- MRI or CT scan of your brain or spinal cord
- Ultrasound imaging
- You may get the diagnosis from a gastroenterologist

People with neurogenic bowel need to have a routine bowel management program. This includes scheduled routines to remove the stool from the rectum on a regular basis. This helps prevent accidents, constipation, and bowel blockage. Your healthcare team can help you create a bowel management program



# Treatment

- **Keep a bladder & bowel diary**
- **Bladder & bowel retraining** can reduce how often you need to go to the toilet by teaching you to “hold on”
- **Pelvic floor exercises** help strengthen muscles so that they provide support. This will help improve bladder control and improve or stop leakage of urine.
- **Bladder stimulation** vibrating devices are sometimes effective where there is difficulty in emptying the bladder.
- **Medication** may help to reduce urine production, urgency and frequency. Medication for bowel problems can help reduce movement in your bowels or tighten muscles to stop leaking,
- **Weight loss** (if you are overweight) will often improve bladder control in the longer term.
- **Diet** - fibre , reduce caffeine, keep well hydrated
- **Physical activity & exercise**
- **Try & establish a bladder and bowel routine**
- **Equipment to make getting to the toilet easier**

# Medications

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- Medications that work to block or reduce bladder overactivity can be useful in treating urinary frequency and urgency e,g
  - Oxybutynin
  - tolterodine
  - solifenacin and
  - darifenacin.
  
- Laxatives can be useful to manage constipation but ensure you get advice as there are 4 types of laxatives
  - Bulk-forming laxatives – Fybogel
  - Osmotic laxative- lactulose or macrogel
  - Stimulant laxatives- senna
  - Poo-softener laxatives- docusate



# Pelvic floor exercises



<https://www.squeezyapp.com/pelvic-health-information/>



# Equipment

- There are many different products specially designed to keep you comfortable and help you manage bladder & bowels problems discreetly.
- Hand-held urinals
- Pads and underwear
- Bed protection
- Adapted clothing
- Raised toilet seat
- Footstool if your feet do not reach the floor when on toilet may make emptying bowels easier
- Catheters
- Anal irrigation systems

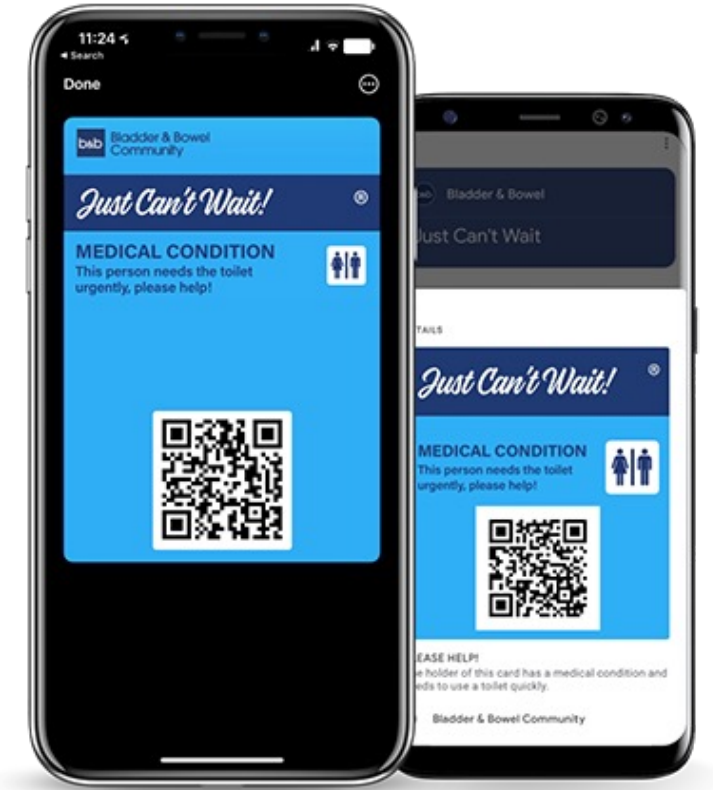


# Top tips for managing continence difficulties

- Adopt a regular toileting regime to help avoid accidents
- Complete pelvic floor exercises – takes time for these to help so persevere
- Drink plenty of fluids during the day – especially water. This will help to avoid infections of the bladder and also constipation.
- Cut down on drinks which contain caffeine such as tea, coffee and cola, and alcoholic drinks, as they can irritate the bladder.
- Try to use the toilet as soon as you need to and empty your bladder fully. This can also help to avoid infections.
- Wear clothes that are easier to unfasten, for example with Velcro or elasticated waistbands instead of buttons or fiddly fasteners.
- Reduce the amount you drink before bedtime and alarms during the night can help to avoid accidents
- Increase physical activity- as this will help your bowel to move regularly

# Just Can't Wait Toilet Card

- Digital or standard card
- Access to toilets not normally available to the general public
- Discreet, clear communication when you just can't wait to use the toilet
- Widely accepted at many cafes, restaurants, shops, entertainment venues and other businesses
- Available on your phone so you don't have to worry about losing your card
- Apple Wallet or Google Wallet for digital
- <https://www.bladderandbowel.org/help-information/just-cant-wait-card/>



# Radar key via National Key Scheme

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- The National Key Scheme offers disabled people independent access to thousands of locked public toilets around the country.
- For a small fee [Disability Rights UK](#) provide you with a radar key and the details of where the toilets are located across the UK.



# Who can help

- Women's & Men Health Physiotherapists
- District Nurses
- Dietitians
- GP
- Specialist Consultant Urologist or even better a Neuro Urologist
- Bladder and Bowel Community
- Age UK Incontinence
- Bladder and bowel UK : <https://www.bladderandbowel.org>
- RADAR NKS Key



- [Disability Rights UK](#)
- [Disabled Living Foundation](#)
- [Bladder and Bowel UK](#)