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Title: STRATEGIC MANAGEMENT OF INCONTINENCE IN ELDERLY WARDS

Introduction:

The Department of Rehabilitation and Extended Care in Wong Tai Sin Hospital received patients from acute hospitals for convalescence, rehabilitation and long stay care. 90% patients are over the age of 60. Incontinence is one of the major nursing care problems in this group of patients whose dignity is compromised. Over 60% patients are found to have incontinence problems on admission. Many of them are caused by functional incontinence due to reduced mobility, impaired mental function and 'unfavourable hospital environment'.

Aim:

To reduce the prevalence of incontinence through a simple ward-based continence promotion programme.

Method:

Patients with incontinence on admission were assessed by ward nurses. They were categorised into 4 groups based on different levels of physical ability for toileting and mental capability to express toilet needs. Each group had different nursing approach in continence management. Patients were re-assessed weekly to review the change of physical and mental state and revise the care plan.

Results:

Three wards participated and 261 incontinent patients completed the programme between Jan 99 and Mar 00. 88.2% were female and 96.8% were over 60. 87.4% were doubly incontinent, 11.0% urinary incontinent alone and 1.7% bowel incontinent alone. Following the programme, 27.0% and 20.5% patients were 'cured' from urinary incontinence and bowel incontinence respectively. The results were most obvious in the group of patients mentally capable to express toilet needs but physically incapable to go to toilet. Subjective assessment by staff, patients and carers showed improvement in incontinence status in 44%, 57% and 61% patients.

Conclusion:

Promotion of continence is not just a business of specialists. It should be the responsibilities of all health care workers. From the programme, it was shown that incontinent elderly patients could actually be cured and manage in a better way through simple but thoughtful care plan, even though with limited manpower and resource.