

THE SITUATION OF RESIDENTS WITH CONTINENCE PROBLEMS IN GERMAN NURSING HOMES

Aims of study

To describe the situation of German nursing home residents with continence problems (CP) like urinary and faecal incontinence, suprapubic catheter, transurethral catheter, stoma. To determine the prevalence of CP and the associated comorbidity, functional abilities of residents and the involvement of relatives and physicians.

Study design, materials and methods

This study is part of the 9-month quality-intervention "KIPS" project (Kontinenzberatung im Pflege- und Seniorenheim) in two nursing homes. At baseline medical and nursing records of all residents were reviewed and abstracted according to a standardised protocol by continence advisers and a geriatrician. In addition structured interviews were performed with nursing staff of each resident.

The study was approved by the ethical committee of the University of Heidelberg.

Results

	Women			Men		
	no CP	with CP	Σ	no CP	with CP	Σ
Number	61	140	201	13	33	46
Mean Age	84,0	84,9	84,6	81,8	78,8	79,7
Residency (years)	6,3	4,1	4,8	2,8	2,1	2,3
Toileting:						
- independent	49 (80%)	24 (17%)	73 (36%)	13 (100%)	8 (24%)	21 (46%)
- dependent	12 (20%)	86 (61%)	98 (49%)	0	20 (61%)	20 (44%)
- not possible	-	30 (21%)	30 (15%)	0	5 (15%)	5 (11%)
Dressing-support:						
- total	18 (30%)	117 (84%)	135 (64%)	4 (31%)	23 (70%)	27 (59%)
- partial	14 (23%)	17 (12%)	31 (15%)	3 (23%)	6 (18%)	9 (20%)
Guardianship	13 (21%)	79 (56%)	92 (46%)	4 (31%)	18 (55%)	22 (48%)
Level of Care*						
- none	7 (12%)	0	7 (4%)	2 (15%)	0	2 (4%)
- 0	10 (16%)	5 (4%)	15 (8%)	1 (8%)	0	1 (2%)
- 1	27 (44%)	46 (33%)	73 (36%)	9 (69%)	10 (30%)	19 (41%)
- 2	15 (25%)	76 (54%)	91 (45%)	1 (8%)	19 (58%)	20 (44%)
- 3	2 (3%)	13 (9%)	15 (8%)	0	4 (12%)	4 (9%)
Disorientation						
- own name	2 (3%)	33 (24%)	35 (17%)	0	6 (18%)	6 (13%)
- situation	6 (10%)	61 (43%)	67 (33%)	1 (8%)	11 (33%)	12 (26%)
Diagnosis						
- neurological	28 (46%)	82 (59%)	110 (55%)	8 (62%)	27 (82%)	35 (76%)
- psychiatric	29 (48%)	104 (74%)	133 (66%)	7 (54%)	27 (82%)	34 (74%)
- musculoskeletal	25 (41%)	84 (60%)	109 (54%)	3 (23%)	15 (46%)	18 (39%)
- cardio-vascular	42 (69%)	100 (71%)	142 (71%)	8 (62%)	24 (73%)	32 (70%)
- cancer	3 (5%)	9 (6%)	12 (6%)	2 (15%)	5 (15%)	7 (15%)

Table 1 Characteristics of nursing home residents with and without continence problems (CP)

* Level of Care according to the mandatory German nursing care insurance.

173 (70%) residents with CP were identified (mean age 83,7). The average stay in the nursing home was 3,7 years with CP and 5,7 years without CP. For these 247 residents 57 physicians and 116 nurses/-aides were in charge.

69,7 % of female and 71,7% of male residents had at least one CP. In the functional abilities like toileting, dressing or cognitive function residents with CP were significantly more dependent.

In table 2 the prevalence of the different types of continence problems is listed. Table 3 shows the number of residents with CP where a physician was consulted because of continence problems and the involvement of relatives into continence related activities like assistance for toileting or change of incontinence aid.

	Women (n=201)	Men (n=46)	Σ (n=247)
- UI	123 (61%)	25 (54%)	148 (60%)
- SC	8 (4%)	9 (20%)	17 (7%)
- TC	19 (10%)	2 (4%)	21 (9%)
- FI	84 (42%)	19 (41%)	103 (42%)
- Stoma	2 (1%)	0	2 (1%)

Table 2: Prevalence of continence problems of nursing home residents

UI = urinary incontinence, SC = suprapubic catheter, TC = transurethral catheter, FI = faecal incontinence.

	Women with CP (n=140)	Men with CP (n=33)	Σ with CP (n=173)
- Physician involved	50 (36%)	14 (42%)	64 (37%)
- Relatives involved	16 (11%)	8 (25%)	24 (14%)

Table 3: Nursing home residents with continence problems (CP) where a physician was consulted and involvement of relatives into continence activities

Interpretation of results

The results show continence problems to be associated with severe functional dependency and relevant comorbidity in these nursing home residents. It emphasizes the need for sophisticated decisions with a focus on realistic goals for the management of CP.

In a significant number of residents with known continence problem neither physicians nor relatives participated in continence related activities. This could be related to mechanisms of embarrassment, shame and hopelessness by the physicians, relatives or nursing staff.

Concluding message

In the planning of continence policies for nursing homes a global strategy is necessary . It should also influence the training of medical staff.

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